Ms. Cynthia Oshita  
Office of Environmental Health Hazard Assessment  
Post Office Box 4010, MS-19B  
Sacramento, CA 95812-4010 

Re: Comments on Prioritization of Chemicals for Consultation by the Carcinogen Identification Committee – Bisphenol A

Dear Ms. Oshita:

The Toy Industry Association, Inc. is the trade organization of the North American toy industry, representing more than 550 manufacturers, retailers, and service providers, all working together to provide safe, high-quality playthings for America’s children. TIA has been a leader in promoting toy safety since the 1930s, and continues to do so today.

I write to you today to offer comments on behalf of the toy industry in response to the OEHHA notice of July 22, 2011 (Prioritization: Chemicals for Consultation by the Carcinogen Identification Committee). Our comments are limited to the prioritization of bisphenol-A ("BPA").

While the toy industry does not manufacture BPA or polycarbonate plastic (the production of which accounts for the majority of BPA use), we are users of polycarbonate in the production of end products, and concerned that a listing of this chemical will amount to a de facto ban of polycarbonate in children’s products. This would be most unfortunate, as polycarbonate offers a balance of physical properties such as extreme impact resistance and lack of notch sensitivity which makes it uniquely suited for protective gear (e.g. helmets and safety goggles) as well as toys requiring high impact strength.

Based on the extensive scientific data available, we recommend that BPA be designated as a low priority for preparation of hazard identification materials by OEHHA and further consideration by the CIC. This recommendation is based on the following facts:

1) Recent comprehensive reviews by such authoritative bodies as the US FDA, the European Food Safety Authority and the European Chemicals Bureau, the Japan AIST, and the World Health Organization have all concluded that there is no
reason to expect BPA to have any potential for carcinogenicity; a sample comment from the ECB is: “Taking into account all of the animal data available the evidence suggests that BPA does not have carcinogenic potential.”

2) While we do not consider the US National Toxicology Program to be an authoritative body in the same sense as the above agencies (as its conclusions include substances suspected to cause cancer-often based on scant evidence—whereas Proposition 65 is required to deal with substances known to the State of California to do so), recent NTP two-year bioassays have found no compelling evidence of carcinogenicity.

3) Evaluations of BPA in bacterial reverse mutation (Ames) tests have consistently produced negative (i.e., non-genotoxic) results, and standard in vitro mammalian genotoxicity studies (conducted under OECD guidelines) of BPA have generally indicated a lack of mutagenic and clastogenic activity.

4) Most consumer exposures to BPA occur from residual amounts in polycarbonate and epoxy resins; residual levels are typically well below 100ppm and essentially non-migrating (typically <1ppb for polycarbonate). In addition, any BPA ingested orally (by far the primary exposure route) is rapidly converted to conjugates (largely the sulfate and glucuronide, neither of which is biologically active) and quickly excreted in the urine.

We thus urge OEHHA to assign to BPA a very low priority for both preparation of hazard identification materials and for further consideration by the CIC. We would like the thank OEHHA for the opportunity to comment on this topic, and would be happy to provide any additional information needed.

If you have any questions, please do not hesitate to contact me at (646) 520-4868 or akaufman@toyassociation.org.

Thank you.

Sincerely,

Alan P. Kaufman
Senior Vice-President, Technical Affairs