

Fourth meeting of the intersessional process considering the Strategic Approach and sound management of chemicals and waste beyond 2020 (IP4)

Bucharest, Romania, 29 August – 2 September 2022

Nairobi, Kenya, 27 February – 3 March 2023*

Proposal on a simplified target A6

Submission by the World Health Organization

Note by the secretariat

The attached to the present note contains a submission by the World Health Organization (WHO).

It is reproduced as received by the secretariat, without formal editing.

* The fourth meeting of the intersessional process considering the Strategic Approach and sound management of chemicals and waste beyond 2020 (IP4) was held from 29 August to 2 September 2022 in Bucharest, Romania. The meeting was adjourned on 2 September 2022 and will be resumed from 27 February to 3 March 2023 in Nairobi, Kenya.

PROPOSED SIMPLIFIED TARGET A6

WHO has consulted on proposed target A6 at a global consultation on poison centres held at WHO on 16-17 February 2023. The proposed simplification is made to increase the precision of the target and ensure consistency with international conventions (IHR 2005) and WHO guidelines.

Current draft :

- By 2020, all countries have poison information centres that adequately respond to poisonings and if possible networks as well as access to training on chemical risk prevention and clinical toxicology and have at least one clinical toxicology service

Proposed Simplification

- All countries should have access to poison centres equipped with essential capabilities to prevent and respond to poisonings.

Notes

According to WHO definitions – a poisons centre is as a minimum a poisons information centre with 24/7 telephone access – it may have access to treatment and laboratory facilities in its own premise or network to such resources in the country. WHO maintains a Global Directory of Poison Centres and has established WHO Guidelines for establishing poison centres. WHO has a number of regional poison centre networks to coordinate capacity building. In addition under the IHR 2005 there are also benchmarking tools that define what is fully functional. Under IHR core capabilities include “Establishment of links with key international chemical/toxicology networks for support in the management of chemical events and poisonings> Whether or not a poison centre adequately responds to poisoning may vary country to country depending on the population it serves and its operational service level. Under the IHR capabilities also include the integration of the poisons information service into the public health surveillance system. The availability of antidotes is addressed under the relevant IHR capability.

Language about “access to poison centres reflects the fact that in several countries – out of hour services can be provided by service agreements with other countries/states. This happens in Southern Africa for example with South Africa providing out of hours service to neighbouring countries. It is also useful for when poison centres are at early stage of being established.

The “By 2020: date has been deleted with the suggestion that an indicator establish how many countries should achieve this target and by when.