Rising global concern for safe disposal of sharps from immunisation waste

Though immunisation, on one hand, provides protection against deadly diseases, at the same time it generates waste that can be hazardous to health and the environment if not disposed of properly. Lethal leftovers of the process include used syringes and needles. Almost 80,000 to 1,60,000 people are infected each year across the world due to exposure to unsafe injections, including those suffered from waste. The trend is visibly alarming in developing countries where medical waste management has been lost in the rush to meet immunisation targets.

Worse still, international agencies such as the World Health Organization and UNICEF, who form the backbones of immunisation and inoculation programmes have, for immunisation waste disposal, been recommending polluting technologies such as small scale incinerators and safety boxes, for want of better environmentally safer options.

The extent of residual risk involved in employing these unsound methods was highlighted during the recent ‘Inter-country workshop on sound management and safe disposal of sharps for the Southeast Asia Region’.

Experts apprehend a sharp increase in immunisation waste in the coming years due to the advent of auto-disable (AD) syringes. WHO, UNICEF and UNFPA have come out with a joint declaration stating that the AD syringes would be an essential part of all their immunisation campaigns by end-2003.

While the efficacy of auto-disable syringes is indisputable, agencies have not as yet come out with a corresponding plan to deal with immunisation waste.

At this workshop a consensus was built around the need for guidelines that countries could use to prioritize options relevant to their context.

GAIA international coordinator wins 2003 Goldman Prize for the Environment

VON HERNANDEZ became the first Filipino to win the Goldman Environmental Prize for his long-standing fight against incineration. The prize is given annually to grassroots environmental heroes from six geographic areas. Each receive a no-strings-attached award of US$ 125,000. The largest award of its kind, the Goldman Award is dubbed the ‘Nobel Prize for the Environment’.

Mr Hernandez is at the forefront of a heated battle to maintain the ban on all forms of waste incineration, in the face of strong industry pressure.

His efforts to fight the serious health effects posed by incinerators have alerted the entire region to the real cost of waste incineration. In spite of the Philippines Clean Air Act of 1999, Mr Hernandez acknowledges the struggle against waste incineration in Asia is far from won, with incinerators across the region spewing cancer-causing dioxins in the air. He is particularly concerned that industrialised nations are dumping toxic waste in, and moving dirty technologies like incinerators to, developing Asian countries.
INDIA FILE

Bio-medical waste issues raised in Parliament

Replying to a question in the Rajya Sabha, the Minister for State for Environment and Forests, Dilip Singh Judev, said that the Central Pollution Control Board (CPCB) has served show cause notices to five hospitals in New Delhi. The Minister mentioned that after getting responses from these hospitals, the CPCB carried out inspections to check the measures taken and directed the hospital administrations to take necessary action, wherever needed, for improvements in disposing of biomedical waste.

In another question which asked if used syringes and other medical equipment are coming back into the market, the Minister for Health, Sushma Swaraj, admitted to this practice. Ms Swaraj said that the police had seized a large quantity of used syringes and other medical equipment from a gang in New Delhi. She said that further information has been sent to environmental protection boards and committees of different states so that they could take appropriate action to tackle this problem.

In January this year, in a raid carried out by the West Delhi police, more than 200 quintals of medical waste, including disposable syringes, blood tubes, surgical equipment, plastic bags used to store glucose, etc, was recovered. The culprits revealed that the surgical equipment in question is sold after it has been cleaned.

Sources: Parliament questions
- The Tribune, New Delhi, March 8, 2003
- The Statesman, New Delhi, March 9, 2003
- Lokmat Times, Nagpur, March 11, 2003

CPCB drafts guidelines for operation of centralised facilities

THE CENTRAL POLLUTION CONTROL BOARD recently issued draft guidelines for a Common Bio-medical Waste Treatment Facility (CBWTF). The guideline outlines the criteria for development of a CBWTF, detailing the location, coverage area, segregation, collection, transport vehicle, record-keeping and storage. Health & Us - Medwaste Action Network (Hu-MAN), the national network of individuals and groups working on the safe management of health care waste, has strongly advocated making these facilities zero-incineration based. The guidelines state that since it is mandatory to incinerate anatomical and other types of waste falling under categories 1 and 2, an incinerator of sufficient capacity to cater to these categories, which constitute approximately 10% of the total biomedical waste, shall be installed. For cities with populations of less than 5 lakh, such wastes can be disposed of in deep burial pits.

Bio-medical waste treatment plant put on hold after protest

THE COMMISSIONING of a biomedical waste treatment plant in Jalandhar has run into rough weather due to strong protests from area residents. The plant was scheduled to begin operations from January but the protests resulted in a stay on its commissioning for the time being. Amidst claim and counter claims by residents and the company, the issue seems to have been politicised.

BMC lax in picking up biomedical waste

The Brihanmumbai Municipal Corporation (BMC) has been lax in picking up waste from nursing homes. Small nursing homes face the brunt of the problem, as they generate very small amounts of waste, and the BMC-appointed transporters do not find it financially viable to pick up waste from them. The BMC also does not have enough vans to cater to all the nursing homes in the city.

Additional Municipal Commissioner S.J. Kunte says that the Corporation has been receiving complaints from doctors about the issue of waste not being collected from the nursing homes. “We have told our agency to increase the number of trips to facilitate better collection. We are also trying to strengthen the infrastructure,” he adds.

Source: The Times of India, Mumbai, May 24, 2003

WORLD BANK AND MINISTRY OF HEALTH PROMOTE DIRTY INCINERATOR

BEIRUT, June 21 – A workshop held under the theme of “Environmental standards and regulations for hospitals in Lebanon” turned out to be a promotion event for a health hazard – incineration. Sponsored by the World Bank, the workshop was held under the patronage of the Ministry of Health and was attended by representatives of hospitals from all over the country.

Greenpeace activists, disguised as doctors, unfolded a banner reading “Don't incinerate – Autoclave” and distributed literature to explain the health threat posed by incinerators.

Despite the known health
hazards of incineration, the World Bank continues to promote this polluting technology. At least 156 World Bank projects in 68 countries since 1993 involved incineration, though developed countries are breaking away from this dangerous practice. ▲

SWEDEN PRESSES THE ACCELERATOR ON BIO-WASTE

The Swedish government has launched a new bid to boost biological treatment of bio-waste and to restrain growth in incineration. A draft ‘ecocycle’ law tabled recently underlines a national determination to stay in the European vanguard of bio-waste recycling.

Sweden has already banned landfilling of combustible wastes, while bio-waste dumping will become illegal in 2005. The country has taken long strides towards the second goal, with just 22% of bio-waste still going to landfill. Some 38% is incinerated and 10% treated biologically, according to the Swedish environment ministry.

Source: Environment Daily, May 20, 2003

SELANGOR DAP SENDS MEMO TO MINISTER ON INCINERATOR

By Arfa’eesa A. Aziz

Malaysian NGO Selangor DAP recently submitted a memorandum to Malaysian Housing and Local Government Minister Ong Ka Ting urging him, among others, to disclose the funding source of the multi-billion ringgit Broga incinerator project in Semenyih.

Last year, the Malaysian government had proposed to build a 1,500-tonne thermal treatment plant to dispose a daily average of 5,000 tonnes of municipal solid waste generated in Kuala Lumpur and Selangor. Due to massive public protest, the project was relocated from Kampung Bohol in Puchong to Broga.

In the memorandum, Selangor DAP said the government must reveal the source of funding for the project as the people have the right to know. It also urged the Ministry to terminate the contract given to Ebara Corporation, a Japan-based company, and instead adopt the zero-waste management methods used by developed countries to resolve the ever-increasing rubbish load. ▲

ENVIRONMENT MINISTERS CALL FOR ACTION ON MERCURY

By Cat Lazaroff

NAIROBI, Kenya – Delegates attending the international meeting on environmental governance agreed to crack down on sources of mercury emissions around the globe. But objections from the US delegation prevented the Governing Council of the United Nations Environment Programme (UNEP) from adopting binding limits on emissions from power plants and other major mercury sources.

The UNEP agreed to begin the process of helping nations devise methods of reducing their mercury emissions. The mercury decision followed discussions of a global assessment report, compiled by UNEP and other experts and presented to delegates earlier, which highlighted the threat to humans and wildlife from this persistent, toxic heavy metal. ▲

INTERACTIVE

Interview with Dr Jorge Emmanuel

A leading campaigner for efficient biomedical waste management practices, Dr Jorge Emmanuel was in India to propagate his message. Based in California, Dr Emmanuel is the president of the Environmental and Engineering Research Group, and offers consultancy to organisations working for the cause.

Q. Where does India stand vis-à-vis the bio-medical waste management scene the world over?
A The issue has been sufficiently internationalised. In developing countries, though, the issue complicated by budgetary constraints. In India the scene is far from satisfactory. However, there is a positive side as well. Hospitals like St Stephen’s in New Delhi are trying to do something about it.

Q. Can India, with its massive healthcare market, afford to ignore a problem like hazardous medical waste management?
A. Certainly not, as the problem is assuming critical dimensions. According to recent WHO statistics, an estimated 1,50,000 additional AIDS cases happened due to the use of unsterilised needles. Not just AIDS, even Hepatitis B is on the rise due to improper waste handling.

Q. There have been doubts expressed frequently on the viability of incineration as a means for waste disposal. But there has been no large-scale phasing out of the technology.
A. In the USA, Canada and Europe, incinerators – even high-tech ones – are being closed down as they release high levels of toxins like dioxins, mercury and lead into the atmosphere. Even taking plastics out from the waste stream will not curb the emission of dioxin because BMW has chlorine sources. In Europe, 62% of dioxin emissions are from bio-medical waste incineration. In a study done in the UK involving 72 incinerators, those living close to the incinerators were found suffering from cancer of the lungs, stomach, etc. When the Stockholm Convention comes into effect in the next few years, then all signatories including India will be forced to shift to better technologies.

Dr Emmanuel also said that the Pollution Control Board should focus on minimising waste; phasing out the use of mercury and controlling inventory, reusing and recycling processed waste, moving towards cleaner technologies; and monitoring hospitals for compliance with the Rules. ▲
Hu-MAN AFFAIRS

Hu-MAN Annual Meet

Health & Us – Medwaste Action Network (Hu-MAN) held its second annual meeting in February at the Indian International Centre, New Delhi. Fourteen members attended the meeting. The agenda of the meeting was to chart the way forward for Hu-MAN. More involvement, responsiveness and initiatives from all the members was solicited.

All the members felt that Hu-MAN needs to widen its canvas from being an information exchange and skillshare forum to becoming a national coalition for promoting sustainable solutions in medical waste. The need of doing more work in the field was felt, as reports consistently reveal that people need more information and help. Five work streams were selected to be completed this year.

Dr. T.K. Joshi receives Research Integrity Award

Hu-MAN congratulates Dr. T.K. Joshi for being awarded the Research Integrity Award by International Society for Environmental Epidemiology (ISEE) for 2003. He is the only Indian to have won this award. He is a confirmed anti-asbestos and anti-incineration campaigner.

This award was established to honour environmental epidemiologists who have withstood outside pressures and maintained the integrity of the field, in particular to “recognise those who have remained true to the core values of the profession by maintaining objectivity in protecting the public health interest above any other interest”.

Dr. Joshi has conducted several international training workshops with Berkeley and Queensland Universities to train physicians in environmental health, as the country has no institution in this area. Dr. Joshi is trying to develop the centre at Lok Nayak Hospital in Delhi into an international centre of excellence and has been assured support by the University of Harvard and others.

In continuation of the process which we started with our previous newsletter, we are profiling Hu-MAN members to increase awareness about their organisations and the work that they do.

MAYIL NATURE CLUB

An NGO working in the field of nature conservation, solid waste management, biomedical waste management, rain water harvesting and water quality management. It has conducted training and awareness seminars for doctors and health care managers in Tamil Nadu. It has also translated English material on bio-medical waste management in Tamil, so that information can percolate to all levels.

Contact: maylnature@rediffmail.com

MUMBAI MEDWASTE ACTION GROUP (MMAG)

MMAG grew from a coalition of concerned citizen groups. In January 2000, it published its first report titled ‘Infecting Mumbai’ on the status of medical waste management in Mumbai city, discussing in particular the status of incineration and the type of incinicators existing in Mumbai. This report has been updated in the year 2002.

Contact: huright@vsnl.com

You or your organisation can be a part of the Health & Us – Medwaste Action Network (Hu-MAN) coalition by becoming an Active Member (involved with Hu-MAN on a regular basis) or a Member in Principle (no active participation but endorsing Hu-MAN principles). Contact us at the Delhi address given alongside, and provide us with the following information:

1. Name
2. Occupation and designation
3. Address, phone, fax and e-mail
4. Past experience of / interest in medical waste

Once we have this information, we will send you a more comprehensive form aimed at signing you on as a member.

Website: www.toxicslink.org

If you have suggestions or require information, please contact:

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