

**Question for written answer E-001864/2014
to the Commission**

Rule 117

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Subject: Oestrogens and oncological diagnostics

In the 1980s, cosmetics containing oestrogens started to become very popular. However, studies show that the use of substances (medicines or cosmetics) containing high levels of animal or synthetic hormones or of other biologically active compounds (e.g. oestrogens, glycocorticosteroids or retinoids) is associated with adverse effects that can influence the development of cancers, such as hormone-dependent cancers.

Widespread exposure to compounds with oestrogenic or antiandrogenic effects in food, cosmetics and water can potentially give rise to the unconscious use of such substances, which – as the latest studies show – can accelerate the generation of cancerous cells in primary tumours and metastatic foci.

It is known that early prophylaxis makes it possible to prevent the disease or to uncover it at an earlier stage. In the overwhelming majority of cancer sufferers, tumours arise through the sporadic mutation of somatic cells, and the risk of illness depends on the type of mutated gene, the kind of mutation, modifying genes and other environmental factors. A test exists that can uncover mutations in the genes that encode for the repair proteins (BRCA1 and CHEK2) which are responsible for oversensitivity to oestrogens. This also makes it possible to define the risk of developing tumours as the result of the effects of sex hormones. As a preventive measure and as a form of treatment, cancer patients are subjected to anti-oestrogen therapy.

In this connection:

How is the Commission monitoring consumer goods and cosmetics that contain oestrogens or substances that stimulate oestrogen receptors?

Are companies that produce cosmetics and articles containing oestrogens or substances that stimulate oestrogen receptors obliged to include that information on their labels? How is this issue dealt with in the Member States and in the rest of the world?

Is the Commission monitoring studies that would be able to confirm the adverse effects of exogenous oestrogens in oncological diagnoses, with particular reference to the group of hormone-dependent cancers?

How is the Commission monitoring studies that use anti-oestrogen medicines to treat cancer patients?