

Brussels, 3rd June 2025

To:

Mrs. Ursula von der Leyen, President of the European Commission,

Mr. Stéphane Séjourné, Executive Vice-President of the European Commission,

Ms. Jessika Roswall, Commissioner of the European Commission

As doctors, nurses, people working in the healthcare sector, and experts on PFAS we are writing to express our concern about the impacts of PFAS exposure on the health of EU citizens and to convey our full support for the EU's universal PFAS restriction.

PFAS exposure is putting public health at risk

Those PFAS that have been researched in-depth have been consistently associated with adverse health effects such as [kidney and testicular cancer](#), [increased cholesterol](#), [immunotoxicity](#), and fertility issues in both [men](#) and [women](#) etc. **We are very concerned that PFAS exposure may be causing various such diseases in our patients, too.**

Health and regulatory bodies across the world and the EU have started taking notice of the adverse impacts of PFAS exposure on public health. The International Federation of Gynecology and Obstetrics (FIGO) has published a [statement](#) concluding that PFAS pose a risk to the health of children and pregnant women, and therefore should be phased out. The [International Agency for Research on Cancer \(IARC\)](#) classified PFOA as 'possibly carcinogenic to humans' back in 2014 and upgraded the classification to 'carcinogenic to humans' (Group 1) in 2023. The IARC also classified PFOS as 'possibly carcinogenic to humans' (Group 2B). Although both PFOA and PFOS have been banned, they have been [found](#) in the blood of people across Europe. This underscores the importance of the EU's universal PFAS restriction. In 2020, the European Food Safety Authority (EFSA) [assessed](#) a group of four PFAS and based on concerns around their immunotoxic potential, EFSA reduced the guidelines on the tolerable weekly intake (TWI) for the sum of these four PFAS to 4.4 ng/kg body weight. Unless all PFAS are regulated at the source, they will continue to put the public's health at risk.

According to the Nordic Council of Ministers, the health-related costs of PFAS pollution are a worrying burden for society, and estimates have shown that it could cost the EU up to [€52 – 84 billion](#) annually to deal with the health impacts of PFAS pollution. Each day of inaction will lead to these costs rising even higher. Therefore swift actions must be taken to stop PFAS pollution.

Healthcare sector should not be used as an excuse for the continued PFAS use

The universal PFAS restriction dossier provides derogations of up to 13.5 years for some medical devices. Considering that the restriction will not come into effect until the end of this decade, companies would have up to 20 years to phase out PFAS from some medical devices, providing

ample time to ensure patient safety and the continuity of care while even more alternatives are being developed, tested and approved.

As medical professionals, **we firmly reject the use of healthcare as a justification for inaction on the PFAS pollution crisis and the continued use of harmful forever chemicals.**

PFAS alternatives are up and coming in the medical sector

We are inspired by colleagues who have already begun to phase out PFAS in their daily practice. For example, many operating rooms in Europe have already stopped using anaesthetic gases and switched to intravenous anaesthesia such as Dr Niek Sperna Weiland, thereby [eliminating F-gas emissions](#) from their procedures. A meta-analysis by Jasper Kampman et al. shows that [intravenous anaesthesia is just as safe](#), with fewer side effects such as nausea, delirium and short-term cognitive problems - the latter especially in elderly patients.

Another promising development is the [new Dutch directive promoting climate-conscious prescribing](#). This initiative supports physicians in prescribing dry powder inhalers instead of propellant-based metered dose inhalers that rely on F-gases. The choice of inhaler is always made [in consultation with the patient](#). According to Job van Boven, pharmacist-researcher at the University Medical Center Groningen and board member of the Lung Alliance Netherlands, far too many lung patients still use propellant-based inhalers: “About 55 percent of the 1.5 million lung patients use them, [while only 15 to 20 percent actually need them](#).”

As medical professionals we want to collaborate with our colleagues to share the lessons learned. Support from our governments and the European Commission is needed.

Phasing out PFAS is the only way to protect people from the health risks associated with PFAS

The EU should fully seize the innovative momentum and become a trail-blazing example for the world by creating a PFAS-free economy. As healthcare providers, we believe that **the only effective way to protect EU citizens from PFAS exposure is to stop all PFAS use**. We fully support the proposed universal PFAS restriction, including the transition periods granted for essential medical devices. This restriction is needed to drive innovation in the sector and to incentivise and accelerate the development of safer, sustainable alternatives.

Therefore, we ask that you support a full phase-out of PFAS, including in healthcare, under the universal PFAS restriction.

Yours sincerely,

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Diederik Gommers, professor and intensivist

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ReBlend, Consortium for biobased circular textiles/protective gowns
The Icelandic Society of Doctors for the Environment
Centre for Sustainable Hospitals, Central Denmark Region
Professional Association of Dutch Public Health Physicians / Koepel voor Artsen Maatschappij
+ Gezondheid (KAMG)
Dutch Green Health Alliance / Groene Zorg Alliantie
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