

110TH CONGRESS
2D SESSION

H. R. 5181

To amend the Public Health Service Act to establish a program of research regarding the risks posed by the presence of dioxin, synthetic fibers, and other additives in feminine hygiene products, and to establish a program for the collection and analysis of data on toxic shock syndrome.

IN THE HOUSE OF REPRESENTATIVES

JANUARY 29, 2008

Mrs. MALONEY of New York (for herself, Ms. SUTTON, Mr. McNULTY, Ms. JACKSON-LEE of Texas, Ms. WOOLSEY, and Mr. ABERCROMBIE) introduced the following bill; which was referred to the Committee on Energy and Commerce

A BILL

To amend the Public Health Service Act to establish a program of research regarding the risks posed by the presence of dioxin, synthetic fibers, and other additives in feminine hygiene products, and to establish a program for the collection and analysis of data on toxic shock syndrome.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Robin Danielson Act”.

1 **TITLE I—RESEARCH REGARDING**
2 **RISKS POSED BY DIOXIN, SYN-**
3 **THETIC FIBERS, AND OTHER**
4 **ADDITIVES IN FEMININE HY-**
5 **GIENE PRODUCTS**

6 **SEC. 101. FINDINGS.**

7 The Congress finds as follows:

8 (1) Tampons are used by approximately
9 73,000,000 women in the United States today, and
10 the average woman may use as many as 16,800
11 tampons in her lifetime. A woman on estrogen re-
12 placement therapy may use as many as 24,360 tam-
13 pons in her lifetime.

14 (2) The Environmental Protection Agency and
15 the International Agency for Research on Cancer, an
16 arm of the World Health Organization, have con-
17 cluded that dioxins are a probable human carcinogen
18 (cancer causing agent).

19 (3) According to the Food and Drug Adminis-
20 tration, dioxins are formed as a result of combustion
21 processes such as commercial and municipal waste
22 incineration and from burning fuels (like wood, coal,
23 or oil). Dioxins are a byproduct of chlorine bleaching
24 of pulp and paper.

1 (4) Tampons currently sold in the United
2 States are composed of cotton, rayon, or of a com-
3 bination of cotton and rayon. Rayon is produced
4 from cellulose fibers derived from bleached wood
5 pulp.

6 (5) While bleaching processes that do not
7 produce dioxin in any amount are available, most
8 wood pulp manufacturers, currently use elemental-
9 chlorine free bleaching processes. This process uses
10 chlorine dioxide as a bleaching agent and still pro-
11 duces dioxins.

12 (6) The Food and Drug Administration has not
13 explicitly forbidden the use of chlorine in tampon
14 manufacturing.

15 (7) Trace amounts of dioxins can also be found
16 in tampons that use a chlorine-free bleaching proc-
17 ess as well as 100 percent cotton tampons as the
18 Environmental Protection Agency states that due to
19 decades of pollution, dioxin can be found in the air,
20 water, and ground and thus can be found in both
21 cotton and wood pulp raw materials used in tampon
22 production.

23 (8) The effects of dioxin from various sources
24 are cumulative. Women may be exposed to dioxin in
25 tampons and other menstrual products for as long

1 as 60 years over the course of their reproductive
2 lives.

3 (9) The Food and Drug Administration has his-
4 torically relied on data provided by manufacturers of
5 feminine hygiene products in determining product
6 safety.

7 (10) Although the Food and Drug Administra-
8 tion currently requires tampon manufacturers to
9 monitor dioxin levels in their finished products, they
10 do not generally collect this information and it is not
11 readily available to the public.

12 (11) Recent studies have produced conflicting
13 information about the link between dioxin exposure
14 and increased risks for endometriosis.

15 (12) The Environmental Protection Agency has
16 concluded that people with high levels of exposure to
17 dioxins may be at risk for other noncancer effects
18 that could suppress the immune system, increase the
19 risk of pelvic inflammatory disease, reduce fertility,
20 and interfere with fetal and childhood development.

21 (13) Toxic Shock Syndrome (TSS) has been
22 linked to tampon use and the absorbency of the tam-
23 pon. TSS is a rare bacterial illness that occurs most-
24 ly in menstruating women. During 1979 and 1980,

1 the syndrome was responsible for at least 55 deaths
2 and 1,066 nonfatal cases.

3 (14) In response to a 1988 lawsuit, the Food
4 and Drug Administration has required tampons to
5 be labeled with reference to an absorbency standard
6 (e.g., super tampons must absorb between 9 and 12
7 grams of liquid).

8 (15) As a result of independent research that
9 showed that synthetic fiber additives in tampons am-
10 plify toxin production, which is associated with toxic
11 shock syndrome, manufacturers have ceased to in-
12 clude three of the four synthetic ingredients once
13 often used to increase tampon absorbency. Highly
14 absorbent viscose rayon is still used in tampon pro-
15 duction.

16 **SEC. 102. NATIONAL INSTITUTES OF HEALTH; RESEARCH**
17 **ON DIOXIN PURSUANT TO OFFICE OF RE-**
18 **SEARCH ON WOMEN'S HEALTH.**

19 Part F of title IV of the Public Health Service Act
20 (42 U.S.C. 287d et seq.) is amended by adding at the end
21 the following section:

22 **“SEC. 486C. CERTAIN PROJECTS REGARDING WOMEN'S**
23 **HEALTH.**

24 **“(a) DIOXIN IN FEMININE HYGIENE PRODUCTS.—**

1 “(1) IN GENERAL.—The Director of NIH, in
2 collaboration with the Director of the Office, shall
3 provide for the conduct or support of research to de-
4 termine the extent to which the presence of dioxin,
5 synthetic fibers, and other additives in tampons and
6 other feminine hygiene products—

7 “(A) poses any risks to the health of
8 women who use the products, including risks re-
9 lating to cervical cancer, endometriosis, infer-
10 tility, ovarian cancer, breast cancer, immune
11 system deficiencies, pelvic inflammatory disease,
12 and toxic shock syndrome; and

13 “(B) poses any risks to the health of chil-
14 dren of women who used such products during
15 or before the pregnancies involved, including
16 risks relating to fetal and childhood develop-
17 ment.

18 “(2) REQUIREMENT REGARDING DATA FROM
19 MANUFACTURERS.—Research under paragraph (1)
20 shall include research to confirm the data on tam-
21 pons and other feminine hygiene products submitted
22 to the Commissioner of Food and Drugs by manu-
23 facturers of such products.

24 “(3) DEFINITION.—For purposes of paragraph
25 (1), the term ‘feminine hygiene products’ means

1 tampons, pads, liners, and similar products used by
2 women with respect to menstruation or other gen-
3 ital-tract secretions.

4 “(b) REPORTS.—Reports on the results of research
5 under subsection (a) shall be periodically submitted to the
6 Congress, the Commissioner of Food and Drugs, the Ad-
7 ministrator of the Environmental Protection Agency, and
8 the Chairman of the Consumer Product Safety Commis-
9 sion. Such reports shall be made available to the public
10 through the data system and clearinghouse program es-
11 tablished under section 486A, or through other appro-
12 priate means.”.

13 **TITLE II—COLLECTION AND**
14 **ANALYSIS OF DATA ON TOXIC**
15 **SHOCK SYNDROME**

16 **SEC. 201. FINDINGS.**

17 The Congress finds as follows:

18 (1) Of the cases of toxic shock syndrome in the
19 United States, approximately 50 percent are related
20 to tampon use and approximately 50 percent occur
21 in nonmenstruating women and in men and children.

22 (2) The Centers for Disease Prevention and
23 Control has estimated that between one and two of
24 every 100,000 women 15 to 44 years of age will de-
25 velop the syndrome.

1 (3) Epidemiological data on cases of toxic shock
2 syndrome are not systematically collected in the
3 United States, and information on cases seldom
4 travels beyond the victim's circle of family and
5 friends. Toxic Shock Syndrome is a nationally
6 notifiable disease that States report to the Centers
7 for Disease Prevention and Control, but the report-
8 ing by the States is voluntary.

9 (4) According to the Council of State and Ter-
10 ritorial Epidemiologists, as of 2006, only 39 States
11 required reporting of streptococcal and non-strepto-
12 coccal toxic shock syndrome to State health officials.

13 (5) The last active surveillance of toxic shock
14 syndrome occurred in 1987 only in four States and
15 surveying 12 million people. National surveillance is
16 conducted through the National Electronic Tele-
17 communications Systems.

18 (6) The Centers for Disease Prevention and
19 Control and the States should cooperate to collect
20 and analyze such data. Increasing the amount of in-
21 formation on toxic shock syndrome will lead to in-
22 creased awareness about the disease in the medical
23 community, and may also lead to an increased un-
24 derstanding of the causes of the syndrome.

1 **SEC. 202. CENTERS FOR DISEASE CONTROL AND PREVEN-**
2 **TION; ESTABLISHMENT OF PROGRAM FOR**
3 **COLLECTION AND ANALYSIS OF DATA ON**
4 **TOXIC SHOCK SYNDROME.**

5 Part B of title III of the Public Health Service Act
6 (42 U.S.C. 243 et seq.) is amended by inserting after sec-
7 tion 317S the following section:

8 **“SEC. 317T. COLLECTION AND ANALYSIS OF DATA ON TOXIC**
9 **SHOCK SYNDROME.**

10 “(a) IN GENERAL.—The Secretary, acting through
11 the Director of the Centers for Disease Control and Pre-
12 vention, shall carry out a program to collect, analyze, and
13 make available data on toxic shock syndrome, including
14 data on the causes of such syndrome.

15 “(b) NATIONAL INCIDENCE AND PREVALENCE.—In
16 carrying out the program under subsection (a), the Sec-
17 retary shall to the extent practicable determine the na-
18 tional incidence and prevalence of toxic shock syndrome.

19 “(c) COOPERATION WITH STATES.—The Secretary
20 may carry out the program under subsection (a) directly
21 and through grants to States and local health depart-
22 ments.

23 “(d) AUTHORIZATION OF APPROPRIATIONS.—For the
24 purpose of carrying out this section, there are authorized

1 to be appropriated such sums as may be necessary for
2 each of the fiscal years 2008 through 2012.”.

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