

**Open letter to the United Nations Secretary General Ban Ki-moon and the World Health Organization Director General Dr Margaret Chan**

September 5<sup>th</sup>, 2011

Dear United Nations Secretary General,

Dear World Health Organization Director General,

We welcome the joint initiative by the United Nations and the World Health Organization to host a high-level expert committee meeting on the prevention and control of non-communicable diseases, with a specific focus on the poorest countries of the world, during the UN General Assembly Session to be held in New York on the 19<sup>th</sup> and 20<sup>th</sup> September, 2011. We welcome the recognition by Heads of States of the seriousness of this global threat for all populations worldwide, assessed in the following terms:

- Non-communicable diseases account for over 63% of deaths in the world and further increases are expected, in particular in the African region;
- 29% of these deaths concern people under 60 years of age, living in low-and-middle income countries;

We deem it legitimate to qualify, as you did, this global trend of “epidemics” and “imminent catastrophe, a catastrophe for health, society and all the more for national economies”. We share the analysis that non-communicable diseases can no more be considered only as a medical or public health issue but are closely connected to development policies and raise political concerns. We know that the prevention of these diseases can be done at two levels: individual and collective. Therefore, Governments of countries of the world have an ethical responsibility to act to prevent part of these diseases. We support the recommendations of limiting tobacco use and of a healthy diet, low in refined sugars, saturated fats and salt and we cannot accept that economic interests undermine the efforts of the international health community to help populations change behaviors in a responsible way.

We consider it necessary for global health of the world population to also consider some other non-communicable diseases as well as other exposures, beyond the ones which are amenable to behavioral interventions. Namely, we call for the inclusion in the UN resolution of neurologic and psychiatric disorders as well as reproductive problems, in addition to cancers, diabetes, cardio-cerebro-vascular and respiratory diseases, as they do represent a significant share of the morbidity and are influenced by environmental risk factors. We also urge for a serious consideration when dealing with occupational factors of disease, of the issues of child labor as well as the specificity of women in the work force, in terms of sensitivity to potential toxics during reproductive years while also keeping in mind the issue of equal men treatment and pay at a comparable position and with similar education, training and experience.

Among the risk factors to be considered, the physico-chemical pollution of air, water, food, soil and objects of daily living is of major concern. This corresponds to the presence in our general, occupational and domestic living environment of carcinogens, teratogens, endocrine disruptors and other toxic agents, ranging from indoor and outdoor air pollution, poor quality drinking water, food

supply contaminated by pesticide and medicinal drug residues to exposures at the workplace, in particular in countries with no occupational medicine, industrial hygiene or any other form of worker protection, and with frequent legal or illegal child labor. We are concerned about the effects of these chemical and physical (ionizing and non-ionizing radiations, such as EMF emitted by cell phones) agents in the population as a whole, but even more so among susceptible groups, such as women of reproductive age, children and disadvantaged individuals. The only effective way to protect the world population is to act at a global level, in particular through legislation at the national level and a framework convention at the international one.

The text of the UN Resolution needs to make clear statements and propositions such as the ones unanimously adopted during one of the preparatory meetings in Asturias which listed, among others the following key recommendations:

“1. Prevention of the environmental and occupational exposures that cause cancer must be an integral component of cancer control worldwide. Such prevention will require strong collaboration across sectors ... and among countries, and also with civil society and the media.”

....

“4. All countries to adopt and enforce legislation for protection of populations, especially the most vulnerable populations, against environmental and occupational cancers.”

.....

“6. Corporations to comply with all rules and regulations for prevention of environmental and occupational cancers and to use the same protective measures in all countries, developed and developing, in which they operate.”

...

These measures if they are implemented will have a much larger impact than the one on cancer. In fact, many carcinogens are also reproductive hazards or just simply toxic for several organs in humans (brain, kidney, liver, etc.). By removing them from our environment or at a minimum limiting exposure to them, we can significantly contribute to making the children of today and future generations healthier.

We kindly request you to consequently complete the list of diseases and priority risk factors to reflect up to date scientific evidence and demonstrate the care Governments take of the health of their populations, being audacious enough to put the health of all ahead of the wealth of the few.

Yours sincerely,

*This letter is signed by individual scientists and health professionals from many institutions around the globe. Their work affiliation is given for information of the readers and for identification purposes, but this should not be considered as any form of endorsement of the universities, research centers and other organizations which names appear on the following list. For members of non governmental organisations involved in the health and/or environment fields, name of an individual was most often a reflection of an official endorsement by the NGO, but this was not systematic.*

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