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Protocol for the exposure assessment as part of the safety assessment of phthalates, structurally similar substances and replacement substances potentially used as plasticisers in materials and articles intended to come into contact with food

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Abstract

EFSA was requested by the European Commission to re-evaluate the risks to public health related to the presence of plasticisers such as phthalates, structurally similar substances and replacement substances, as a consequence of migration from food contact materials (FCMs). In the first part of the two-part mandate, EFSA was tasked with establishing a protocol for assessing the exposure of EU consumers to the plasticiser substances. Other tasks in the first part of the mandate include: i) identifying and prioritising those plasticisers used in FCMs that may warrant further data collection and eventual risk assessment, ii) establishing a protocol for the hazard assessment of the prioritised substances, and iii) establishing calls for data and other information on the occurrence of the prioritised substances to support dietary exposure estimates. Work to address those three additional tasks will be reported separately. Close collaboration with the European Chemicals Agency was requested in the mandate for all tasks leading up to the risk assessment stage. This exposure protocol has been developed using the principles and following the recommendations provided in the *Draft framework for protocol development for EFSA's scientific assessments* (EFSA et al., 2020). The protocol describes how the three central questions will be addressed: what is the total dietary exposure, what is the exposure coming from FCMs, and what is the overall exposure (dietary and non-dietary) to the prioritised substances in different population groups and age classes in the EU. The protocol aims to describe as far as possible the approach applied for identifying, extracting, cleaning and selecting data, appraising the relevant evidence, analysing and integrating that evidence and addressing the uncertainties, in order to perform exposure assessments that will be used for the risk assessment of the prioritised substances in the second part of the two-part mandate. This draft protocol has been endorsed by the Panel on Food Contact Materials, Enzymes and Processing Aids for public consultation.

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Key words: protocol, phthalates, plasticisers, exposure assessment methodology, food contact materials, dietary exposure, non-dietary exposure

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105 **1. Introduction**

106 **1.1. Background and Terms of Reference as provided by the requestor**

107 **Background from the mandate letter**

108 EFSA has recently updated the risk assessment of five phthalic acid esters (ortho-phthalates), namely
109 DBP, BBP, DEHP, DINP and DIDP, authorised for use as additives in plastic food contact materials
110 (FCMs), published in December 2019 (EFSA CEP Panel, 2019). Based on this new opinion, DG SANTE
111 is considering whether any changes to the existing EU legislation are necessary.

112 The previous mandate sent by the Commission was limited to new scientific information which was
113 assessed by the European Chemicals Agency (ECHA) as regards reprotoxicity. This assessment
114 subsequently resulted in several new restrictions under the REACH Regulation (EC) No 1907/2006¹.
115 The recently adopted EFSA opinion did not identify any risk to human health from current exposure to
116 these five ortho-phthalates from dietary sources. Nevertheless, it highlighted limitations of the work
117 carried out and has set the Tolerable Daily Intakes (TDIs) on a temporary basis. It is therefore
118 appropriate to address these limitations and establish a greater degree of certainty as regards the
119 possible risks from these phthalates in food, from FCMs.

120 Additionally, the scope of the previous mandate was restricted to the five ortho-phthalates authorised
121 as additives in annex I to Commission Regulation (EU) No 10/2011², which are used as plasticisers
122 and technical support agents in plastic FCM. However, information collected by the Commission,
123 including a short EU stakeholder survey³ as well as results of controls carried out by Member States
124 under Commission Recommendation 2019/794⁴, confirms that these five ortho-phthalates are to a
125 large extent being replaced by other plasticisers such as terephthalates, cyclohexanoates and epoxy
126 esters. A list including these substances is provided in annex II to this letter⁵. The information, which
127 we have provided to EFSA, also indicates that other phthalates are used as technical support agents in
128 addition to those specifically authorised for plastic FCM. Of additional importance is the use and
129 occurrence of phthalates and non-phthalate plasticisers in FCM other than plastic, most notably
130 rubber. Whilst it should be stressed that our present findings are not statistically robust enough to
131 draw comprehensive conclusions, it is nevertheless important to take this information into account in
132 the design of the work.

133 It is understood that ongoing screening and prioritisation work by ECHA on groups of structurally
134 similar substances covers substances that may be relevant as regards their use in FCMs within the
135 scope of this mandate and therefore their possible assessment by EFSA. With reference to the
136 Memorandum of Understanding between ECHA and EFSA⁶, the Commission would therefore like to
137 request that the two agencies work together during the first part of this mandate for identification,
138 prioritisation and preparatory tasks in advance of the second part of the mandate concerning the risk
139 assessment work. This pooling of resources and expertise will promote inter-agency cooperation,
140 maximising efficiency and avoiding duplication of work. This will help ensure that the risk from
141 phthalates, structurally similar substances and their replacements are comprehensively assessed and
142 eventually managed.

¹ Regulation (EC) No 1907/2006 of the European Parliament and of the Council of 18 December 2006 concerning the Registration, Evaluation, Authorisation and Restriction of Chemicals (REACH), establishing a European Chemicals Agency, amending Directive 1999/45/EC and repealing Council Regulation (EEC) No 793/93 and Commission Regulation (EC) No 1488/94 as well as Council Directive 76/769/EEC and Commission Directives 91/155/EEC, 93/67/EEC, 93/105/EC and 2000/21/EC. OJ L 396, 30.12.2006, p.1–520.

² Commission Regulation (EU) No 10/2011 of 14 January 2011 on plastic materials and articles intended to come into contact with food. OJ L 12, 15.1.2011, p.1–89.

³ https://ec.europa.eu/food/sites/food/files/safety/docs/cs_fcm_wg_20200224_pres-02.pdf

⁴ Commission Recommendation (EU) 2019/794 of 15 May 2019 on a coordinated control plan with a view to establishing the prevalence of certain substances migrating from materials and articles intended to come into contact with food (notified under document C(2019) 3519). OJ L 129, 17.5.2019, p. 37–42.

⁵ The mandate letter including Annex II is available at: <https://open.efsa.europa.eu/study-inventory/EFSA-Q-2020-00725>

⁶ <https://www.efsa.europa.eu/sites/default/files/assets/mouecha.pdf>

143 Terms of Reference

144 In accordance with Article 29(1)(a) of Regulation (EC) No 178/2002,⁷ the European Commission asks
145 EFSA to re-evaluate the risks to public health related to the presence of phthalates, structurally similar
146 substances and replacement substances, as a consequence of migration from food contact materials
147 (FCMs). The following tasks, which constitute the first part of a two-part mandate, should therefore be
148 performed:

- 149 1. Prioritise and identify those phthalates, structurally similar substances and replacement
150 substances based on the list in annex II to this mandate letter that warrant further data
151 collection and insofar as they may be relevant for eventual inclusion in an assessment of the
152 risks associated with their presence and migration from food contact materials. Existing
153 relevant information, such as that which may be held by ECHA should also be identified.
- 154 2. With a view to ensuring transparency and efficiency during the second part of the mandate,
155 establish a protocol for:
 - 156 a) A dietary exposure assessment of the prioritised substances, with the aim of
157 addressing the relative contribution from FCM to dietary exposure considering data on
158 migration from FCM and eventual comparison of these contributions with the overall
159 exposure of EU consumers;
 - 160 b) A hazard assessment protocol for the prioritised substances, detailing the criteria for
161 inclusion and appraisal of the toxicological evidence publicly available since 2005 and
162 not yet assessed by EFSA.
- 163 3. Establish a call for data on occurrence of the prioritised substances in food to support dietary
164 exposure estimates. Data on migration levels from plastic and rubber FCMs as well as other
165 materials which may be relevant such as printed paper and board should also be collected,
166 where available. This should include articles throughout the whole food chain, including food
167 manufacturing and processing equipment, as well as packaging, kitchenware and tableware. A
168 search and identification of potentially relevant literature on exposure should also be started
169 as part of this task.

170 1.2. Interpretation of the Terms of Reference

171 This exposure protocol addresses task 2(a) of the mandate and will be applied to those prioritised
172 substances (task 1) (EFSA CEP Panel, 2021), for which the EC will ask EFSA to perform a risk
173 assessment as the second part of this two-part mandate.

174 It has been developed with the aim of explaining in as much detail as possible the strategy applied for
175 cleaning and selecting data, appraising the relevant evidence, and analysing and integrating that
176 evidence in order to perform exposure assessments that will be used for the risk assessment of the
177 prioritised substances.

178 1.3. Scope of the exposure protocol

179 Materials and articles intended to come into contact with food⁸ include those for uses such as films,
180 packaging and containers as well as layers of adhesives, coatings and inks. Packaging and containers
181 include those used for transport, storage and preservation. Kitchen and processing equipment, such
182 as coffee makers or production machinery, as well as cutlery and dishes are also considered to be
183 within the scope. These materials and articles are commonly referred to as FCMs. They can be made

⁷ Regulation (EC) No 178/2002 of the European Parliament and of the Council of 28 January 2002 laying down the general principles and requirements of food law, establishing the European Food Safety Authority and laying down procedures in matters of food safety. OJ L 31, 1.2.2002, p. 1–24.

⁸ In the context of this document, the term 'food' (according to Article 2 of Regulation (EC) No 178/2002) means any substance or product, whether processed, partially processed or unprocessed, intended to be, or reasonably expected to be ingested by humans. In this sense 'food' includes drink, chewing gum and any substance, including water, intentionally incorporated into the food during its manufacture, preparation or treatment. It includes water after the point of compliance as defined in Article 6 of Directive 98/83/EC and without prejudice to the requirements of Directives 80/778/EEC and 98/83/EC.

184 from a variety of materials including plastics, rubber, paper and board. European legislation for food
 185 contact materials⁹ also covers materials that come into contact with water intended for human
 186 consumption, e.g. bottles, but excludes fixed public or private water supply equipment, which is
 187 outside the scope of this document.

188 Plasticisers are lipophilic additives that are used as single substances or mixtures in high amounts,
 189 typically at percentage levels and even up to 50% w/w, to change and tailor the physical properties of
 190 polymeric materials for their use in non-food and food-contact applications (see for example, Cadogan
 191 and Howick, 2020). The classical example is the polymer PVC which is rigid as such. The addition of
 192 plasticisers to PVC allows it to be made into flexible films, hoses and sealing gaskets that are used as
 193 FCMs. Similarly, although not so obvious, the thin layer of inks, varnishes and adhesives applied to
 194 many FCMs are polymeric in nature and may contain plasticisers to help with adhesion and flexibility
 195 and hence provide resistance to peeling and cracking. The recovery and recycling of these inked and
 196 glued materials, in particular paper or board, can consequently give rise to residues of plasticisers in
 197 FCMs made from or containing recycled material. Since plasticisers are normally non-volatile oily
 198 liquids and are chemically quite stable, they find use as carrier solvents for the addition of other
 199 substances that are used to formulate FCMs. This stability and related persistence means that
 200 plasticisers can be also found as incidental ('background') contaminants in a wide variety of materials,
 201 including the foods themselves.

202 Due to the lipophilic character of most of the prioritised substances, the concentrations of the
 203 prioritised substances in water are expected to be low. However, in the list of prioritised substances, it
 204 is likely that there will also be substances with other properties. Therefore, all food items (including
 205 beverages and water) may contain the prioritised substances and should therefore be considered.

206 **2. Problem formulation**

207 **2.1. Objectives of the exposure assessment**

208 The objective is to assess the dietary exposure to the prioritised substances, to address the relative
 209 contribution from FCMs to the dietary exposure considering data on migration from FCMs, and the
 210 eventual comparison of these contributions with the overall (dietary and non-dietary) exposure of EU
 211 consumers.

212 **2.2. Identification of the risk assessment questions and sub-questions**

213 The objectives were translated into three assessment questions and their sub-questions (Table 1).
 214 The evidence needs, the methodology for answering the questions and sub-questions and the
 215 uncertainty analyses are described in Sections 3, 4 and 5.

216 **Table 1:** Questions and sub-questions to be answered for the exposure assessment

Q1	What is the overall chronic and/or acute dietary exposure to the prioritised substances in different population groups and age classes in the EU?
SQ1.1	What are the concentrations of the prioritised substances in food in the EU?
SQ1.2	What are the consumption levels of food among the different population groups and age classes in the EU?
Q2	How much of the chronic and/or acute dietary exposure to the prioritised substances originates from FCMs in the different population groups and age classes in the EU?
SQ2.1	In which FCMs do the prioritised substances under study occur, and in what concentrations and at what frequency of use (market share)?

⁹ Regulation (EC) No 1935/2004 of the European Parliament and of the Council of 27 October 2004 on materials and articles intended to come into contact with food and repealing Directives 80/590/EEC and 89/109/EEC. OJ L 338, 13.11.2004, p. 4–17.

SQ2.2	In which step(s) of the food chain is the FCM used? How often and under what conditions of use is the FCM used in the food chain?
SQ2.3	What is the concentration of the prioritised substances that migrated into food from each identified FCM (SQ2.1), during the relevant step(s) of the food chain (SQ2.2)?
SQ2.4	What is the reliability and representativeness of the results obtained from testing for composition and migration?
SQ2.5	What are the consumption levels of relevant food (in which the migration/concentration due to FCMs was assessed under SQ2.3) in different population groups and age classes in the EU?
Q3	How does dietary exposure due to FCMs compare with the overall (dietary and non-dietary) exposure of EU consumers?
SQ3.1	What are all the actual uses of the prioritised substances and the possible sources and routes of non-dietary exposure?
SQ3.2	What is the non-dietary exposure to the prioritised substances from the individual uses identified under SQ3.1?
SQ3.3	What is the overall (dietary and non-dietary) exposure to the prioritised substances measured through human biomonitoring (HBM)?

217 Q: question; SQ: sub-question

218

219 **3. Question 1 (Q1): What is the overall chronic and/or acute dietary**
 220 **exposure to the prioritised substances in different population**
 221 **groups and age classes in the EU?**

222 This question concerns overall dietary exposure to each of the prioritised substances that might
 223 originate from FCMs or other sources, including environmental contamination. It primarily includes
 224 chronic exposure, but might also include acute exposure, depending on the toxicology of the
 225 substances that will end up on the list of prioritised substances.

226 It has to be noted that Q1 does not address migration from FCMs into food during home cooking. This
 227 aspect will be covered by Q2.

228 To answer Q1, three sub-questions and the method for integrating the evidence across the sub-
 229 questions were formulated.

230 Uncertainties identified for each sub-question are discussed in Section 3.4.

231 **3.1. Sub-question 1.1 (SQ1.1): What are the concentrations of the**
 232 **prioritised substances in food in the EU?**

233 **Evidence needs**

234 Concentrations of the prioritised substances in food. The concentrations should be representative for
 235 the prioritised substances in foods, including drinking water, as consumed in the EU.

236 **Methods for answering the SQ**

237 To address SQ1.1 on the concentrations of the prioritised substances in food in European countries, a
 238 structured approach will be followed to collect and evaluate the evidence. Occurrence data on
 239 prioritised substances will be collected through the continuous call for chemical data collection.
 240 National food authorities, research institutions, academia, food business operators and other
 241 stakeholders will be invited to submit occurrence data. Data generated in migration testing (either
 242 with food or food simulants) will not be collected in the continuous call for chemical data and will not
 243 be used to answer SQ1.1; however, there will be an ad hoc call for data to gather data on

244 concentration in and migration from FCMs, and the input provided to that ad hoc call for data will be
245 used to address SQ2.3.

246 The data submission to EFSA will follow the requirements of the EFSA Guidance on *Standard sample*
247 *description for food and feed* (EFSA, 2010a).

248 Before being used to estimate dietary exposure, the quality of the initial dataset of occurrence data
249 will be evaluated. This will be achieved by applying several data cleaning and validation steps, in line
250 with the EFSA standard operating procedures¹⁰ on *Analysis of data from the S-DWH for the*
251 *assessment of dietary exposure* and *Data collection and validation* and the *Technical report on*
252 *handling of occurrence data for dietary exposure assessment* (Arcella et al., in preparation). Among
253 others, different parameters will be carefully checked, including 'Sampling strategy', 'Sampling year',
254 'Sampling country', 'Analytical methods', 'Reporting unit', 'Limit of detection' and the sample
255 classification under FoodEx2 (EFSA, 2015).

256 For instance, for data held in the EFSA data warehouse, data gathered via previous calls for data
257 (before 2022) will be considered case by case, taking into account, e.g., the year of sampling.
258 Obsolete data could be excluded taking into consideration issues such as: whether the time period to
259 be considered is specified in the terms of reference, whether there is a time trend which could cause
260 some data to be outdated, whether a new regulation introduces new restrictions on the given
261 chemical and so provides a cut-off date, or there is an earlier exposure assessment published by
262 EFSA. In the latter case, data collected since that time could be considered, thus the results could
263 show whether there was any significant decrease or increase in the occurrence levels or the exposure.

264 The available details on sample preparation and analytical methods will be carefully evaluated
265 according to the *Technical report on handling of occurrence data for dietary exposure assessment*
266 (Arcella et al., in preparation). An evaluation of the method performance (specificity, sensitivity,
267 accuracy, precision, recovery, etc.) will be carried out. Furthermore, specific analytical challenges
268 related to the measurement of a given substance and the suitability of the analytical methods
269 reported will be evaluated and decisions on possible data exclusion taken accordingly. In general,
270 methods have to be fit for purpose; in this case for dietary exposure assessment. Occurrence data
271 provided to EFSA are often generated under official monitoring programmes used for checking
272 compliance with regulations and may be affected by a large proportion of left-censored data. High
273 limits of quantification (LOQs) can affect the usefulness of the data for exposure assessment
274 purposes, especially when a large proportion of left-censored values are reported in certain food
275 categories. Left-censored data will be handled according to quality criteria detailed in the *Technical*
276 *report on use of cut-off values on the limits of quantification reported in datasets used to estimate*
277 *dietary exposure to chemical contaminants* (EFSA et al., 2018).

278 In addition to the occurrence data collected during the call for data, a systematic literature search will
279 be conducted (including research activities and published surveys such as total diet studies (TDSs)).
280 Considering all available data (data received in the call for data along with information from the
281 literature) it will be decided case by case whether the literature information will be used or not for the
282 dietary exposure assessment. If the occurrence data received in the calls are sufficiently complete and
283 comprehensive to calculate dietary exposure, it may not be necessary to use the literature
284 information. Further details on the systematic literature review are provided in Section 6.

285 All available data will be assessed, based on the criteria listed above and data from the various
286 sources will be combined, as appropriate. Appropriate descriptive statistics by food category and
287 substance will be presented in the exposure assessment.

288 **3.2. Sub-question 1.2 (SQ1.2): What are the consumption levels of** 289 **food among the different population groups and age classes in the** 290 **EU?**

291 **Evidence needs**

292 Consumption levels of foods for the different population groups and age classes in the EU.

¹⁰ <https://www.efsa.europa.eu/en/corporate/pub/sops>

293 **Methods for answering the SQ**

294 The EFSA Comprehensive European Food Consumption Database (EFSA Food Consumption Database)
295 will be the primary source of the food consumption information. The food consumption data gathered
296 by EFSA in the EFSA Food Consumption Database are the most complete and detailed data currently
297 available at EU level and provide a compilation of existing national information on food consumption
298 at individual level. The EFSA Food Consumption Database was first built in 2010 (EFSA, 2011;
299 Huybrechts et al., 2011; Merten et al., 2011) and is updated regularly. Details on how the EFSA Food
300 Consumption Database is used are published in the EFSA Guidance (EFSA, 2011). The latest version of
301 the EFSA Food Consumption Database available at the moment of occurrence data extraction will be
302 used (including surveys on specific population groups, e.g. pregnant women, vegetarians) for the age
303 classes from infants to adults aged 75 years or older as described by EFSA (2011).

304 Individual consumption data were collected using single or repeated 24 or 48 h dietary recalls, and
305 dietary records covering 3–7 days per subject. Owing to the differences in the methods used for data
306 collection, direct country-to-country comparisons can be misleading. Detailed information on the
307 different dietary surveys available in the EFSA Food Consumption Database can be found on the
308 dedicated page of EFSA's website.¹¹

309 As indicated by the EFSA Working Group on Food Consumption and Exposure (EFSA, 2011), dietary
310 surveys with only one day per subject will only be considered for acute exposure as they are not
311 adequate to assess repeated exposure. Similarly, subjects who participated for only one day in the
312 dietary studies, when the protocol prescribed more reporting days per individual, will also be excluded
313 for the chronic exposure assessment. When, for one particular country and age class, two different
314 dietary surveys are available, only the most recent one will be used.

315 **3.3. Method for integrating evidence across the sub-questions**

316 To estimate the human dietary exposure (Q1), both occurrence and consumption data are required.
317 These are addressed in SQ1.1 and 1.2, respectively, and the numerical integration of these two types
318 of evidence is the main focus here. Both occurrence and consumption data are codified and classified
319 according to the FoodEx2 classification system (EFSA, 2015). After a quality check and cleaning
320 (SQ1.1), the occurrence data will be prepared for exposure assessment and their associated
321 limitations will inform the uncertainty analysis. For the consumption data, this will be based on the
322 'basic FoodEx2 code', aggregated into food groups and broader food categories in a hierarchical
323 parent-child relationship (up to seven levels). In addition, a catalogue of 28 'facets' is available in
324 order to describe further characteristics of the foods, such as physical state (e.g. powder, liquid) or
325 processing technology (e.g. grinding, milling, crushing). The correct application of the FoodEx2
326 classification to the data will be verified before dietary exposure is estimated.

327 Considering the relevant levels of plasticisers that emerge from the occurrence data in different foods
328 (call for data and literature), the best match between occurrence data and consumption data will be
329 performed at the most relevant FoodEx2 level. If there are data gaps for relevant food items or
330 categories, extrapolation from one food matrix to another can be considered where there are
331 similarities in characteristics (e.g. fat content) and supply chain (including FCM use). All assumptions
332 and extrapolations will be reported in the assessment and their possible effect on the estimates of
333 exposure will be assessed in the uncertainty analysis.

334 The left-censored occurrence data (results below the limit of detection (LOD) or LOQ) will be treated
335 by the substitution method as recommended in *Principles and Methods for the Risk Assessment of*
336 *Chemicals in Food* (WHO/IPCS, 2009) and in the EFSA scientific report *Management of left-censored*
337 *data in dietary exposure assessment of chemical substances* (EFSA, 2010b). The guidance suggests
338 that the LB (lower bound) and UB (upper bound) approach should be used for chemicals likely to be
339 present in the food (e.g. naturally occurring contaminants and nutrients). The LB is obtained by
340 assigning a value of zero (minimum possible value) to all samples reported as lower than the LOD
341 (<LOD) or LOQ (<LOQ). The UB is obtained by assigning the numerical value of LOD to values
342 reported as <LOD and LOQ to values reported as <LOQ (maximum possible value), depending on

¹¹ <https://www.efsa.europa.eu/en/data-report/food-consumption-data#the-efsa-comprehensive-european-food-consumption-database>

343 whether the LOD or LOQ was reported by the data provider. The outcome of this approach will
344 generate two exposure assessments under the LB and the UB scenarios.

345 Other specific scenarios may be developed, such as for seasonal foods, for specific eating habits, for
346 brand-loyal consumers, etc.

347 To calculate the chronic dietary exposure, food consumption and body weight data at the individual
348 level will be accessed in the EFSA Food Consumption Database. Occurrence data and consumption
349 data will be linked at the relevant FoodEx2 level. Typically, for each individual of the selected surveys,
350 the mean or median occurrence values (LB and UB) of the different food samples collected (pooled
351 European occurrence data) are combined with the average daily consumption of the corresponding
352 food items, and the resulting exposures per food are summed up in order to obtain the total chronic
353 exposure at individual level (standardised by using the individual body weight). The mean and the
354 95th percentile of the individual LB and UB exposures are subsequently calculated for each dietary
355 survey and each age class separately.

356 If the toxicological evidence indicates that two or more plasticisers should be grouped into a common
357 assessment group, the dataset will be examined for the occurrence of each plasticiser individually in
358 each food sample/food type and then the co-occurrence of the group members will be calculated for
359 each sample/type, taking into account potency adjustment factors if appropriate (EFSA Scientific
360 Committee, 2019). Summary statistics for exposure to the individual plasticisers will not be simply
361 summed.

362 The acute exposure is calculated on a per day basis. In the probabilistic approach, acute exposure is
363 assessed for each reporting day by multiplying the total daily consumption amount of food by one
364 occurrence level randomly drawn among the individual results available. Respective exposures from
365 the different foods consumed that day (by the considered subject) are normally summed up and
366 divided by the individual's body weight. This process is usually iterated n (e.g. 100) times for each
367 reporting day for each survey. The mean and the 95th percentile of the individual LB and UB
368 exposures are subsequently calculated across all dietary surveys and age classes separately.

369 Analyses will be run using the SAS Statistical Software.

370 **3.4. Uncertainties related to Q1**

371 The evaluation of the uncertainties in the risk assessment on the prioritised substances will be
372 performed based on the guidance on uncertainty analysis of the EFSA Scientific Committee (EFSA
373 Scientific Committee, 2018) and the guidance on communication of uncertainty in scientific
374 assessments (EFSA, 2019). The sources of uncertainty will be summarised in each assessment in
375 tabular form and the possible ways in which they may influence the final outcomes and conclusions
376 will be explained. It will be attempted to predict their effect on the final estimates (e.g. lead to over-
377 or underestimation) and their possible influence on the assessment conclusions.

378 Uncertainties relate to the occurrence of the prioritised substance and to the food consumption data
379 used in the exposure assessment calculations.

380 The main sources of uncertainty related to occurrence data belong to the following categories:

- 381 • Sampling strategy (e.g. random sampling vs suspect sampling).
- 382 • Representativeness of the occurrence data (e.g. representativity for the whole of the EU when
383 data have been collected in one specific country and/or under particular circumstances;
384 representativity for the food category; inclusion of outdated occurrence data; extrapolation
385 from one food matrix to another when data are lacking for certain food items).
- 386 • Data reporting (lacking information on food processing; possible reduction/increase due to
387 household/industrial processing).
- 388 • Analytical measurement uncertainty.
- 389 • Use of analytical methods with low sensitivity may lead to a high percentage of left-censored
390 data that may contribute to large differences between the LB and UB exposure estimates.

391 Uncertainties and limitations arising from the use of the EFSA Food Consumption Database have been
392 described in detail elsewhere (EFSA, 2011), and relate to the following methodological aspects:

- 393 • Sampling strategy and response rate: using sampling strategies which are convenient (e.g.
394 use of household as sampling unit rather than individuals) and low response rates may lead to
395 survey samples which are not representative of the general population at national level. This
396 could lead to over- or underestimation of the intakes in the general population at national
397 level.
- 398 • Representativeness over different weekdays and seasons: surveys not covering weekdays and
399 weekend days, or conducted in one season only, may not capture usual intakes, mostly for
400 foods which are consumed in one season only or on special occasions (e.g. weekends).
401 However, most surveys in the EFSA Food Consumption Database, especially those conducted
402 more recently, cover a whole year with an appropriate proportion of weekdays and weekend
403 days.
- 404 • Methodology used to assess dietary intakes: dietary recall vs food records. Each of the two
405 methods has its strengths and limitations as described in EFSA (2011).
- 406 • Use of standard portion sizes: this can lead to over- or underestimation of the actual quantity
407 consumed.
- 408 • Inclusion of consumption surveys covering only a few days: this leads to an overestimation of
409 high percentiles of chronic intake, whereas it is expected to minimally affect mean intakes of
410 food widely distributed in the diet. For foods not consumed daily, intakes could be over- or
411 underestimated depending on whether consumption days are captured in the survey. This
412 also has an impact on the number (and percentage) of consumers of non-core food groups
413 identified in the surveys.
- 414 • Other systematic errors: underreporting has been shown to be associated with sex, age,
415 educational level and body mass index (e.g. obese subjects and male subjects underreport
416 more frequently than lean subjects and females; EFSA, 2009).

417 Other sources of uncertainty, e.g. due to the building of scenarios, that contribute to the exposure
418 assessment will also be considered.

419 **4. Question 2 (Q2): How much of the chronic and/or acute dietary** 420 **exposure to the prioritised substances originates from FCMs in the** 421 **different population groups and age classes in the EU?**

422 This question concerns dietary exposure (primarily chronic, but might also include acute, depending
423 on the toxicology of the substances that will end up on the list of prioritised substances) that
424 originates specifically from FCMs. This covers all food that comes into contact with FCMs along the
425 food chain. This question relates to different materials such as plastic, rubber (all elastomeric
426 materials), paper and board, inks, varnishes and adhesives (e.g. from labels) and covers packaging
427 materials (industrial, retail and home-use), food manufacturing and processing equipment, as well as
428 kitchenware and tableware.

429 Uncertainties identified for the different SQs are discussed in Section 4.7.

430 **4.1. Sub-question 2.1 (SQ2.1): In which FCMs do the prioritised** 431 **substances under study occur, and in what concentrations and at** 432 **what frequency of use (market share)?**

433 **Evidence needs**

434 In which FCMs the prioritised substances are intentionally used or may be present unintentionally, the
435 concentration of the prioritised substances in FCMs and information on market share.

436 Focus will be laid on use of the substances as plasticisers (including plasticiser mixtures) due to the
437 high migration potential and the fact that actual or potential use as a plasticiser was the criterion used
438 for the selection of substances. Nonetheless, because these plasticiser substances may find other
439 technical uses, e.g. as a carrier solvent, these uses will also be taken into account when relevant.

440 **Methods for answering the SQ**

441 Data on the occurrence of the prioritised substances in FCMs will be extracted from the database on
442 migration data available to EFSA when performing the assessment. Such occurrence data will be
443 collected through an ad hoc call for data that is under development at the time of drafting this
444 protocol. National food authorities, research institutions, academia, food business operators and other
445 stakeholders will be invited to submit occurrence data. The outcome of SQ2.4 will be used in the
446 evaluation to decide whether the reported data are representative and reliable to be used to answer
447 SQ2.1.

448 Other sources of relevant information and data will be accessed to identify FCMs where the prioritised
449 substances may occur and at what concentration ranges and frequency of use. The objective is not to
450 perform a systematic review, screening all possible available articles, studies and databases, but
451 rather to consider the ones that provide an overview of the occurrence of prioritised substances in
452 FCMs and recent trends on their use, or to focus on specific aspects to address gaps and missing data
453 relevant when making the estimate of exposure from FCMs.

454 Other sources include:

- 455 a) articles from the scientific literature available through a narrative review (see Section 6);
- 456 b) reports from market surveys and surveillance studies;
- 457 c) information from international institutions, such as ECHA and OECD, and industry (plasticiser
458 associations and all FCM sectors such as plastics, paper and board, inks and adhesives);
- 459 d) applicable European (harmonised FCMs), as well as national legislations. Any restrictions to
460 the use at national level and maximum use levels of prioritised substances will be considered.
461 The impact of specific national legislations on an EU level will be addressed.

462 To gather this information an open call may be considered.

463 The information retrieved from the data sources listed above will be used to address the evidence
464 needs specified above. The information will be summarised qualitatively (in which FCMs each of the
465 prioritised substances occurs) and quantitatively (provision of descriptive statistics, including numerical
466 summaries of concentrations and frequency of use) per FCM for each prioritised substance.

467 **4.2. Sub-question 2.2 (SQ2.2): In which step(s) of the food chain is the** 468 **FCM used? How often and under what conditions of use is the FCM** 469 **used in the food chain?**

470 **Evidence needs**

471 The step(s) in the food chain in which the FCM (as identified in SQ2.1) is in contact with food under a
472 given time/temperature, surface-to-volume (s/v) ratio and single vs repeated-use conditions, and
473 where migration might occur. The step(s) will cover the different applications of an FCM (e.g. during
474 processing on an industrial scale and at home, as packaging material used on an industrial scale, in
475 retail and at home, as well as possible migration during storage until the food is consumed).
476 Furthermore, home preparation may result in additional dietary exposure which is not covered when
477 using the concentration of the prioritised substance in food products on the market.

478 **Methods for answering the SQ**

479 To address SQ2.2 a characterisation of the intended use and applications of the FCM will be
480 performed, combining information gathered from various sources. This information will be further
481 developed to determine the step(s) in the food chain where the migration mostly occurs by applying
482 the principles governing the migration mechanism, and considering the impact of the contact
483 conditions, type of food and respective processing and handling conditions along the food chain, on
484 the rate and level of migration.

485 Sources of information are:

- 486 a) articles from the scientific literature available through a narrative review (see Section 6);
- 487 b) reports from market surveys and surveillance studies;

- 488 c) information from international institutions, such as ECHA and OECD, and food industry using
489 the materials and articles;
490 d) applicable European (harmonised FCMs), as well as national legislations. Any restrictions to
491 the use at national level, including maximum allowable migration levels of prioritised
492 substances, will be considered. The impact of specific national legislations on an EU level will
493 be addressed.

494 To gather this information an open call may be considered.

495 Based on the information retrieved from the data sources listed above, the relevant step(s) in the food
496 chain in which the FCM is in contact with foods and where migration might occur will be identified and
497 characterised.

498 **4.3. Sub-question 2.3 (SQ2.3): What is the concentration of the** 499 **prioritised substances that migrated into food from each identified** 500 **FCM (SQ2.1), during the relevant step(s) of the food chain** 501 **(SQ2.2)?**

502 **Evidence needs**

503 For each identified FCM and for each relevant step, the concentrations of the prioritised substances in
504 food that migrated from the FCM.

505 If such information is not available for each identified FCM and relevant step(s), concentrations of the
506 prioritised substances in food simulants in contact with FCM can be used, as well as data from
507 migration modelling. The uncertainties related to the use of such information will be addressed in the
508 uncertainty analysis.

509 The concentrations should be representative of the prioritised substances migrated into food as
510 consumed in the EU.

511 In addition, information on the material of the FCM (e.g. rubber, plastic) as well as the type of article
512 in contact with food will be collected.

513 **Methods for answering the SQ**

514 To address SQ2.3 regarding the concentrations of the prioritised substances migrated into food in
515 European countries, a structured approach will be followed to collect and evaluate the evidence. An ad
516 hoc call for concentration data in FCMs and migration data in food and in food simulants will be
517 launched by EFSA. National food authorities, research institutions, academia, food business operators
518 and other stakeholders will be invited to submit data.

519 When concentrations from migration testing with food simulants are used, the relevant foods into
520 which the prioritised substances may migrate will be assigned for each FCM identified. The nature of
521 the migration test that has been conducted will give useful information to help this process. The
522 description of the material or article tested, the food simulant(s) used, the time and the temperature
523 of the test applied, and the nature of the contact (single-sided, total immersion, article filling,
524 repeated-use) should all be reported to accompany the test result(s) itself and this information will
525 help to indicate the intended use of that material or article for contact with a particular food item or
526 food category. The information gathered for SQ2.2 will assist this process. For articles with a clearly
527 defined purpose (bottle, gasket, tubing, carton, etc.) it is anticipated that this assignment will be
528 relatively straightforward although still not unambiguous. For materials that are not yet fabricated into
529 their final form (mainly sheets and films), the assignment of the migration test results to specific foods
530 or food categories along with their contact conditions, will inevitably involve a degree of uncertainty.
531 In those situations, conservative assumptions on choices or judgements will be made. The sources
532 and effects of such uncertainties will be addressed in the uncertainty analysis.

533 To guarantee an appropriate quality of the occurrence data used in the exposure assessment, the
534 initial dataset will be evaluated before being used to estimate dietary exposure. The outcome of SQ2.4
535 will be used in this evaluation to decide whether the reported concentrations are representative and
536 reliable enough to be used in the dietary exposure assessment.

Prediction of migration from plastic FCMs into foods and food simulants can be achieved based on scientifically recognised migration modelling carried out according to validated procedures. Such models describe the mass transport of a substance from a plastic FCM using known or estimated diffusion coefficients in the FCM and known or estimated partition coefficients between the plastic and the food (simulant). Detailed information about the application of and guidance to a recognised European model can be found in the Joint Research Centre's Technical report *Practical guidelines on the application of migration modelling for the estimation of specific migration* (Brandsch et al., 2015). In chapter 3.2.5.2 of that report, particular attention is given to plasticised polymers. As plasticisers are used at high concentrations, the diffusion coefficient depends on the use level of the plasticiser in the polymer. In general, however, plasticised FCMs are characterised by high diffusion in the polymer so that the extent of migration is predominantly controlled by the partition coefficient, i.e. triggered by the log Po/w of the given substance (see above, introduction to Q2). Such migration modelling also provides a useful tool for checking the plausibility of experimental migration data and estimation of the related uncertainties. This requires appropriate information about the type, nature and structural specifications of the FCM and initial concentration range of the given substance in FCM before the start of migration (which is typically the use level) as well as the applied migration test conditions (time, temperature, type of food or food simulant). These details will be retrieved from the infilled data templates and can, if missing, be completed with reasonable assumptions. It should be noted that migration modelling is intended to be conservative and to deliver the UB rather than realistic concentrations in the food or simulant.

Another option to estimate migration for a prioritised substance is a read-across approach. This approach is of particular interest when the objective is to replace certain plasticisers with alternatives and where reliable use levels in the FCM and migration data exist for the plasticiser to be substituted. The alternative plasticiser (the data recipient) should have similar physico-chemical properties to the original (the data donor), i.e. molecular weight and polarity (log Po/w) as this will give similar quantitative migration behaviour and so allow 're-use' of the existing migration data. Varying use levels of the alternate compared with the original can be corrected by the assumption that the alternate migrates *pro rata* to the use level. Variations in molecular weight and/or polarity can be corrected by migration modelling tools (see above). Contrary to migration modelling where the intention is to provide concentrations conservatively, read-across has strong potential to provide more realistic data as long as the starting reference dataset is on a solid realistic basis.

Other data sources:

- a) articles from the scientific body of literature available through a narrative review (see Section 6).
- b) other databases (e.g. the Information Platform for Chemical Monitoring database);
- c) applicable European (harmonised FCMs) and national legislations. The restrictions on the use at national level, including maximum allowable migration levels of prioritised substances, will be considered. The impact of specific national legislations on an EU level will be addressed.

The information collected from all possible sources listed above will be assessed using the described criteria. It will be summarised quantitatively to obtain estimates of the concentration of the prioritised substances in food that migrated from each identified (by SQ2.1) FCM during the relevant step(s) of the food chain. Possible data gaps will be attempted to be filled by read-across approaches.

4.4. Sub-question 2.4 (SQ2.4): What is the reliability and representativeness of the results obtained from testing for composition and migration?

The test methods have to be appropriate to generate reliable and representative concentrations for use in quantitative dietary exposure assessments.

For a migration test, two aspects are relevant. The first is the migration protocol used to take a sample of the material or article and place it into contact with the food or simulant using defined and well-controlled conditions of s/v ratio, time and temperature. The second is the test method (analytical method) used to measure the concentration of the plasticiser in the exposed food or

588 simulant. Likewise, to determine the composition of the FCM, an extraction protocol followed by an
589 analytical method is needed.

590 **Evidence needs**

591 For each concentration from SQ2.1 and SQ2.3:

- 592 • A full description of the FCM (e.g. nature of the material, chemical composition, type of
593 article, thickness, number and order of layers if it is a multilayer).
- 594 • The test conditions: the s/v ratio, the choice of the food simulant and time and temperature
595 conditions.
- 596 • The test method used and the LOD/LOQ.

597 **Methods for answering the SQ**

598 The required information on the migration protocol and test method (when available) will be extracted
599 from the EFSA database or from the scientific papers.

600 The suitability of the test method to generate reliable and representative concentrations for use in
601 quantitative dietary exposure assessment will be evaluated.

602 The dataset may contain a large amount of left-censored data and the presence of relatively high
603 LODs/LOQs may have a significant influence on the LB and UB scenarios. In order to reduce this
604 impact, a careful evaluation of LODs/LOQs should be performed. Relevant actions will be undertaken
605 in order to avoid bias (such as the application of LOD/LOQ cut-offs (EFSA et al., 2018)).

606 The evaluation of the extraction/migration protocol and test method for each dataset considered in
607 SQ2.1 or SQ2.3 will serve as an inclusion/exclusion criterion for the study. If they are not appropriate
608 to generate reliable and representative data, the respective dataset will not be considered further.

609 **4.5. Sub-question 2.5 (SQ2.5): What are the consumption levels of** 610 **relevant food (in which the migration/concentration due to FCM** 611 **was assessed under SQ2.3) in different population groups and age** 612 **classes in the EU?**

613 **Evidence needs**

614 Individual consumption data for the foods for which concentration data were obtained under SQ2.3 in
615 different population groups and age classes in the EU.

616 Information from other specific surveys (e.g. on consumption of packaged food/takeaways) carried
617 out among relevant EU population groups and published in the literature.

618 **Methods for answering the SQ**

619 The EFSA Food Consumption Database will be the source of food consumption information using
620 FoodEx2 and the relevant facets when available. See SQ1.2 for further information.

621 Apart from the details already given for SQ1.2 on the composition and use of the EFSA Food
622 Consumption Database, specific FoodEx 2 facets could be used to look for products that are packaged
623 or intended to be in contact with FCMs. When available, reported information via use of ad hoc facets
624 for food packaging/processing will be explored. However, the completeness of reporting such
625 information might vary from survey to survey and from one food category to another. Specific use of
626 facets will be evaluated in each assessment, also taking into account the uncertainty. Pragmatic
627 solutions and assumptions might be used and an ad hoc evaluation will be performed case by case.
628 For instance, if consumption data at the level of the individual for cheese packed in plasticised film is
629 not available, an assumption might be made that the consumption is the same as of cheese packaged
630 in any type of plastic or even the same as their total cheese consumption if the type of packaging is
631 not reported at all. In general, the higher FoodEx2 category within the exposure hierarchy will be
632 used to match the occurrence data, unless there are indications from other sources (e.g. Global New
633 Products Database (GNPD), industry information, etc.) that could facilitate a more selective match to a
634 specific lower FoodEx2 category. All such assumptions will be reported in the linkage table (see
635 Section 4.6) and taken into consideration in the uncertainty analysis.

636 It should be noted that the information on packaging in the EFSA Food Consumption Database is
637 limited and this limitation will be considered as a source of uncertainty.

638 When information from other specific surveys (e.g. on packaged food) carried out among relevant EU
639 population groups is present in the literature, it might be used to check consumption values or to
640 complement considerations on the uncertainty of the used values. Therefore, a narrative literature
641 search will be conducted to identify papers that provide information on the consumption of packaged
642 food (see Section 6).

643 Consumption data from all sources will be considered in order to obtain estimates of consumption for
644 the foods for which concentrations of prioritised substances due to FCMs were assessed under SQ2.3.

645 **4.6. Method for integrating evidence across the sub-questions**

646 To estimate the human dietary exposure from FCMs (Q2), representative scenarios will be given
647 reflecting the exposure that may occur for the identified FCMs and relevant step(s) of the food chain.
648 The concentration levels of prioritised substances in relevant food categories due to migration will be
649 used for exposure assessment.

650 Initially, the answer to Q2.1 will clarify in which FCMs each of the prioritised substances occurs, in
651 what concentrations and at what frequency. The assessment of SQ2.2 will show the relevant step(s)
652 in the food chain where the FCM is in contact with foods and when migration might occur. The work
653 done to address SQ2.3 will provide information on the concentration of the prioritised substances in
654 food that migrated from each identified FCM (under SQ2.1) for the step(s) identified under SQ2.2. The
655 assessment of SQ2.5 will provide the consumption levels of the foods that were considered under
656 SQ2.3. The information collected and assessed for SQ2.4 will serve as inclusion or exclusion criteria
657 for the dataset to be used to answer SQ2.1 and SQ2.3.

658 Question 2 will be answered by mathematically combining the estimates from SQ2.3 and SQ2.5.
659 Hence, a linkage table will be created to match the food or simulant with the relevant FoodEx2
660 categories to enable the integration of the food consumption data. The first level of match will be
661 based on Table 2 of Annex III of Regulation (EU) No 10/2011. Then the best match with individual
662 consumption data will be performed selecting the most suitable Foodex2 level on a case-by-case
663 basis. The use of facets (e.g. those related to packaging or processing when available and relevant) to
664 refine the match will be considered when data are available. Unless there are indications from other
665 sources (e.g. GNPD, industry information, market share, etc.) that can facilitate the selective match to
666 a specific FoodEx2 category, the higher level food category will be used in the assessment. In view of
667 the available migration data and of the identified factors driving the occurrence of the prioritised
668 substance in the relevant food categories, pragmatic assumptions and solutions will be made. All the
669 assumptions will be documented in the assessment and taken into consideration in the uncertainty
670 analysis.

671 Finally, the relative contribution of exposure to the prioritised substance from FCMs (Q2) to the total
672 dietary exposure (Q1) will be calculated, making it possible to estimate how much of the total dietary
673 exposure to the prioritised substances originates from FCMs. The proportion of the total dietary
674 exposure due to FCMs will be estimated separately for the different population groups and age classes
675 in the EU.

676 **4.7. Uncertainties related to Q2**

677 Uncertainties that result from addressing Q2 fall into four main categories. These concern the uses of
678 the substance in FCMs, the migration data available, the related food consumption information used
679 and the methods used to combine this information to derive estimates of exposure.

680 *Uses in FCM*

- 681 - Uncertainties here relate to incomplete information and possibly inaccurate information (over-
682 or underreporting) regarding the range of FCMs in which the substance is used, the respective
683 use levels (concentrations) of the substance in those FCMs, and the likelihood (or frequency)
684 that those materials find actual use (e.g. consumer preference for home uses, market shares
685 for packaging retail foods and for FCMs used by the industry).

686 *Migration data*

- 687 - For data on migration into foods, the sources of uncertainty were described in Section 3.4 in
688 relation to occurrence data in foods when addressing Q1.
- 689 - For data on migration into food simulants, there will be uncertainty over the extent to which
690 the real concentration of plasticisers in food will tend to be overestimated using results from
691 migration experiments. Migration tests simulate the situation at the end of the shelf-life,
692 whereas data collected on occurrence in food (Q1) will represent an earlier time point.
693 Similarly, the nature of the food simulant along with the time and temperature test conditions
694 used are intentionally conservative and designed to elicit higher migration than expected in
695 real use with foods. If migration levels are overestimated and not corrected for, this would
696 feed into overestimates of exposure.
- 697 - For repeated-use FCMs such as conveyor belts, tubing and plasticised gloves, there will be
698 uncertainty inherent in extrapolating the results of migration tests using simulants to
699 migration levels into food expected during the service life of the FCMs, taking into account
700 divergent s/v ratios, the effect of ageing, cleaning procedures, etc.
- 701 - For migration levels estimated using migration modelling, the main sources of uncertainty are
702 the same as when using data from food simulants, since most migration models and the
703 modelling parameters aim to estimate migration into simulants and not into foods.

704 *Consumption*

- 705 - When using data on migration into foods, the sources of uncertainty relating to food
706 consumption were described in Section 3.4 when addressing Q1.

707 *Method for integrating the evidence*

- 708 - When using data on migration into food simulants and from migration modelling, the main
709 uncertainty will be in linking the migration results (which will pertain to only very broad food
710 characteristics such as fatty/oily, acidic, aqueous, alcoholic) to the food categories described
711 at the various levels of the FoodEx2 classification system used for the EFSA Food
712 Consumption Database.
- 713 - The final output from addressing Q2 is how much of the overall dietary exposure to the
714 prioritised substances originates from FCMs. Comparing the conclusions from Q2 (exposure
715 from FCMs) with Q1 (total dietary exposure) could entail large uncertainties. The estimates to
716 be compared will be obtained using different methodologies, will be distributions not fixed
717 values, and will come with their own attendant uncertainties.

718 **5. Question 3 (Q3): How does dietary exposure due to FCMs compare**
719 **with the overall (dietary and non-dietary) exposure of EU**
720 **consumers?**

721 This question concerns the overall (dietary and non-dietary) exposure of EU consumers to prioritised
722 substances and how it compares with dietary exposure due to FCMs (Q2). Depending on the
723 availability and quality of the data, the following two approaches may be used (either individually or in
724 combination) in order to gain information on the overall exposure of consumers.

- 725 - Overall exposure based on aggregation of non-dietary exposure from uses of the substance in
726 consumer products (articles and chemical products) (SQ3.1 and SQ3.2) and dietary exposure
727 from FCMs and other sources, including environmental contamination (Q1).
- 728 - Overall exposure based on human biomonitoring (HBM) data (SQ3.3).

729 Occupational exposure is not within the scope of Q3.

730 Uncertainties identified for the different sub-questions are discussed in Section 5.5.

731 **5.1. Sub-question 3.1 (SQ3.1): What are all the actual uses of the**
732 **prioritised substances and the possible sources and routes of non-**
733 **dietary exposure?**

734 Examples of sources could be consumer exposure to articles (e.g. plastic flooring or furniture, toys)
735 and chemical products (e.g. cleaning products) as well as exposure via dust/inhalation.

736 **Evidence needs**

737 There is a need to collect information on uses of the prioritised substances with a focus on the use of
738 articles and chemical products by consumers. Primarily, there is a need to identify product categories
739 and article categories¹² correlated to the prioritised substances (this will help to categorise uses and
740 also determine default conditions of use, see SQ3.2); secondly, other information can be collected at
741 this stage to help to understand how the substance is used and the potential route of exposure, for
742 example: a) the tonnage band to understand, in correlation to uses, whether we are addressing a
743 niche or widespread use; b) the technical function of the substance to appreciate, for example, the
744 potential release when embedded into a solid matrix; c) some basic substance properties to better
745 qualify the route of exposure (e.g. low volatility can be an indication of low exposure via inhalation of
746 vapour).

747 While REACH requires registrants to cover all uses in their registration dossiers, for some specific uses
748 there may be a more detailed assessment done under other pieces of legislation. Furthermore, uses in
749 cosmetics are exempted from the authorisation requirement and REACH restrictions for hazards and
750 risks to human health. Authorisation requirements do not cover the risks to human health arising from
751 the uses in medical devices either. Consequently, ECHA has not developed methods and tools to
752 assess human health exposure (SQ3.2) associated with these products and articles.

753 **Methods for answering the SQ**

754 The methods proposed for identifying uses and routes of exposure to chemical products and articles
755 used by consumers are listed below.

- 756 - It is proposed to use the ECHA database of REACH-registered substances as the main source
757 to collect and categorise uses (e.g. using product and article categories) by consumers; it is
758 also possible to collect information on the technical function and volatility of the substance.
- 759 - It is also possible to further investigate the presence of some prioritised substances in articles
760 via the 'Substances in articles' list¹³ and the 'Substances of concern in articles as such or in
761 complex objects (products)'¹⁴ database (imported articles are also addressed here, possibly
762 not subject to REACH registration). However, the relevance of this information will be very
763 limited, since this database includes only information on substances identified as substances
764 of very high concern under REACH and most of those substances are classified as CMR Cat 1
765 or identified as 'endocrine disruptor', 'persistent, bioaccumulative and toxic' or 'very
766 persistent, very bioaccumulative' and thus a risk assessment will be conducted only if the
767 substances may nevertheless be used in FCMs following the implementation of risk
768 management measures in accordance with the Chemicals Strategy for Sustainability (EC,
769 2020).

¹² Lists of relevant product categories and article categories are reported in ECHA's *Guidance on Information Requirements and Chemical Safety Assessment* Chapter R.12: Use description Version 3.0 December 2015, Tables R12-10 and R12-14. Available online: https://echa.europa.eu/documents/10162/17224/information_requirements_r12_en.pdf/ea8fa5a6-6ba1-47f4-9e47-c7216e180197?page=10&zoom=auto,-108,8

¹³ Producers and importers have to notify ECHA of the substances listed on the Candidate List that are present in their articles if both the following conditions are met: i) the substance is present in the article above a concentration of 0.1% w/w; ii) the substance is present in the article in quantities totalling over 1 tonne per year. Companies have to notify no later than six months after the inclusion of the substance in the Candidate List. For further details see: <https://echa.europa.eu/regulations/reach/candidate-list-substances-in-articles/notification-of-substances-in-articles>.

¹⁴ This is a database established under the Waste Framework Directive (Directive 2008/98/EC). In accordance with the Directive, companies supplying articles containing substances on the Candidate List in a concentration above 0.1% w/w on the EU market have to submit information on these articles to ECHA, from 5 January 2021. The information provided is included in the database: <https://echa.europa.eu/scip>

770 - A literature search is proposed as an additional means for identifying uses of the prioritised
771 substances (see Section 6).

772 The collected data via registration and literature review may be complemented with an open call to
773 provide information.

774 Data on all known uses of the prioritised substances and potential sources and routes of consumer
775 exposure originating from all the sources listed above will be assessed, collated and summarised
776 qualitatively.

777 **5.2. Sub-question 3.2 (SQ3.2): What is the non-dietary exposure to the** 778 **prioritised substances from the individual uses identified under** 779 **SQ3.1?**

780 Here we consider the estimation of non-dietary exposure from the uses and routes of exposure
781 identified in SQ3.1 by taking into account e.g. qualitative argumentations, modelling approaches or, in
782 the case of availability of data, measurements performed at European level or in individual European
783 countries.

784 **Evidence needs**

785 To estimate the consumer exposure after the identification of potential uses, an identification of the
786 main physico-chemical properties is in the first instance needed to perform any exposure estimation;
787 molecular weight, solubility, n-octanol partition coefficient and vapour pressure are the main
788 parameters used to run the most common exposure estimation models. Other important factors
789 needed to estimate exposure are the 'conditions of use' (i.e. how the substance is used by
790 consumers), e.g. concentration of the substance in consumer products, frequency and duration of use
791 of the product or article, the body surface exposed, the amount of product used, indoor or outdoor
792 application, etc. If measured data (e.g. indoor air concentrations, migration to saliva, sweat, mucus
793 membranes and skin) are available, contextual information is needed to understand the
794 representativity of the data that can be used to estimate the exposure.

795 **Methods for answering the SQ**

796 The methods that can be proposed to estimate non-dietary consumer exposure are discussed below:

- 797 - Qualitative approach: if the substance is not used in consumer products (articles or chemical
798 products) or the tonnage band suggests a very low amount ending up in consumer products,
799 it might be concluded that the consumer exposure is unlikely or minimal.
- 800 - Quantitative approach (modelling): tools are available to estimate exposure to chemical
801 products and articles used by consumers¹⁵ via a tiered approach; input parameters (see
802 conditions of use and physico-chemical properties of the substance) are needed to estimate
803 exposure via modelling. If information on condition of uses¹⁶ cannot be found from literature,
804 open-source databases will be consulted. Moreover, default (conservative) parameters are
805 provided in the tools (e.g. via RIVM factsheets¹⁷) to estimate exposure. Two main models are
806 mentioned in the ECHA R15 guidance on consumer exposure: ECETOC targeted risk
807 assessment consumers (first tier, conservative, covering both chemical products and articles)
808 and ConsExpo¹⁸ (first and second tiers, mainly covering chemical products, can be used in
809 combination with the above-mentioned RIVM factsheets). Modelling has a tendency to
810 overestimate exposure, with the first tier being more conservative and advanced tiers more
811 data-demanding.

¹⁵ See ECHA R15 Guidance at <https://echa.europa.eu/guidance-documents/guidance-on-information-requirements-and-chemical-safety-assessment>

¹⁶ This information might be reported in the Chemical Safety Report by registrants, but they are confidential.

¹⁷ RIVM (Dutch National Institute for Public Health and the Environment) factsheets are available online: <https://www.rivm.nl/en/consexpo/fact-sheets>

¹⁸ National Institute for Public Health and the Environment (RIVM), Dutch Ministry of Health, Welfare and Sport: <https://www.rivm.nl/en/consexpo/consexpweb>

- 812 - Measured data related to different exposure routes can also be retrieved from literature
813 searches (see Section 6). For example, several studies have been run to measure the
814 migration of phthalates to sweat, saliva and skin from different types of articles giving dermal
815 and oral exposure. Information on the presence of substances in indoor house dust can also
816 be present, giving exposure by inhalation; although the information available in the literature
817 might be limited to a few substances.
- 818 - Read-across from exposure to other (similar) substances. This can be a very valuable source
819 of information in the case of migration from articles to saliva (oral exposure) or skin; e.g. if
820 the substance is used as plasticiser in plastic articles and has similar physico-chemical
821 properties (log Po/w and molecular weight) to a well-known and data-rich substance (e.g.
822 phthalates), then the migration to skin (sweat) and saliva from the data-rich plasticiser can be
823 read across for the substance of concern (in the event that adaptation to concentration in the
824 article and duration of exposure might also be possible). The concept is very similar to the
825 one described in SQ2.3 in relation to read-across of migration from FCMs.

826 Similar to SQ3.1, the collected data via literature review may be complemented via an open call to
827 provide information.

828 This sub-question will be addressed quantitatively. The approaches described above will be used in
829 combination, depending on data availability, in order to obtain exposure estimates for the relevant
830 uses.

831 **5.3. Sub-question 3.3 (SQ3.3): What is the overall (dietary and non- 832 dietary) exposure to the prioritised substances measured through 833 HBM?**

834 **Evidence needs**

- 835 - Measurement of validated biomarkers of exposure to the prioritised substances in studies covering
836 EU consumers.
- 837 - Information to convert biomarker concentrations into exposure.

838 **Methods for answering the SQ**

839 Human biomonitoring (HBM) is the measurement of substances (biomarkers) as parent compounds,
840 their metabolites or their reaction products in human tissues and body fluids. HBM data incorporate
841 exposures from all sources and all routes (oral, dermal and inhalation). The measurements
842 incorporate individual variability in exposure and the kinetics of the substance in the body (absorption,
843 distribution, metabolism and excretion).

844 To address SQ3.3 a systematic literature review will be carried out to identify all available HBM studies
845 concerning the prioritised substances that have been carried out in the EU. The literature search
846 strategy will be developed according to the substances included in the priority lists. Careful
847 consideration of the study design, biomarker selection, toxicokinetics and populations examined
848 (including biased sampling) are critical when interpreting HBM data. The systematic review will also
849 evaluate the literature concerning toxicokinetic (TK) models and information concerning correlations
850 between exposure to the prioritised substances and the corresponding biomarker(s) that are
851 measured.

852 The toxicokinetic (TK) data and/or the simple empirical correlations between exposure and biomarker
853 concentration found in the literature will be used to calculate the overall (dietary and non-dietary)
854 exposure of the individuals in the study population to the prioritised substance. It may be the case
855 that the publications identified may already have made such estimations of exposure, in which case
856 the basis for the calculations will be evaluated before the estimations of exposure are accepted.

857 If TK and empirical correlation data are missing for a prioritised substance, it may be possible to read
858 across from a source substance (for which the information is available) to the target substance. This
859 will only be done if it is established that a prediction of the TK parameters is possible, based on a
860 consideration of the chemical structures of the source and target substances (ECHA, 2017).

861 **5.4. Method for integrating evidence across the sub-questions**

862 The information available at this stage will be combined to answer Q3.

863 The estimates of dietary exposure due to the use of FCMs will be available from addressing Q2.

864 The overall exposure (also known as aggregated exposure) comprises total dietary exposure
865 (estimated when addressing Q1) plus total non-dietary exposure (estimated when addressing Q3.2).
866 The algorithm to sum up the two exposure estimates may follow a deterministic or probabilistic
867 approach depending on the quality of the data. If a deterministic approach is followed, scenarios
868 corresponding to different combinations of average and high estimates will be applied for different
869 consumer population groups as it is unlikely that each consumer is exposed to a certain substance at
870 the highest level for both dietary and non-dietary sources.

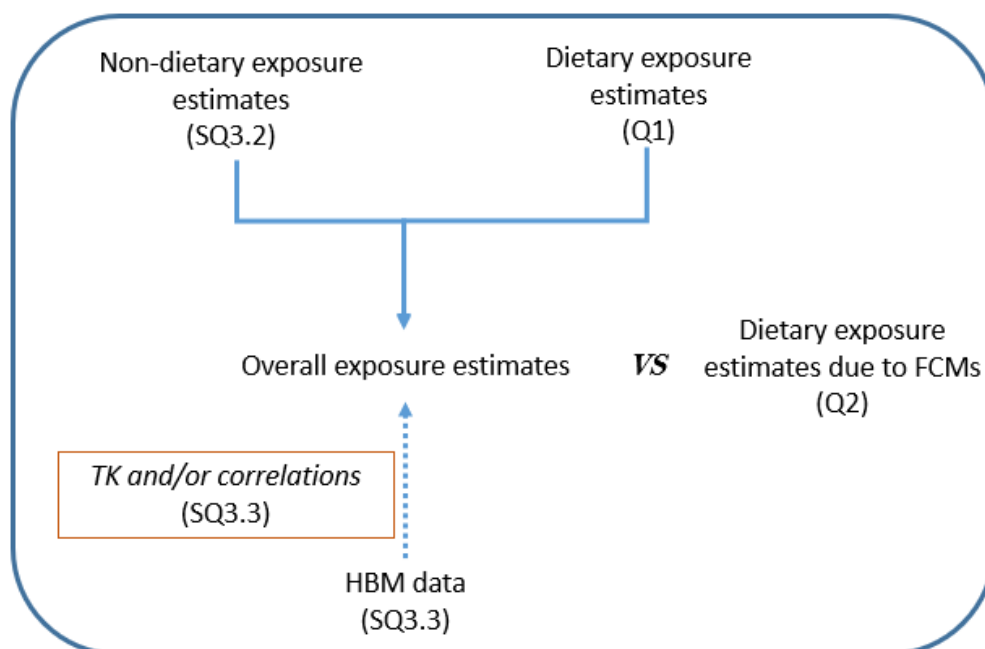
871 The overall exposure will also be estimated independently (addressed in SQ3.3) for those substances
872 that have HBM studies available along with TK or empirical relationship data to make it possible to
873 calculate exposure from biomarker concentration data.

874 The estimates of overall exposure obtained by aggregation of dietary and non-dietary exposures will
875 be compared with the estimates of exposure obtained through HBM, if these are available. This
876 quantitative comparison will take due regard of the uncertainties present in the two ways of
877 estimation, especially the degree of coherence between the different population groups that might be
878 covered, and in the nature and magnitude of any conservative assumptions that have been made. If,
879 taking these considerations into account, the HBM estimates significantly exceed the exposure
880 estimates calculated by aggregation (dietary plus non-dietary) then this might suggest that important
881 sources of exposure may have been missed or underestimated. In that case the data and the
882 underlying assumptions to answer the Qs/SQs will be revisited. If, on the other hand, the estimates
883 from HBM are significantly lower than the estimates from aggregation, this would suggest that some
884 assumptions made are overly conservative and should be revisited to see if some refinement is
885 justified.

886 Although it is anticipated that few of the prioritised substances will have adequate HBM information
887 available that would allow such a cross-check, it is possible that such an exercise may help to identify
888 any data gaps, methodological shortcomings, and insufficiently or overly conservative assumptions
889 made, which could be systematic in the evaluation approach used. In that case, it would be
890 appropriate to take any general lessons learned and corrections/adjustments made, and also apply
891 them to those substances lacking the independent estimations of overall exposure made via HBM
892 data.

893 Finally, the best estimates of dietary exposure due to FCMs (coming from Q2) will be compared with
894 the overall aggregated exposure to the prioritised substances for EU consumers (coming from Q1 and
895 SQ3.2), using the HBM information (coming from SQ3.3) to cross-check and possibly adjust the
896 estimates of overall exposure (see Figure 1). Similarly to the situation above, this quantitative
897 comparison will take due regard of the uncertainties present in the two estimations and in the nature
898 and magnitude of any conservative assumptions that have been made.

899



900

901 **Figure 1:** Scheme summarising the framework adopted to answer Q3.

902 **5.5. Uncertainties related to Q3**

903 The main uncertainties related to non-dietary uses and exposure to the prioritised substances are
 904 described below.

905 *Uncertainties related to uses*

- 906 - Quality of the information provided in REACH dossiers. Underreporting and, especially,
 907 overreporting of uses have been noticed for several substances. The registration update
 908 process promoted by ECHA might bring improvements on use reporting, with the cleaning by
 909 the registrants of uses wrongly reported in their registration dossier. However, low-quality
 910 reporting might lead to false positive use identifications in several cases.

911 *Uncertainties related to non-dietary exposure*

- 912 - Lack of available, good-quality data.
 - 913 ○ More realistic exposure values can be estimated using more advanced tools or
 914 measured data; however, the former needs more input data that are not easy to
 915 obtain and the latter might not be available for many of the prioritised substances.
- 916 - Exposure overestimation by first-tier exposure models.
 - 917 ○ First-tier models tend to overestimate exposure which may be acceptable for REACH
 918 purposes, but in this context, uncertainties may be too high and unacceptable. This
 919 may lead to unreliable conclusions; in particular if (inaccurate, overestimated) non-
 920 dietary exposure values are compared with accurate and more realistic dietary
 921 exposure figures.

922 These aspects, in particular the level of possible overestimation of the exposure, need to be taken into
 923 account while evaluating the component of non-dietary exposure.

924 *Uncertainties related to human biomonitoring data*

- 925 - If HBM data are obtained from a non-representative cohort or not necessarily covering all the
 926 different population groups and age classes in the EU, assumptions will have to be made on
 927 the possibility of generalising the results to the different population groups.

- 928 - If TK models or empirical correlations obtained for similar substances are used, the
 929 consequences in terms of uncertainty will be considered on a case-by-case basis.

930 Overall, the possible effects of all the sources of uncertainty identified during the assessment for
 931 Questions 1, 2 and 3, on the final outcomes and on the conclusions, will be investigated in the
 932 uncertainty analysis. It is expected that the level of uncertainty will be different for the three
 933 questions, with the level of accuracy and precision of estimates decreasing from Q1 to Q3. Depending
 934 on the assumptions made, the availability and completeness of the information, possible uncertainties
 935 linked to representativeness of the sampling, to modelling, to measurements and, in general, to the
 936 quality of certain pieces of evidence, it has to be expected that some estimates will be accompanied
 937 by considerable uncertainty, which may be very different in magnitude for different types of outcome
 938 estimates. The effect of this on the final conclusions cannot be predicted, especially since the final
 939 estimates of the assessment will be produced by combining estimates obtained for all three main
 940 questions. In extreme cases, the components of these calculations may differ in implausible ways; if,
 941 for example, the estimates of dietary exposure due to the use of FCMs obtained from addressing Q2
 942 appear to be higher than the overall estimates of dietary exposure obtained from Q1. For those
 943 reasons, uncertainty analyses for each individual question will attempt to produce distributions of
 944 plausible values (instead of deterministically calculated point estimates), considering all assumptions
 945 and related uncertainties, employing a sensitivity analysis whenever necessary to assess, for example,
 946 the effect of different methodological choices and the impact of variability characterising the
 947 distribution of certain parameters. Ultimately, it will be attempted to produce probability distributions
 948 or statements on the final estimates and appropriate conclusions. However, the uncertainty
 949 accompanying those, and therefore their usefulness, will be contingent upon the availability, accuracy
 950 and quality of evidence obtained during this exposure assessment and, generally, on the factors
 951 mentioned above.

952 6. Protocol for literature reviews

953 As previously described, a systematic approach to review the literature will be taken to answer SQ1.1
 954 and SQ3.3. SQ 2.1, SQ2.2, SQ2.5 and SQ3.1 will be addressed narratively. SQ2.3 and SQ3.2 will be
 955 initially addressed narratively but a full systematic review of the evidence may be performed at a later
 956 stage, depending on the evidence retrieved from other sources (especially evidence on the actual use
 957 of the prioritised substances coming from the calls for data and input from interested parties).

958 The same process will be followed up to the data extraction step for all the SQs independently
 959 whether they will be addressed narratively or systematically.

960 **Table 2:** Sub-questions and approaches considered to review the literature

Sub-question	Approach
SQ1.1: What are the concentrations of the prioritised substances in food in the EU?	Systematic
SQ2.1: In which FCMs do the prioritised substances under study occur, and in what concentrations and at what frequency of use (market share)?	Narrative
SQ2.2: In which step(s) of the food chain is the FCM used? How often and under what conditions of use is the FCM used in the food chain?	Narrative
SQ2.3: What is the concentration that migrated into food from each identified (SQ2.1) FCM, during relevant step(s) of the food chain (SQ2.2)?	Narrative/conditionally systematic
SQ2.5: What are the consumption levels of relevant food (in which the migration/concentration due to FCM was assessed under SQ2.3) in different population groups and age classes in the EU?	Narrative
SQ3.1: What are all the actual uses of the prioritised substances and the possible sources and routes of non-dietary exposure?	Narrative
SQ3.2: What is the non-dietary exposure to the prioritised substances from the individual uses identified under SQ3.1?	Narrative/conditionally systematic
SQ3.3: What is the overall (dietary and non-dietary) exposure to the prioritised substances measured through HBM?	Systematic

961 Narrative reviews might be also performed to address background information (e.g. possible sources
 962 other than FCMs for the presence of the prioritised substance in food, such as use as a food additive,
 963 carrier solvent, or environmental contamination).

964 Steps to perform the narrative and systematic reviews are described in the following sections.

965 6.1. Eligibility criteria

966 Tables 3 to 6 describe the eligibility criteria for the selection of studies relevant for SQ1.1 and SQ3.3
 967 that will be addressed using a systematic review.

968 The detailed eligibility criteria on study and reporting characteristics for the rest of the questions will
 969 be set a later stage. The level of detail in the eligibility criteria might vary depending on the
 970 characteristics of each SQ and the availability or evidence retrieved by other methods. Special
 971 considerations will be taken in the development of the eligibility criteria for SQ2.3 and SQ3.2 as they
 972 might be addressed systematically.

973 **Table 3:** Criteria for selecting studies based on study characteristics for SQ1.1

Study design	In	Studies measuring concentrations of the prioritised substances in food (including TDS)
	Out	Studies measuring concentrations from migration testing (either with food or food simulants)
Food samples	In	All types of food, including drinking water, sampled in the EU and EFTA countries
	Out	Other sample types
Outcome	In	Concentration of the prioritised substances: <ul style="list-style-type: none"> • Studies reporting concentrations of individual samples • Studies reporting the mean or median concentration, and the number of samples analysed
	Out	Studies not reporting or referencing the analytical method.

974

975 **Table 4:** Criteria for selecting studies based on study characteristics for SQ3.3

Study design	In	a) Studies measuring concentrations of biomarkers of exposure for the prioritised substances b) Studies establishing the correlation between external dose and biomarker concentration c) TK studies
	Out	
Population	In	For (a) human populations (consumers, and control groups from occupations studies) in the EU and EFTA countries For (b) and (c): human populations (consumers and workers)
	Out	
Outcome	In	For (a) concentration of biomarkers of exposure for the prioritised substances (individual or summary concentrations) For (b): correlation between external dose and biomarker

		concentration
		For (c): TK model
	Out	For (a) and (b): studies not reporting or referencing the analytical method

976

977 **Table 5:** Criteria for selecting studies related to report characteristics for SQ1.1

Time	In	Published from the year of authorisation or implementation of any additional restrictions of the prioritised substance
	Out	Published before the year of authorisation or implementation of any additional restrictions of the prioritised substance
Language	In	English EU languages for reports from national/international risk assessment bodies
	Out	Other languages
Publication type	In	<ul style="list-style-type: none"> • Primary studies (i.e. studies generating new data) • Theses • Reports from national/international risk assessment bodies and published reviews will be used to identify relevant references • Reports from national/international monitoring bodies (data from national monitoring bodies should be submitted via the call for data). These reports will be used to identify bodies in the possession of such data and they will be requested to submit the data to EFSA. Care will be taken to ensure that they are not double-counted)
	Out	<ul style="list-style-type: none"> • Letters to the editor • Expert opinions • Editorials • Conference abstracts or posters

978

979 **Table 6:** Criteria for selecting studies related to report characteristics for SQ3.3

Time	In	For (a): published from the year of authorisation or implementation of any additional restrictions of the prioritised substance For (b) and (c): no time restriction
	Out	For (a): published before the year of authorisation or implementation of any additional restrictions of the prioritised substance
Language	In	English EU languages for reports from national/international risk assessment bodies

	Out	Other languages
Publication type	In	(a), (b) and (c): <ul style="list-style-type: none"> • Primary studies (i.e. studies generating new data) • Theses • Reports from national/international risk assessment bodies and published reviews will be used to identify relevant references • Reports from national/international research studies and databases
	Out	(a), (b) and (c): <ul style="list-style-type: none"> • Letters to the editor • Expert opinions • Editorials • Conference abstracts or posters

980 6.2. Search for studies meeting eligibility criteria

981 The sources of information to retrieve relevant studies will be identified in line with the scope of the
 982 SQs and the publication types of interest set out in the eligibility criteria.

983 At least three bibliographic databases will be searched for the identification of primary studies
 984 (including one database with special focus on chemical information and that allows a search by CAS
 985 number). Additional databases might be used for the identification of theses. The websites or
 986 repositories of national or international risk assessment/monitoring/research bodies will be searched
 987 and/or browsed to identify reports relevant for the review. Additional sources, such as consumer
 988 product databases, notification databases of alert systems, chemical product categories and/or
 989 substances in products, might be considered for some of the SQs to be addressed narratively (e.g.
 990 SQ3.1).

991 For SQs on the prioritised substances, searches could be structured using only the concept of the
 992 prioritised substance or might include additional terms to represent other factors (e.g. population/food
 993 samples, outcome of interest). More targeted searches might be considered for some of the narrative
 994 reviews.

995 A wide range of search terms will be used to cover possible language variations (synonyms, related
 996 terms, CAS numbers, etc.) of the substances of interest but other terms (e.g. phthalates, plasticisers)
 997 could be considered. The same approach will be applied if additional concepts are added to the
 998 searches. Several sources will be consulted to select the search terms: PubChem, thesaurus, previous
 999 publications on the topic, etc. The terms, syntax and structure of the search will be adapted taking
 1000 into consideration the characteristics of each source of information.

1001 The output of the searches will be uploaded into Endnote reference management software (Clarivate
 1002 Analytics) or equivalent. Duplicate references will be removed by a combination of automatic and
 1003 manual detection of duplicates using reference management software or other tools.

1004 The final search processes and strategies will be documented and reported, i.e. the date of the
 1005 search, sources of information, search string or method of search for source of information, and the
 1006 number of records before and after de-duplication.

1007 Snowballing techniques to identify citations of the national/international risk assessment bodies and
 1008 published reviews identified and/or other relevant documents could be considered for some of the
 1009 questions according to what is given in their eligibility criteria.

1010 The sources of information and search strategies will be documented and reported.

1011 6.3. Study selection process

1012 The records retrieved via the literature searches will be screened against the eligibility criteria set out
 1013 above.

1014 The study selection process will be carried out in two steps:

1015 1. Step 1: title and abstract screening, to exclude obviously irrelevant records. All other
1016 apparently relevant records or those of unclear relevance will be moved to the following step.

1017 2. Step 2: full-text screening, to select records for inclusion or exclusion.

1018 These steps will be performed by two independent reviewers in parallel to minimise the risk of error
1019 using DistillerSR (Evidence Partners, Ottawa, Canada) or alternative tools. The DistillerSR Artificial
1020 Intelligence functions or other relevant tool could be used as the second reviewer at title and abstract
1021 screening to speed up the selection process. Inter-reviewer conflicts that are not solvable via one-to-
1022 one discussions will be evaluated and resolved among all the reviewers.

1023 Screeners will be trained using written documentation on study eligibility. Selection criteria will be
1024 piloted on a subset of records, and refined if needed at each step.

1025 The results of the different phases of the record selection process will be reported in a flowchart as
1026 recommended in the PRISMA statement on preferred reporting items for systematic reviews and
1027 meta-analyses (Page et al., 2021).

1028 Papers relevant as background information (e.g. sources other than FCMs for the presence of the
1029 prioritised substance in food) could be tagged during the screening process.

1030 **6.4. Data extraction from included studies**

1031 **6.4.1. Systematic reviews**

1032 Pre-established data extraction forms will be used for collecting the data from the individual studies.
1033 The extraction forms will be developed at a later stage, but they will comprise data on the
1034 characteristics of the studies (e.g. study design), and their key elements, results, analytical methods,
1035 aspects related to the internal and external validity of the studies, etc. The study authors will not be
1036 contacted for clarifications or to retrieve missing data.

1037 If a full-text document reports on more than one study, the individual studies will be identified in this
1038 step to allow for data extraction at individual study level. If a single study is reported in more than
1039 one publication, duplicated use of the data will be avoided.

1040 Clear instructions for extracting data will be developed. The data extraction forms will be implemented
1041 in DistillerSR, Excel and/or other tools, and will be pilot-tested on a subset of studies. After piloting,
1042 the forms and instructions may be refined. The data extraction will be conducted by one reviewer, and
1043 a second reviewer will confirm the data extracted.

1044 **6.4.2. Narrative reviews**

1045 The level of detail and method on the data extraction might depend on the SQ to be addressed but it
1046 should include all the relevant factors needed to reply to the question. A data extraction form for each
1047 SQ will be developed to determine which variables to extract. It could include variables such as
1048 bibliographic details, objective of the study, design, main results, etc. The data extraction will be
1049 performed by one reviewer and a second reviewer will confirm the data extraction.

1050 **6.5. Evidence appraisal and synthesis**

1051 **6.5.1. Systematic reviews**

1052 For each SQ the risk of internal and external bias (RoB) of each included study will be assessed
1053 separately. For SQ1.1 it may be decided not to use the literature data for the dietary exposure
1054 assessment of one or more of the prioritised substances (e.g. when the occurrence data received in
1055 the calls for data are sufficient to calculate dietary exposure), in which case the evidence appraisal will
1056 not be performed.

1057 Internal validity (internal bias) refers to the degree to which the result of a study is likely to be true
1058 and free of bias (systematic errors). Risk of bias relates to the propensity of a study to be affected by
1059 systematic errors.

1060 External validity (external bias) affects the extent to which the study results are generalisable to the
1061 assessment question, e.g. when the study settings are not representative of the reference population
1062 or conditions.

1063 Internal and external validity (or RoB) will be appraised for each individual study using an appropriate
1064 critical appraisal tool (CAT). Each study will be appraised by two independent reviewers. Possible
1065 discrepancies not solvable via discussion between the two reviewers will be discussed by the whole
1066 group. If upon further discussion the group cannot reach an agreement on a rating, the more
1067 conservative judgement (the highest RoB) will be selected. The CAT will be pilot-tested by two
1068 reviewers. Feedback from this testing phase will be used to further refine this process, starting from
1069 adjusting the CAT itself.

1070 For each appraisal question a rating will be provided assessing the probability of RoB. An algorithm to
1071 combine the answers to the appraisal questions and allocate studies to tiers of RoB (both internal and
1072 external validity) could be written to combine the judgements to the RoB questions into an overall
1073 RoB judgement for each individual study (by outcome).

1074 An appropriate methodology of synthesis of the evidence will be used.

1075 **6.5.2. Narrative reviews**

1076 Appraisal of the studies might be performed in a narrative manner. The evidence will be summarised
1077 and discussed in a narrative manner.

1078 **7. Plans for updating the protocol**

1079 Every amendment to this protocol during the risk assessment will be documented and duly justified.
1080 The amended version of the protocol will be published together with the risk assessment to ensure full
1081 transparency of the evaluation process.

1082

1083

1084 **References**

- 1085 Arcella et al. Technical report on handling of occurrence data for dietary exposure assessment. *in*
1086 *preparation*
- 1087 Brandsch R, Dequatre C, Hoekstra EJ, Mercea P, Milana MR, Schäfer A, Simoneau C, Störmer A, Trier
1088 X and Vitrac O, 2015. Practical guidelines on the application of migration modelling for the
1089 estimation of specific migration. EUR 27529. Luxembourg (Luxembourg): Publications Office of the
1090 European Union; 2015. JRC98028.
- 1091 Cadogan DF and Howick CJ, 2020. Plasticizers. Ullmann's Encyclopedia of Industrial Chemistry, Wiley-
1092 VCH, Weinheim. doi:10.1002/14356007.a20_439.
- 1093 ECHA (European Chemicals Agency), 2017. Read-Across Assessment Framework (RAAF). ECHA-17-R-
1094 01-EN, doi:10.2823/619212.
- 1095 EFSA, 2009. General principles for the collection of national food consumption data in the view of a
1096 pan-European dietary survey. EFSA Journal, 7:1435. doi: <https://doi.org/10.2903/j.efsa.2009.1435>
- 1097 EFSA (European Food Safety Authority), 2010a. Standard sample description for food and feed. EFSA
1098 Journal 2010;8(1):1457, 54 pp. doi:10.2903/j.efsa.2010.1457
- 1099 EFSA (European Food Safety Authority), 2010b. Management of left-censored data in dietary exposure
1100 assessment of chemical substances. EFSA Journal 2010;8(3):1557, 96 pp.
1101 doi:10.2903/j.efsa.2010.1557
- 1102 EFSA (European Food Safety Authority), 2011. Use of the EFSA Comprehensive European Food
1103 Consumption Database in Exposure Assessment. EFSA Journal 2011;9(3):2097, 34 pp.
1104 doi:10.2903/j.efsa.2011.2097
- 1105 EFSA (European Food Safety Authority), 2015. The food classification and description system FoodEx2
1106 (revision 2). EFSA supporting publication 2015;EN-804, 90 pp. doi:10.2903/sp.efsa.2015.en-804
- 1107 EFSA (European Food Safety Authority), 2019. Guidance on Communication of Uncertainty in Scientific
1108 Assessments. EFSA Journal 2019;17(1):5520, 73 pp. doi:10.2903/j.efsa.2019.5520
- 1109 EFSA (European Food Safety Authority), Arcella D and Gomez Ruiz J, 2018. Technical report on use of
1110 cut-off values on the limits of quantification reported in datasets used to estimate dietary exposure
1111 to chemical contaminants. EFSA supporting publication 2018;EN-1452. 11 pp.
1112 doi:10.2903/sp.efsa.2018.en-1452
- 1113 EFSA (European Food Safety Authority), Martino L, Aiassa E, Halldórsson TI, Koutsoumanis PK,
1114 Naegeli H, Baert K, Baldinelli F, Devos Y, Lodi F, Lostia A, Manini P, Merten C, Messens W, Rizzi V,
1115 Tarazona J, Titz A, Vos S, 2020. Draft framework for protocol development for EFSA's scientific
1116 assessments. EFSA supporting publication 2020:EN-1843. 46 pp. doi:10.2903/sp.efsa.2020.EN-
1117 1843
- 1118 EFSA CEP Panel (EFSA Panel on Food Contact Materials, Enzymes and Processing Aids), Barat Baviera
1119 JM, Bolognesi C, Chesson A, Cocconcelli PS, Crebelli R, Gott DM, Grob K, Lampi E, Mortensen A,
1120 Rivière G, Silano V, Steffensen I-L, Tlustos C, Van Loveren H, Vernis L and Zorn H, 2019. Update of
1121 the risk assessment of di-butylphthalate (DBP), butyl-benzyl-phthalate (BBP), bis(2-
1122 ethylhexyl)phthalate (DEHP), di-isononylphthalate (DINP) and di-isodecylphthalate (DIDP) for use
1123 in food contact materials. EFSA Journal 2019;17(12):5838, 85 pp. doi:10.2903/j.efsa.2019.5838
- 1124 EFSA CEP Panel (EFSA Panel on Food Contact Materials, Enzymes and Processing Aids), Lambré C
1125 Barat Baviera JM, Bolognesi C, Chesson A, Cocconcelli PS, Crebelli R, Gott DM, Grob K, , Lampi E,
1126 Mengelers M, Mortensen A, Rivière G, Steffensen I-L, Tlustos C, Van Loveren H, Vernis L, Zorn H,
1127 Ahrens B, Fabjan E, Nicolas R, Polci L, Baert K, Volk K and Castle L, 2021. Identification and
1128 prioritisation for risk assessment of phthalates, structurally similar substances and replacement

- 1129 substances potentially used as plasticisers in materials and articles intended to come into contact
1130 with food. *Under public consultation*
- 1131 EFSA Scientific Committee, 2018. Guidance on Uncertainty Analysis in Scientific Assessments. EFSA
1132 Journal 2018;16(1):5123, 39 pp. doi:10.2903/j.efsa.2018.5123
- 1133 EFSA Scientific Committee, More SJ, Bampidis V, Benford D, Bennekou SH, Bragard C, Halldorsson TI,
1134 Hernandez-Jerez AF, Koutsoumanis K, Naegeli H, Schlatter JR, Silano V, Nielsen SS, Schrenk D,
1135 Turck D, Younes M, Benfenati E, Castle L, Cedergreen N, Hardy A, Laskowski R, Leblanc JC,
1136 Kortenkamp A, Ragas A, Posthuma L, Svendsen C, Solecki R, Testai E, Dujardin B, Kass GEN,
1137 Manini P, Jeddi MZ, Dorne J-LCM and Hogstrand C, 2019. Guidance on harmonised methodologies
1138 for human health, animal health and ecological risk assessment of combined exposure to multiple
1139 chemicals. EFSA Journal 2019;17(3):5634, 77 pp. <https://doi.org/10.2903/j.efsa.2019.5634>
- 1140 European Commission, 2020. Chemical Strategy for Sustainability Towards a Toxic-Free Environment.
1141 Available online: <https://ec.europa.eu/environment/pdf/chemicals/2020/10/Strategy.pdf>
- 1142 Huybrechts I, Sioen I, Boon PE, Ruprich J, Lafay L, Turrini A, Amiano P, Hirvonen T, De Neve M,
1143 Arcella D, Moschandreas J, Westerlund A, Ribas-Barba L, Hilbig A, Papoutsou S, Christensen T,
1144 Oltarzewski M, Virtanen S, Rehurkova I, Azpiri M, Sette S, Kersting M, Walkiewicz A, Serra-Majem
1145 L, Volatier J-L, Trolle E, Tornaritis M, Busk L, Kafatos A, Fabiansson S, De Henauw S and Van
1146 Klaveren JD, 2011. Dietary exposure assessments for children in Europe (the EXPOCHI project):
1147 rationale, methods and design. Archives of Public Health, 69, 4. doi:10.1186/0778-7367-1169-1184
- 1148 Merten C, Ferrari P, Bakker M, Boss A, Hearty A, Lederer C, Lindtner O, Tlustos C, Verger P, Volatier
1149 JL and Arcella D, 2011. Methodological characteristics of the national dietary surveys carried out in
1150 the European Union as included in the European Food Safety Authority (EFSA) Comprehensive
1151 European Food Consumption Database. Food additives & contaminants Part A, Chemistry, Analysis,
1152 Control, Exposure & Risk Assessment, 28, 975–995. doi:10.1080/19440049.2011.576440
- 1153 Page MJ, McKenzie JE, Bossuyt PM, Boutron I, Hoffmann TC, Mulrow CD, et al. The PRISMA 2020
1154 statement: an updated guideline for reporting systematic reviews. BMJ 2021;372:n71. doi:
1155 10.1136/bmj.n71
- 1156 WHO/IPCS (World Health Organization/International Programme on Chemical Safety), 2009. Principles
1157 and Methods for the Risk Assessment of Chemicals in Food, International Programme on Chemical
1158 Safety, Environmental Health Criteria 240. Chapter 6: Dietary Exposure Assessment of Chemicals in
1159 Food. Available online: <http://www.who.int/ipcs/food/principles/en/index1.html>
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1162 **Abbreviations**

BBP	benzyl butyl phthalate
CAS	Chemical Abstracts Service
CAT	critical appraisal tool
CEP	Food Contact Materials, Enzymes and Processing Aids [EFSA Panel]
CMR	carcinogenic, mutagenic, or toxic for reproduction
DBP	dibutyl phthalate
DEHP	di-(2-ethylhexyl) phthalate
DIDP	diisodecyl-phthalate
DINP	diisononyl-phthalate
EC	European Commission
ECETOC	European Centre for Ecotoxicology and Toxicology of Chemicals
ECHA	European Chemicals Agency
FCM	food contact material
GNPD	Mintel Global New Products Database
HBM	human biomonitoring
JRC	Joint Research Centre
LB	lower bound
LOD	limit of detection
LOQ	limit of quantitation
OECD	Organisation for Economic Co-operation and Development
TK	toxicokinetic
PRISMA	Preferred Reporting Items for Systematic Reviews and Meta-Analyses
PVC	polyvinyl chloride
Q	question
REACH	Registration, Evaluation, Authorisation and Restriction of Chemicals
RIVM	Dutch National Institute for Public Health and the Environment
RoB	risk of internal and external bias
UB	upper bound

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