The Endocrine Society’s research and clinical community has observed the increasing incidence of diseases with links to endocrine-disrupting chemicals with extreme concern. Bans and controls for chemicals are necessary to meet the public’s expectations for health. Plastic pollution is not simply a waste issue; the entire life cycle of plastics produces harmful exposures.

Strong scientific evidence links groups of chemicals in plastics, including bisphenols, PFAS, phthalates to adverse effects in humans and wildlife. We have estimated disease costs attributable to these chemicals to exceed $400 billion across the US, EU and Canada, and exposures may be even higher in industrializing nations which will produce and consume the majority of chemicals by 2030. While additional research on new chemicals in plastic may be helpful, we have sufficient evidence to act now on many classes of chemicals, including the ones I just mentioned. Recycled plastics have been demonstrated to have heavier contamination, raising concerns that circularity may undermine human health in implementation of the treaty.

Group-based restrictions are needed to avoid regrettable substitutions and achieve efficiencies. Indeed, group-based approaches to bisphenols and PFAS are already under consideration by national and international regulatory agencies. We therefore suggest that any timeframes included in the treaty reflect the urgency of the public health crises driven in part by endocrine-disrupting chemicals, including diabetes, obesity, cancer, and infertility, and the growing costs of addressing these crises.