

EU DENTAL LIAISON COMMITTEE

President: Dr Wolfgang Doneus



Brussels, 3 February 2006

Re: Dentists' concerns about plans to restrict dental amalgam – Matsakis report on Community strategy concerning mercury

Dear,

On 24 January, Marios Matsakis' draft report on the Community strategy concerning mercury was discussed in the ENVI committee. The report relates to the Commission's communication of January 2005 (COM(2005)20 final).

The EU DLC, which represents more than 250,000 dentists in 27 European countries, is concerned about paragraph 11 of the report, in which Mr Matsakis calls on the Commission to make proposals to restrict the use of dental amalgam. We do not believe that this is an appropriate approach: **there is long-standing worldwide scientific consensus that dental amalgam is safe, and although alternatives to dental amalgam are available, they have significant disadvantages.**

Silver fillings, made of dental amalgam, have been used for well over a century for restoring decayed or broken teeth. It has never been shown convincingly that the small amounts of mercury that may be released from fillings cause adverse **health effects**. As is the case with many substances, some people may be hypersensitive to dental amalgam, but a review of the worldwide literature from 1905 to 1986 found only 41 published cases in all of that time. Given that millions of people have amalgam fillings, this number is extremely small.

Dental amalgam can cause **environmental problems** if amalgam waste is not properly disposed of from dental offices or if mercury vapour escapes during cremation. An EU DLC survey last year showed that in 19 out of 23 Member Countries of the EU DLC, there is a legal obligation to install an amalgam separator in dental offices. Environmental concerns can be resolved by better application of community requirements regarding treatment of dental waste.

Since no health risk can be shown and since environmental risks can be solved by better application of dental waste laws, **the case for restricting the use of dental amalgam is very weak**. The case is further weakened by the fact that in economically highly developed countries, amalgam is being used less and less anyway, not because of any ban, but simply because of **market forces**. In Switzerland, 80% of fillings are with non-amalgam materials. This is simply because patients prefer white fillings to silver fillings. This trend is expected to continue throughout Europe, meaning that even if restricting dental amalgam were desirable, legislation would be unnecessary to achieve this.

Furthermore, Mr Matsakis' argument that non-mercury **alternatives** exist does not tell the full story. There do exist alternatives to dental amalgam – such as composite, ceramic , gold fillings etc. – but they have certain disadvantages at present, when compared to dental amalgam.

- Dental amalgam is **very durable**. On average, mercury fillings last 12.6 years, whereas plastic ones last only for 7.8 years. Durability is a very important characteristic, because frequent replacements of fillings weaken the tooth structure and can cause further problems.
- Dental amalgam is **easier to use** and can be moulded into the tooth cavity, which reduces the amount of natural tooth that has to be removed.
- Its ease of use also means it is more **cost-effective** than alternatives. An imposed restriction on amalgam fillings would cause a heavy burden on public dental services and in any case would mean much higher costs for patients.
- Whilst much research has been carried out which proves the safety of dental amalgam, there has been very **little research into the safety and allergenicity of alternative materials** – some patients will undoubtedly be hypersensitive to them.

The EU DLC is in favour of continuing to monitor the safety of dental amalgam and supports the Commission's proposal to ask the Medical Devices Expert Group for an opinion on its safety (see Action 6 on p7 of the Commission's communication). It is also in favour of continued research into alternatives which may prove to be better than dental amalgam.

We would urge you not to support Mr Matsakis' approach to dental amalgam: there is no case for banning or restricting the use of dental amalgam, and to compel European dentists by law to use alternatives would not be appropriate because of the disadvantages these alternatives currently have.

Instead, please support the amendment of Martain Callanan (EPP-ED, UK), in which he calls for the Medical Devices Expert Group to consider any potential hazard of mercury in dental amalgam before any further decisions are taken.

Yours sincerely,



Wolfgang Doneus
President of the EU DLC

Please find attached the results of an EU DLC survey on dental amalgam and alternatives, carried out in September 2005, and an article by the British Dental Association on the safety of dental amalgam.

Please also see the following links for additional information on the issue of dental amalgam in support of our position:

- [Statement of the World Health Organisation and World Dental Federation](#)
- [Leaflet from the Australian National Health and Medical Research Council](#)