



Australian Government

Department of Health

CHIEF MEDICAL OFFICER

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EXPERT HEALTH PANEL'S INDEPENDENT PFAS ADVICE

An independent expert health panel established by the Australian Government has concluded there is mostly limited, or in some cases no evidence, that human exposure to PFAS is linked with human disease. Importantly, the panel concluded there is “no current evidence that suggests an increase in overall cancer risk”.

The panel also concluded that much of the evidence available is weak and inconsistent and that decisions to minimise exposure to PFAS chemicals should be largely based on their known ability to persist and accumulate in the body.

Australia's Chief Medical Officer, Professor Brendan Murphy, today released the advice from the Expert Health Panel for PFAS.

The panel was established in October 2017 to advise the Government on the potential health impacts associated with PFAS exposure, and identify priority areas for further research.

Comprised of experts in the fields of environmental health, toxicology, epidemiology and public health, the panel considered the evidence available from both Australian and international scientific research as well as the views of the public in forming its advice to the Government.

It met three times between October 2017 and February 2018 and conducted extensive out-of-session work.

The panel found the evidence on health effects associated with PFAS exposure is limited.

It acknowledges there is some research that identifies associations with health outcomes such as high cholesterol. However, there is limited or no evidence of human disease accompanying these associations and many of them are not considered to be clinically significant and require further research.

The panel's report has been provided to the National Health and Medical Research Council (NHMRC) and it will be used to inform the \$12.5 million *National Research Program into the Human Health Effects of Prolonged Exposure to PFAS*.

The panel's findings support the Environmental Health Standing Committee's advice that there is no consistent evidence that exposure to PFAS causes adverse human health effects.

However, given the chemicals continue to persist in humans and the environment, exposure to them should be minimised.

The panel advised the evidence does not support any specific screening or health interventions for highly-exposed groups — except for research purposes.

It also concluded there was insufficient evidence of causation between PFAS exposure and any adverse health outcomes.

When reviewing the panel's report, it is important to understand the difference between an association and causation. An association indicates a relationship between one thing measured and another — in this case, PFAS exposure and an adverse health outcome. Causation means that the thing measured directly causes a change in the other.

The panel recommended future research focus on long-term studies, adding PFAS exposure to existing research, and utilising linkable data from other health studies that relate to exposed communities.

The Australian Government is committed to supporting communities and responding effectively to PFAS contamination. This commitment has included reducing exposure from contaminated drinking water, providing mental health and counselling services, funding an epidemiological study into potential health effects and providing access to free blood tests for PFAS on a voluntary basis.

The Expert Health Panel for PFAS's report is available on the [Department of Health website](#).

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