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REPORT

drawn up on behalf of the Committee on the
Environment, Public Health and Consumer Protection

on child resistant closures

Rapporteur: Mrs M. VAN HEMELDONCK

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OR.NE.

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English Edition

At its sitting of 15 February 1982, the European Parliament referred the motion for a resolution tabled by Miss Hooper, Mr Sherlock and Mr Moreland (Doc. 1-972/81), pursuant to Rule 47 of the Rules of Procedure, to the Committee on the Environment, Public Health and Consumer Protection.

At its meeting of 28 April 1982 the committee decided to draw up a report and appointed Mrs Van Hemeldonck rapporteur.

It considered the draft report at its meetings of 25 November 1982, 22 June 1983 and 29 September 1983. At the last meeting it adopted the motion for a resolution unanimously.

The following took part in the vote: Mr Collins, chairman; Mr Ryan and Mrs Weber, vice-chairmen; Mrs Van Hemeldonck, rapporteur; Mr Ghergo, Mrs Schleicher, Mrs Seibel-Emmerling and Mrs Spaak.

The report was tabled on 3 October 1983.

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The Committee on the Environment, Public Health and Consumer Protection hereby submits to the European Parliament the following motion for a resolution together with explanatory statement:

MOTION FOR A RESOLUTION

on child resistant closures

The European Parliament,

- having regard to the motion for a resolution tabled by Miss HOOPER, Mr SHERLOCK and Mr MORELAND (Doc. 1-972/81);
- having regard to the report by the Committee on the Environment, Public Health and Consumer Protection (1-795/83);
- A. whereas the European Communities together with the Member States are responsible for protecting human health and human lives;
- B. disturbed by the high incidence of accidental child poisoning due to dangerous products;
- C. having regard to Article 15 (2) of Directive 79/831/EEC of 18 September 1979 amending for the sixth time Directive 67/548/EEC on the approximation of the laws, regulations and administrative provisions relating to the classification, packaging and labelling of dangerous substances (1);
- D. having regard to Oral Question No. 52 by Mr PRAG and the Commission's answer on the need for Community legislation to prevent the poisoning of young children by dangerous domestic products (2);

(1) OJ L 259 of 15.10.1979, p. 10

(2) Debates of the European Parliament, 1-278, December 1981, p. 189

- E. having regard to Written Question No. 1667/81 by Mr COLLINS on the protection of children from dangerous household products (1) and Written Question No. 1886/81 by Mr PRAG on the accidental poisoning of children and young people (2);
- F. bearing in mind that at international level the ISO (International Standards Organization) is engaged in the definition of standards for the packaging of dangerous liquid substances which cannot be opened by children;
1. Requests the Commission to amend as soon as possible existing directives on the classification, packaging and labelling of dangerous substances with a view to promoting the use of safety closures for those household products which have been the main cause of child poisoning and to afford the greatest possible protection for the users of dangerous household products;
 2. Requests the Commission to cooperate with the Member States in conducting an information campaign to promote the safe use of dangerous products and avoid accidents being caused by inattention or negligence;
 3. Instructs its President to forward his resolution to the Commission, the Council and the parliaments of the Member States.

(1) OJ C 85 of 5.4.1982, p. 25

(2) OJ C 138 of 1.6.1982, p.8

EXPLANATORY STATEMENTI. INTRODUCTION

1. In the EEC countries, an increasing number of children are victims of poisoning, corrosion and burns caused by dangerous products.
2. Regulations governing child resistant closures within the Community vary from one country to another in contrast to the situation in the United States where the same regulations apply throughout the country.

II. SOME STATISTICS

3. To illustrate the dangers of swallowing certain products, to which children in particular are exposed, a number of statistics are provided for countries where no regulations exist.

3.1 Belgium

In 1981 (1) the anti-poison centre received on average 50 calls a day as a result of accidents in which children were the victims, caused by:

Pharmaceuticals	46.5%
Household products	27.7%
Industrial and chemical products	3.1%
Weed killers, fertilisers etc.	5.1%
Food poisoning	1.9%
Plants (of which 0.5% fungae)	5.4%
Cosmetics	5.8%
Animal poisons	0.7%
Ethyl alcohol	-
Gas	0.1%
Miscellaneous	3.7%

(1) Statistics supplied by the anti-poison centre.

3.2 France

In 1979 (1) half of all accidents involving children were caused by the consumption of dangerous products, especially pharmaceuticals and household products.

Mainly tranquillisers left in bedrooms but also 'ordinary' medicaments such as aspirin, cough and cold medicines were consumed. The main cause of the accidents lay in the fact that the products were not packed safely or were presented in 'eye-catching' colours.

The main household products to be consumed were decalcifying agents, deodorants, bleach and paint. Likewise shampoos packed in the form of toys or bearing misleading labels such as pictures of apples or lemons were very dangerous.

In 1979, 500 children died in France after consuming such products. 2,500 other children were permanently handicapped as a result and the cost of treatment ran into hundreds of millions of French francs.

3.3 Federal Republic of Germany

The anti-poison centre in Munich (2) (Notruf) received about 15,000 calls in 1981, half of them concerning accidents involving children who had swallowed:

Pharmaceuticals	45.4%
Chemical products	18.0%
Household products	15.0%
Foodstuffs	9.5%
Herbicides and insecticides	4.5%
Cosmetics	4.0%
Plants, etc.	3.5%

In Nordrhein-Westfalen the Informationszentrale gegen Vergiftungen (3) in Bonn received 7,970 calls in 1981, 57% of them concerning accidents involving children.

(1) 'Pour la sécurité des enfants, que choisir', March 1980, No. 149, pp.25-31

(2) Data provided by the anti-poison centre

(3) Data provided by the 'Informationszentrale gegen Vergiftungen an der Universitäts-Kinderklinik und Poliklinik Bonn'

In the Federal Republic of Germany regulations have existed since October 1980(1) governing both the packaging and actual containers of medicines and painkillers. Work is also progressing on the introduction of regulations governing child resistant closures for household products.

3.4 United Kingdom

During the first ten weeks of 1983, Guy's Hospital Poisons Unit in London received 3,192 (2) calls in connection with accidents involving children who had swallowed:

Pharmaceuticals	42.20%
Household products	45.30%
Industrial products	1.00%
Plants/fungus	6.56%
Agricultural products	0.77%
Other	1.04%

Packaging and labelling of drugs in U.K. is covered by the Medicines Act 1968 which has been updated by several regulations and amendments since 1977(3). These state that solid dose aspirin and paracetamol for retail sale must be packed in dark tinted child resistant containers (CRC's) conforming to British Standard 5321. Products for sale anywhere other than a registered pharmacy must be limited to 25 tablets or capsules, 30 effervescent tablets or 10 sachets of powder. Containers of all dispensed medicines sold by retailer must be labelled 'Keep out of reach of children'.

In 1981 a voluntary scheme for use of CRC's for all dispensed medicines was agreed by medical and pharmaceutical professions and the government. This recommends that all solid dose oral preparations should be dispensed in CRC's or unit packaging of blister or strip type.

(1) NORM DIN 55.559

(2) Data provided by the National Poisons Information Service in London

(3) For example the Medicines (Child Safety) Regulations 1975-SI 1975 No. 2000; the Medicines (Child Safety) Amendment Regulations 1976-SI 1976 No. 1643; the Medicines (Labelling) Amendment Regulations 1977-SI 1977 No. 996; the Medicines (Fluted Bottles) Regulations 1978-SI 1978 No. 40; the Medicines (Sale or supply) Miscellaneous Provision) Regulations 1980-SI 1980 No. 1923; the Medicines (Sale or supply) Miscellaneous Provisions) Amendment Regulations 1982-SI 1982 No. 28

There are no regulations concerning labelling and packaging of household products in UK but a bill (1) is being considered by Parliament and a working party has been reviewing the case for legislation.

III. REGULATIONS GOVERNING CHILD RESISTANT CLOSURES

4. One of the arguments in favour of the introduction of general regulations on child resistant closures in the Community is the fact that in the United States the number of cases of accidental poisoning of children has fallen by 80% since regulations in this field came into force.

5. The introduction of regulations would put an end to heavy medical, administrative and legal costs. The consumer publication '50 millions de consommateurs' estimates for example that in France in 1980 each case of poisoning cost the social security system 35,595 FF (2). The manufacture of effective packaging would only mean a slight price rise for the consumer. In France, for example, it would mean an increase of 0.04 FF to 0.10 FF per resistant closure (in 1980) (3).

In addition to the fact that a market will develop for the production of child resistant closures, the introduction of a regulation will also be advantageous for the manufacturers of dangerous products. In fact, in addition to the greater security offered to them, they will be able to make a considerable reduction in their legal costs.

6. Clearly the suffering, pain and other consequences for the victim and those around him cannot be expressed in figures.

(1) Dangerous Household Products (Child Safety) Packaging Bill; see also the study 'Child Poisoning from Household Products', Department of Trade, London, 1980.

(2) Bon a tirer, 1982, No. 45, p.9

(3) Que choisir, op. cit.

7. However, the regulations governing child resistant closures alone are not enough. A universal type of child resistant closure needs to be designed (1). These child resistant closures should then, together with the dangerous products, be the subject of an information campaign aimed at parents and children (e.g. in the schools). The European Commission could do useful work here, by publishing a brochure for example.

Safety closures that prevent danger are necessary. In fact, tests have shown that on the one hand there are certain closures that children can open more easily than their parents but on the other child resistant closures which are too complicated do not solve the problem. The disadvantage of closures which are too complicated is that knives and other dangerous implements are used in order to break them open which of course gives rise to additional hazards and also means that the closure is no longer resistant, thus increasing the chances of children gaining access to the dangerous product concerned. Closures which are too complicated may also give rise to problems for old people living alone.

8. A regulation on resistant closures should go hand in hand with a change in mentality amongst parents. Many accidents occur as a result of careless or unwitting behaviour on the part of parents who for example leave packets or bottles which have already been opened to make a telephone call or chat to the neighbours, leave medicaments on the dressing table or take medicines at the meal table.

9. At the same time as a regulation on child resistant closures is introduced, efforts must be made to prohibit misleading graphic images and the production of colourless or less attractively coloured medicines should be encouraged. In this way it would be possible to avoid arousing children's curiosity.

(1) For an example of such a child resistant closure, see for example 'Household products and child resistant closures' A.L. de JONG, Unilever, paper presented at the 27th SEAWA Conference, 25 - 27 September 1980, Bad Durkheim, Federal Republic of Germany

10. Efforts must also be made to have the safety closures designed in such a way that blind people can also open them.

11. Innovations in the field of child resistant closures should be accompanied by an information campaign linked to health education. Through schools, radio, television, press and other media, people should be informed about the safe use of dangerous products.

12. The proposal for a directive for child resistant closures should not be framed so that the purpose of the directive is merely to add annexes to already existing directives on dangerous substances (1). The intention is to draw up a framework directive for child resistant closures, including imports into/and exports from the European Community, which gives a definition of standards that ought to be enforced and of the products to which the standards apply.

(1) See among others the Council Directive of 27 July 1976 (76/769/EEC) on the approximation of the laws, regulations and administrative provisions of the Member States relating to restrictions on the marketing and use of certain dangerous substances and preparations. OJ L 262 of 27.9.1976, p. 201

MOTION FOR A RESOLUTION (Doc. 1-972/81)

tabled by Miss HOOPER, Mr SHERLOCK and Mr MORELAND

pursuant to Rule 47 of the Rules of Procedure

on Child Resistant Closures

The European Parliament,

- concerned at the ever increasing number of cases of accidental child poisoning due to dangerous household products,
 - believing that a wider use of child resistant closures (CRCs) for dangerous household products could make a significant contribution to the reduction in the number of such accidents,
 - noting the marked reduction in such accidents which has resulted from the wide use of CRCs in the United States,
 - aware that several Member States are considering introducing legislation on the use of CRCs or already use CRCs on a voluntary basis,
 - recalling that in Council Directive 79/831 (O.J. L259 of 15.10.79), Member States were given the option to prescribe child-resistant fastenings for containers not exceeding three litres which contain dangerous substances intended for domestic use (Art 15(2),
1. Calls upon the Commission to carry out a study, examining all aspects of child resistant closures, and in particular, the likely benefit and cost of introducing Community legislation promoting the use of such closures for certain dangerous household products;
 2. Requests the Commission, in the light of the results of such a study, to propose appropriate legislation within the framework of existing Directives on the classification, packaging and labelling of dangerous substances, requiring the use of CRCs for those household products shown to be the greatest cause of child poisoning;
 3. Instructs its President to forward this resolution to the Council and Commission of the European Communities.

