ASSASP Association of Synthetic Amorphous Silica Producers

### ASASP Downstream Users Forum meeting

09 July 2024



EU TRANSPARENCY REGISTER N°64879142323-90

### Agenda

- 1. Opening and introduction
- 2. Compliance with competition laws
- 3. ASASP strategy on Silicon Dioxide ongoing CLH process
- 4. Downstream Users Forum engagement
- 5. Questions & Answers
- 6. Closure



### **3. ASASP strategy on Silicon Dioxide ongoing CLH process**





### **SAS Substance Evaluation**

| Substance Evaluation Conclusion document EC No 231-545-4  | 4. FOLLOW-UP AT EU LEVEL  |
|---|---|
|   | 4.1. Need for follow-up regulatory action at EU level   |
|   | 4.1.1. Harmonised Classification and Labelling  |
|   | At present there is no harmonised classification for SAS.   |
| SUBSTANCE EVALUATION CONCLUSION<br>as required by REACH Article 48<br>and                             | The concern investigated was repeated dose toxicity via the inhalation route of exposure. The concern wa<br>founded on the outcome of various repeated dose inhalation studies. The new 90-day inhalation study<br>(Anonymous, 2020), as generated upon the request in the substance evaluation decision, provides<br>additional information on repeated dose inhalation toxicity, including insight in the effects induced, the<br>influence of surface area on toxicity, and (ir)reversibility of the effects.                          |
| for   | Adverse effects were observed in the nose, lungs and lymph nodes in particular after exposure to the low surface area form (SAS 2 in the study).  |
| Silicon dioxide; synthetic amorphous silicon<br>dioxide (nano)<br>EC No 231-545-4<br>CAS No 7631-86-9 | The adverse effects induced by the high surface form (SAS 1) were more limited in incidence, less severe<br>and mostly reversible. Also noteworthy is the recent evaluation of a closely related substance Silanamine<br>(1,1,1- trimethyl-N-(trimethylsilyl)-, hydrolysis products with silica (EC No 272-697-1, CAS RN 68909-20-6)<br>by the ECHA's Committee for Risk Assessment (RAC) in December 2019 (ECHA, 2019). RAC concluded that<br>a classification as, amongst others, STOT RE Cat 2, H373 (lungs, inhalation) is justified. |
| Evaluating Member State(s): The Netherlands   | The effects induced by silanamine are very similar to those induced by SAS, including inflammation of the lung tissue, fibrogenesis and possibly fibrosis.  |
| Dated: 9 July 2021<br>Template Version 2.1<br>March 2015  | Based on the adverse effects observed the evaluating Member State Competent Authority (eMSCA)<br>concludes that there is sufficient ground to draft a proposal for harmonised classification and labelling<br>(CLH) for the endpoint repeated dose toxicity via inhalation.   |
|   | https://echa.europa.eu/documents/10162/5f238e67-e159-1fba-1f7f-23df7c25a4fb   |

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### CLH dossier (1)

#### Silicon dioxide

EC / List no: 231-545-4 CAS no: 7631-86-9

| CLP | Annex | VI | Index | number |
|-----|-------|----|-------|--------|
|     |       |    |       |        |

**Further substance information** 

| Status |  |
|--------|--|
|--------|--|

Date of intention

Expected date of submission

Submitted for accordance check

Final submission date

Withdrawal date

Legal deadline for opinion adoption

Submitter

Submitter's email

Consultation

01-Mar-2013

31-Oct-2023

07-Dec-2023

06-May-2024

05-Nov-2025

Netherlands

bureau-reach@rivm.nl





https://echa.europa.eu





### CLH dossier (2)

Proposed harmonised classification by the dossier submitter

Proposed specific concentration limits by the dossier submitter

**Regulatory programme** 

Remarks

Start of consultation

**Deadline for commenting** 

Hazard classes open for commenting

**CLH** report

Annexes to the CLH report

STOT RE 1, H372

(respiratory tract) (inhalation)

Chemical registered under REACHActive substance in Biocidal Products

10-Jun-2024

09-Aug-2024

Specific target organ toxicity — repeated exposure

clh\_rep\_Silicon\_dioxide\_en.pdf

() clh\_rep\_annex\_Silicon Dioxide\_en.zip

A substance is classified as a **Specific Target Organ Toxicant (STOT)** if it produces specific target organ toxicity/systemic effects that are not specifically addressed elsewhere in the CLP/GHS

EUROPEAN CHEMICALS AGENCY

https://echa.europa.eu



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### **CLH timeline (indicative)**

| ECHA                         | ECHA                      | ECHA                     | Stakeholders   | RAC   | Commission                                   | Commission  |
|------------------------------|---------------------------|--------------------------|--|---|--|---|
|                              |                           |                          |  |   |  |   |
| Intention submitted<br>by NL | NL submits CLH<br>dossier | ECHA accordance<br>check | ECHA 2 months public consultation                      | RCOM to be<br>published. RAC to<br>take dossier (no SEAC<br>involved) and adopt<br>opinion within 18<br>months from<br>accordance check | CARACAL - Inclusion<br>of RAC opinion in ATP | Adoption of ATP<br>(delegated act).<br>Beginning 18 months<br>transition period for<br>new classification |
| March 2022                   | 7 December 2023           | January 2024             | 10 June-9 August<br>2024                               | RAC opinion by 5<br>November 2025   | 2026   | 2028-2029   |
| Dossier sent to LR           |                           |                          | ASASP to submit<br>comments and<br>engage with key MSs | ASASP to send<br>experts  | ASASP to engage with<br>COM                  |   |



### **Highlights from CLH dossier**

- CLH dossier from the Dutch authorities:
  - >STOT RE 1 classification proposed on all untreated forms
  - > Target organ has been changed from lung to respiratory tract
  - Wrong assumption that all SAS particles are respirable i.e. reaching the alveoli
  - Many scientific flaws and contradictions in the dossier
  - The latest REACH dossier has not been taken in consideration, but rather reference to publications



### **ASASP 5 key messages**



## SAS is a substance with no intrinsic toxicity

SAS is being proposed for classification based on adaptive, unspecific inflammatory effects which are generic to all particles regardless of the substance.

Classifying a substance based only on its particle effects deviates from the CLP scope because the hazard identification process should assess the intrinsic properties of substances to determine its potential to cause harm.



## SAS is safe as placed on the market

The assumption made by the CLH Report Submitter that all untreated SAS forms are respirable is a fundamental error.

More than 90% of SAS forms, as placed on the market, are not respirable.

OECD repeated dose inhalation studies require particles to be intentionally modified to be respirable for the test animals to create effects. **Inhalation testing is therefore not conducted on SAS forms as placed on the market**.



Effects observed in studies are particle-related effects, not to be regulated by CLP

The proposed **cut-off limit** concentrations for STOT-RE classification by CLP (Annex I 3.9) are **unrealistically high**.

Repeated dose inhalation studies show that inflammation is triggered by respirable particles at concentrations below these limits.

SAS shows **reversible inflammation**, caused by physical conditions, not intrinsic properties of the substance itself.



#### Rats are more sensitive to particles than humans

As shown by inhalation studies on various materials, not just SAS.

This is due to the **anatomy of rat lungs**, which are predisposed to more severe inflammation.

Over 40+ years of human health data supports this, showing no respiratory toxicity in humans.



# The whole respiratory tract is not affected

The proposal by the CLH Report Submitter to classify the whole respiratory tract is made on wrong interpretation of artefact effects in the nasal cavities caused by aerosol preparation

These effects are not relevant for human health hazard assessment.

The adaptive inflammatory effects observed in the studies are restricted to the lungs and its associated lymph nodes.



### **Regulatory consequences & impact on industry**

- > First step to restrict SAS e.g., in consumers applications (GRA and substances of concern)
- Risk mitigation measures for worker safety
- Could require revision to plant operating permit
- Change in waste disposal conditions
- Labeling and packaging
- > Transport & storage conditions will change (warehouse and procedure for hazardous materials)
- Supply chain communication
- New safety data sheet

SAS will be the 4<sup>th</sup> classification of no/low toxicity particles and the same scenarios will repeat for many other particulate substances

- > Disproportionate industry impact
- No safety value for consumers and workers



### **ASASP & SASforREACH Advocacy Strategy**

- Based on the above key elements, ASASP & SASforREACH is:
  - Closely reviewing and commenting the CLH proposal
  - Preparing comments to public consultation
  - Engaging leading expertise to prepare a science-based contribution
  - Joining forces with other industry actors working on the same matter (particles effects)
  - Starting the outreach to key MSs



### 4. Downstream Users Forum engagement

### How you can you support us?





### How can you support us?

Provide inputs into the public consultation by:

- supporting ASASP & SASforREACH position
- strengthening the importance of SAS in downstream users sectors

We will provide you with our key messages to prepare for the public consultation



### **5. Questions & Answers**







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## Thank you!

#### www.asasp.eu



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