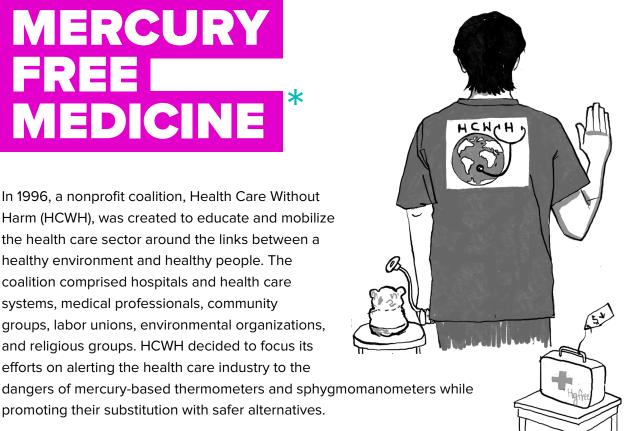




MERCURY FREE MEDICINE

In 1996, a nonprofit coalition, Health Care Without Harm (HCWH), was created to educate and mobilize the health care sector around the links between a healthy environment and healthy people. The coalition comprised hospitals and health care systems, medical professionals, community groups, labor unions, environmental organizations, and religious groups. HCWH decided to focus its efforts on alerting the health care industry to the

promoting their substitution with safer alternatives.





One of the first steps that HCWH took was to organize a Mercury Awareness Day and thermometer swap with Beth Israel Deaconess Medical Center in Boston, collecting more than 1,000 mercury thermometers and substituting them with digital alternatives. To remove mercury medical devices from the consumer market, HCWH nurses, along with socially responsible investors and community allies, pressed pharmacies to abandon mercury thermometers, rapidly getting every major US pharmacy chain to remove them from their shelves.

Getting the health care sector to switch to non-mercury devices required overcoming several challenges: lack of knowledge within the sector of the need for the change; health professionals' skepticism of the accuracy of the alternative devices; concerns about the affordability of the devices; and waste disposal concerns.

^{*} Abstracted and modified from: Lessons in Forging Global Change by Josh Karliner, Gary Cohen & Peter Orris, Stanford Social Innovation Review Winter 2014, www.ssireview.org







With regard to the business challenge, in almost every case HCWH was able to demonstrate that the alternatives were affordable. Although a digital thermometer could cost five times as much as a mercury device, the latter broke 10 times more often than the former. So in addition to avoiding the release of literally kilos of mercury every year endangering both patients and health care employees, there was a business case to be made for substitution. The availability of the alternative devices grew as medical device companies around the world moved to meet increasing demand, which also brought down the price of the devices.

Providing accurate and accepted evidence from peer-reviewed medical literature, together with scrupulous attention to conclusions and recommendations based on it, became a hallmark of HCWH's approach.



In 2005, WHO issued a policy paper saying that a shift to mercury-free health care throughout the world was both necessary and possible.

HCWH found that many health professionals and hospitals around the world were receptive to this change.

This prompted HCWH to shift its attention with respect to mercury beyond the borders of the US.

HCWH Asia, for example, organized a regional event in Manila in 2006 in conjunction with UNEP, WHO, and the Philippines Department of Health. Within two years, the hosting Philippine Heart Center and several other prominent facilities had successfully removed their mercury devices. In other parts of Asia and Latin America, the effort made progress similarly. Particularly important were successful efforts led by HCWH and its partners in Argentina, Brazil, Chile, Costa Rica, India, South Africa and Mexico.





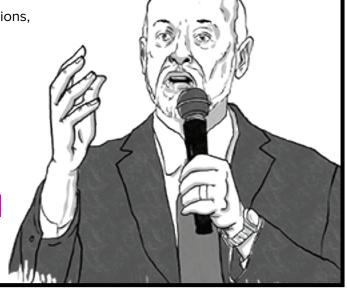
In little more than a decade the practice of mercury-free health care had spread across the globe. When governments came together in Stockholm in June 2010 for the first round of treaty negotiations to regulate mercury use and emissions, large segments of the health care sector had already made the switch to non-mercury devices. This demonstrated to the delegates that a move away from the toxic heavy metal was possible but also modeled strong steps to control mercury's impact on children's health worldwide.

As HCWH declared at the outset of the negotiations,

momentum is growing and mercury-free health care is increasingly becoming the status quo in many countries.

The health sector is modeling change for society as a whole.

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Negotiated in a bit over three years, the International Convention on Mercury was signed in Minamata in southern Japan on 10 October 2013 and named after the signing city where the most infamous epidemic of mercury poisoning in history had been identified some 57 years before. The treaty responds to a global consensus that the release of mercury into the environment presents a worldwide threat to human health and natural ecosystems.