

Buying green for the health of it

“Green” purchasing policies are nothing new, but the health care sector’s growing commitment to environmental responsibility is newsworthy. At last year’s CleanMed 2001 conference in Boston, delegates from the US, Sweden, Austria, Denmark, Switzerland, Argentina and Canada discussed environmental problems related to hospital products and the actions they’ve taken. The 130 participants heard:

- how PVC products, which are used to make about 25% of the disposable plastic products used in health care, now account for less than 1% of the waste in Vienna’s hospitals, which are moving toward complete elimination;
- how a Stockholm hospital’s purchasing policies give priority to “ecotested” products and avoid ones that are toxic or whose use or disposal results in toxic releases.

The conference, sponsored by Health Care Without Harm (www.noharm.org), a US-based international coalition committed to environmentally responsible health care, began with the premise that the products and services we use may have profound implications for both the environment and human health, including the health of hospital workers.

Major concerns addressed at the conference surrounded products containing mercury or latex, cleaning and disinfecting agents, and the use of products containing PVC. The latter are often combined with di-ethylhexyl-phthalate — DEHP, a phthalate that affects the immature male reproductive system — in IV bags and tubing, and become an important source of dioxin when incinerated.

Most impressive was the fact that 4 large group-purchasing organizations (GPOs) that together represent more than 75% of all US hospitals said they are committed to increasing the stringency of their requirements for environmental responsibility in product purchasing. One GPO, Broadlane, switched to PVC-free IV bags in 1996, a move that actually saved money.

This trend may be growing. “We must become troublesome consumers to the producers,” said Dr. Ake Wennmalm, environmental director for the Stockholm County Council.

On another front, the US Environmental Protection Agency has signed a memorandum of understanding with the Maine Hospital Association that calls for the virtual elimination of mercury and the continual reduction in the use and disposal of PVC plastic.

Senior executives from some of the largest US health organizations, including Kaiser Permanente, stressed their commitment to environmentally responsible management. This commitment is incorporated in their mission statements and, in at least 1 case, in the criteria by which executives’ compensation and incentive bonuses are assessed.

All the presentations came down to this point: environmentally responsible health care is an ethical duty that must

be recognized and incorporated in the system at all levels. In doing so, the system protects its patients, staff, the community that surrounds it and the wider society and environment. And not only are there long-term health, environmental and economic benefits — there can also be costs savings.

This approach must extend from green purchasing policies (see www.sustainablehospitals.org) to operation of green health care facilities and the system as a whole. The final message is that buying and building green is good for our health and the health of our environment, and it needs to become an essential part of health care. — *Trevor Hancock*, chair, Canadian Association of Physicians for the Environment

Bioterrorism planning continues at frantic pace

Arguing that an ounce of international prevention will be worth more than a pound of cure, health ministers from 8 nations and the European Union have agreed to develop a concrete plan to strengthen their capacity to combat biological, chemical and nuclear terrorism. Although no time line has been set, federal Health Minister Allan Rock said the plan be crafted “as soon as possible.”

Among measures being considered are joint procurement strategies to reduce the costs of vaccines and antibiotic drugs, collaborative research on new diagnostic tests and vaccines, joint training of emergency response teams and improved links between disease-control laboratories.

Canada is taking the lead role in developing the international plan to bolster security against bioterrorism. France, Germany, Italy, Japan, Mexico, the United Kingdom, the US and the European Union have each agreed to designate a “point person” in that effort.

“The way we combat fear [of bioterrorism] is by reassuring our populace that we are taking every possible measure,” Julio Frenk, Mexico’s minister of health, said during the meeting of ministers in Ottawa in November. Tommy Thompson, the US Secretary of Health & Human Services, said the US has tried to do that by purchasing 250 million doses of smallpox vaccine to augment its current stockpile of 54 million doses.

Rock said mass vaccinations aren’t justified at this time, but he confirmed that Health Canada is also examining ways to bolster its smallpox-vaccine stockpile, and may piggyback an order for 30 million doses on to the US order, or develop domestic capability to supply the vaccine. Canada had roughly 380 000 doses on hand in November. — *Wayne Kondro*, Ottawa



Camapress

Calming a nervous public: sales of gas masks have soared since Sept. 11