

AMERICAN MEDICAL ASSOCIATION WOMEN PHYSICIANS SECTION

Resolution XXX
(I-24)

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Subject: Regulation and Transparency of Contaminants in Menstrual Hygiene Products

Referred to: Reference Committee (Assigned by HOD)

1 Whereas, menstrual hygiene products (MHP), such as tampons, menstrual cups, menstrual
2 discs, flex-cups, or menstrual sponges, are currently classified as a medical device regulated by
3 the Food and Drug Administration (FDA) in the US;¹ and
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5 Whereas, tampons are currently Class II medical devices and have to adhere to Good
6 Manufacturing Practices (GMPs) and Quality System Regulations (QSR), which include general
7 requirements to ensure product safety and quality, such as controlling contamination, which can
8 encompass testing for various contaminants, including heavy metals and per and polyfluoroalkyl
9 (PFAS), depending on the “risk assessment” and product specifications;² and
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11 Whereas, the FDA currently recommends that tampons be free of 2,3,7,8- tetrachlorodibenzo-p-
12 dioxin (TCDD)/2,3,7,8-tetrachlorofuran dioxin (TCDF) and any pesticide and herbicide residues,
13 which does not represent a sufficient range of potentially harmful contaminants;³ and
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15 Whereas, new research found that tampons in the US contained the presence of 16 metals
16 contaminants, including arsenic, lead, and cadmium, and reported that no previous studies have
17 measured levels of metals in tampons;⁴ and
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19 Whereas, tampons purchased in the US were found to have statistically significantly higher
20 levels of lead, cobalt, and cadmium than those purchased in the UK and EU;⁴ and
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22 Whereas, research has found that menstrual products contain PFAS, phthalates, and volatile
23 organic compounds (VOC), such as terpenes and aromatic compounds like benzenes (in
24 scented products), 1,4-dichlorobenzene, and naphthalene, which are known or suspected
25 carcinogens;^{5,6} and
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27 Whereas, chemicals known to be allergens, preservatives, and potential carcinogens have also
28 been found in numerous different brands of vaginal wipes;^{7,8} and
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30 Whereas, the vaginal canal is highly absorbent and has direct access to the bloodstream due to
31 its dense network of blood vessels, allowing substances that are absorbed to bypass the
32 digestive system and first-pass metabolism;⁹ and
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34 Whereas, though there is limited research assessing the bioavailability for vaginal absorption in
35 tampons of contaminants specifically, vaginal vasculature has been well established as an
36 effective and efficient method of drug absorption, leading to higher drug concentration due to
37 steady state absorption and lack of gastrointestinal limitations;¹⁰ and
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39 Whereas, arsenic is a known carcinogen and is associated with cardiovascular, and respiratory
40 and neurological disease, and in vivo research has shown vaginal arsenic exposure disrupts
41 oxidative mechanisms in the uterus and ovaries;¹¹

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43 Whereas, the U.S. Environmental Protection Agency (EPA) has said there is no safe level of
44 exposure to lead in water,¹² and even low-level exposure to lead negatively impacts cognitive
45 function; and lead accumulates in bones, substituting for calcium, and can remain in the body
46 for decades, contributing to long-term health issues;¹³ and

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48 Whereas, cadmium is known to be a cause of kidney and cardiovascular disease;¹⁴ and

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50 Whereas, the FDA currently provides levels of acceptable limits of heavy metals in other drug
51 products that have direct contact with vasculature and are made primarily of cotton, such as
52 nonresorbable gauze (lead <10 ppm, mercury <0.5 ppm, and arsenic <1.5 ppm);¹⁵ and

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54 Whereas, PFAS can have half-lives of up to 8.5 years and undergo rapid hematogenous
55 dissemination to the brain, liver, lungs, bones, and kidney and have been associated with
56 reproductive toxicities, developmental delays in children, thyroid cancer, delayed onset of
57 puberty in girls, and liver disease,⁵ and

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59 Whereas, some states have mandated transparency in disclosing ingredients, such as in New
60 York,^{16,17} but there remain loopholes that allow companies to protect trade secrets and omit
61 information regarding ingredients, such as the use of certain fragrances in tampons which
62 contain phthalates, a group of chemicals that are known estrogen disruptors;^{18,19} therefore be it

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64 RESOLVED, that our AMA encourages the FDA to study the safety of menstrual hygiene
65 products (MHP) under current regulations by (1) monitoring the content of heavy metals, PFAS
66 and other contaminants in MHPs; (2) studying the absorption of these contaminants in MHPs
67 into the bloodstream, and (3) evaluating the acceptable limits of these contaminants in MHPs;
68 and be it further

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70 RESOLVED, that our AMA supports more comprehensive research on contaminants in
71 menstrual hygiene products (MHP), including but not limited to tampons, other MHPs, and
72 vaginal wipes, and the absorption of toxins into systemic circulation in an effort to better
73 understand their effects on health; and be it further

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75 RESOLVED, that our AMA will support regulations and legislation that mandate transparency,
76 disclosure, and accurate labeling of contaminants in menstrual hygiene products.

Fiscal Note: Assigned by HOD

Date Received: XX/XX/2024

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RELEVANT [AMA POLICY](#)

Eliminating Lead, Mercury and Benzene from Common Household Products H-135.959

1. Our American Medical Association supports the development of standards to achieve non-hazardous levels of exposure to lead, mercury, or benzene arising from common household or workplace products.
 2. Our AMA encourages efforts to minimize or eliminate mercury use in hospitals and other health care facilities.
 3. Our AMA will work in coalitions with appropriate federal agencies and health care organizations to educate physicians and other healthcare professionals about suitable alternatives to the use of mercury and mercury-containing devices and the appropriate disposal of mercury and mercury-containing devices.
 4. Our AMA encourages efforts to minimize or eliminate lead in all commercial and household products.
- [Sub. Res. 418, I-92 Appended: Sub. Res. 410, A-00 Reaffirmation I-00 Reaffirmed A-03 Modified: CSAPH Rep. 7, A-10 Reaffirmed in lieu of Res. 522, A-12 Reaffirmed: CSAPH Rep. 1, A-22]

Increasing Access to Hygiene and Menstrual Products H-525.973

Our AMA: (1) recognizes the adverse physical and mental health consequences of limited access to menstrual products for school-aged individuals; (2) supports the inclusion of medically necessary hygiene products, including, but not limited to, menstrual hygiene products and diapers, within the benefits covered by appropriate public assistance programs; (3) will advocate for federal legislation and work with state medical societies to increase access to menstrual hygiene products, especially for recipients of public assistance; and (4) encourages public and private institutions as well as places of work and education to provide free, readily available menstrual care products to workers, patrons, and students.

[Res. 209, I-21]

Considering Feminine Hygiene Products as Medical Necessities H-525.974

Our AMA: (1) encourages the Internal Revenue Service to classify feminine hygiene products as medical necessities; (2) will work with federal, state, and specialty medical societies to advocate for the removal of barriers to feminine hygiene products in state and local prisons and correctional institutions to ensure incarcerated women be provided free of charge, the appropriate type and quantity of feminine hygiene products including tampons for their needs; and (3) encourages the American National Standards Institute, the Occupational Safety and Health Administration, and other relevant stakeholders to establish and enforce a standard of practice for providing free, readily available menstrual care products to meet the needs of workers.

[Res. 218, A-18 Modified: Res. 209, I-21]