

Defra: Sympathy But No Evidence...

» **SEVERAL MPS HAVE BEEN** sympathetic and supportive to the farmers in their constituencies who are affected, but the government's stance remains the same. Asked about the possibility of a public inquiry on the issue, a Defra spokesperson commented:

"We are sympathetic to farmers suffering from ill health. In the interests of being open and transparent, we are making available all relevant documents that will help answer the group's questions around the previous policy on OPs.

"After looking through hundreds of records stretching

back to the 1980s, we have found documented evidence that compulsory dipping was ended because eradication of the disease had become unrealistic and individual outbreaks could be dealt with on a case-by-case basis.

"No evidence has been found that fears over human health played any part on the decision to end compulsory dipping.

"Furthermore, the independent Committee on Toxicity researched organophosphates extensively and found no evidence that low-level exposure causes long-term health effects."



Back row left to right: Gary Coomber, Margaret and John Percival, Paul Wright, Tom Rigby, Richard Seymour, Dr Sarah Mackenzie Ross. Front row: Stephen Forward. The group was later joined by Jo Lunt, Robin Casson, Robert Davison and MPs Jessica Morden and Andy Burnham.

Lawyers repeat call for a public inquiry

» **GENE MATTHEWS IS A**

Partner with the product liability team at leading, specialist law firm, Leigh Day, which acts exclusively for claimants who have been injured or treated unlawfully by others. Gene has acted for a number of clients affected by dangerous chemicals.

In April 2015, Gene called for an inquiry into the compulsory use of farm-based organophosphates after a report in The Guardian claimed that government officials knew of the dangers to farmers of using organophosphate-based (OP) chemicals but refused to end their use throughout the 1980s and 1990s.

At that time, he said: "The fact that the Health and Safety Executive was aware as far back as 1991 of the health risks associated with organophosphate use is shocking, particularly given that such knowledge has been denied for decades."

Today, Gene commented: "This is a complex issue and I still think that we are unlikely to get to the bottom of it without a public inquiry.

"Those farmers allegedly affected by organophosphate ("OP") exposure have been seeking transparency and openness regarding what (and crucially when) the government, and the relevant companies, knew about the



health implications associated with the use of those products.

"Defra holds important evidence regarding the government's decision to end the compulsory use of OP sheep dips. It is plainly unacceptable that those affected individuals should continue to be denied access to that documentation. The ongoing delay in doing so is inexcusable and adds to the opaqueness surrounding this important issue. It is difficult to disagree with the MPs who have previously called for a public inquiry in to this issue".

Leigh Day can be contacted on 020 7650 1236 (London) or 0161 393 3530 (Manchester). www.leighday.co.uk

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Farm minister rejected calls for inquiry

It is more than a year since then Farm minister George Eustice rejected calls for an inquiry into whether farmers were misled over the use of organophosphate-based (OP) chemicals.

» IN APRIL THE GUARDIAN newspaper revealed the then government was privately warning of the dangers of exposure to even low doses of the chemical and criticising the safety measures offered by manufacturers, yet publicly criticising farmers who refused to use the chemical.

Speaking at a debate in parliament, Eustice said he would meet victims but that an inquiry would add nothing to the conclusions of the government's independent advisers, the committee on toxicity (COT) which found no link between low-level exposure and chronic ill health.

Eustice told MPs that officials had 'nothing to hide' and that the documents published by the Health

and Safety Executive (HSE) warning of the dangers of sheep dips were not based on scientific reports, unlike the later conclusions of COT.

'It is time for a full disclosure of all the documents published around this time'

"The COT have looked at this exhaustively, looking at dozens and dozens of documents and could not find any link [to chronic ill health]," he said at the time, admitting that he was sympathetic to those farmers suffering ill health and acknowledged that "some of those farmers do associate their illness with

their use of OP sheep dips".

Despite playing down the risks posed by OPs to farmers, the government did issue guidance leaflets and compel manufacturers of OP chemicals to add hazard warning stickers to containers. Both of these steps were not, however, undertaken until April 1993, almost two years after internal warnings by officials, according to a document released under a freedom of information request.

"It is time for a full disclosure of all the documents published around this time by government and for an inquiry, independent of government departments or COT, to be set up to look into this afresh," said Labour MP Jessica Morden, who organised the parliamentary debate. "We

need to see who in government knew what, when and why they might not have acted upon it."

Her calls were backed by Labour's Andy Burnham, who called the original revelations a "major scandal", as well as MPs from the Conservatives and Democratic Unionist Party.

Conservative MP Neil Parish, who has been unopposed in his nomination as chair of the influential environment, food and rural affairs select committee, told the Guardian that if ministers failed to properly investigate the issue he would during his upcoming term in office.

While welcoming the support of MPs, campaigners have criticised the lack of concern shown by the UK's main farming organisations to sheep dip sufferers.

AN UPHILL STRUGGLE THAT CONTINUES

THE SHEEP DIP SUFFERERS

Support Group was set up at the start of 2015 with three main aims: to help those who are affected to get medical treatment, to make them understand they are not alone, and to get official recognition of the scale of the problem.

Lancashire farmer Tom Rigby is the Support Group co-ordinator and is working with other volunteers to continue the battle on behalf of the many people affected. It has

been an uphill struggle all the way but Tom is hopeful that progress will soon be made after all this time.

"After considerable difficulty, and after Freedom of Information requests, we did manage to secure the release of a number of official documents

from 1992 - published for the first time this year.

"For years MAFF/DEFRA refused to accept anyone was affected; the phrase they used was "the Government takes very seriously the fact that there are sheep farmers who believe their health has been seriously

compromised as a result of dipping sheep" but after we met George Eustice last November he did acknowledge that some farmers had been affected.

"We are hopeful that a public inquiry will take place next year."

Readers can contact Tom by email: tomrigby2@btopenworld.com or via the website, where more information is available. www.sheepdipsufferers.uk

'We are hopeful that a public inquiry will take place next year'

Patients should be treated sympathetically...

A report issued in November 1998 by the Royal colleges of physicians and psychiatrists said that OP sheep dip patients are unwell and must be treated sympathetically.

THE REPORT STATED THAT patients suffer genuine and often very severe symptoms associated with exposures to organophosphate (OP) sheep dip,* and they must be taken seriously and treated sympathetically by doctors. The joint report from the Royal Colleges of Physicians and Psychiatrists took evidence from patients and patient groups which showed that they felt strongly that hospitals, doctors and the regulatory authorities had not managed their illnesses appropriately.

The working party, which included representatives from patient groups, collected evidence from patients and doctors in order to be able to advise on the clinical management of patients with symptoms which may be attributable to chronic OP sheep dip exposure.

The working party received evidence from sufferers who described a wide range of symptoms, many of which were severe; for example, headaches, limb pains, excessive tiredness, sleep disturbances, poor concentration, mood changes and suicidal thoughts. The symptoms were often so distressful that sufferers were forced to stop working with serious consequences for them and their families.

An analysis of clinical symptoms concluded that the symptoms and the distress are genuine and can continue



for a long time; of particular concern is that some individuals seriously consider suicide. Other patients experience memory loss and poor concentration. Further studies will be needed to understand the cause of their symptoms, but it is essential now to provide an adequate level of care for sufferers.

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Professor John Newsom-Davis, Chairman of the joint working party said:

"I hope that this report will result in greatly improved medical care for those unfortunate sufferers from OP

sheep dip exposure and that it will prompt further research."

* Acute severe exposure to OPs is known to cause specific neurological syndromes because these compounds interfere with nerve function. Low dose (intermittent or continuous) exposure is associated with a variety of symptoms, but how OPs might cause those effects is presently unknown.

RECOMMENDATIONS

Detailed clinical history and examination are essential; basic laboratory tests are useful. Further investigation should depend on the specialist's assessment of the findings.

Open minded, practical approach to management is recommended. This can follow principles used in a range of other poorly understood medical disorders. Management must begin by establishing

a therapeutic alliance with the patient and agreeing goals. Specific symptoms, such as depression, fatigue, sleep disorder and suicidal thoughts should be managed with, where appropriate, anti-depressants as well as cognitive behavioural techniques. This is to counteract beliefs and subsequent behaviour which may develop in the aftermath of an acute illness and serve to perpetuate it. Preventing a recurrence of symptoms which might result from re-exposure to OP chemicals is an area which requires careful handling and would particularly benefit from well designed studies.

Existing clinical services for patients with symptoms associated with OP sheep dip exposure are unsatisfactory. The patient's GP should in most cases be responsible for diagnosis and management, but specialist referral may be needed in some cases. Consideration should be given to setting up groups of specialists (forming a "virtual" centre) to complement existing National Poisons Information Services treatment centres.

The working party recommended epidemiological studies aimed at developing means of quantifying OP sheep dip exposure and relating this to clinical symptoms, and prospective trials to assess the effectiveness of possible treatments.