



## Concerned Health Professionals of the United Kingdom

Dear Prime Minister,

8<sup>th</sup> July 2019

We, the undersigned physicians, nurses, researchers and health professionals, write to you due to our growing concerns about the public health risks and harm that Unconventional Gas Extraction (UGE) and the exploration and extraction of Oil & Gas from shale and other rock, pose to the people of the United Kingdom. We have been reviewing the concerning trends in the scientific peer-reviewed studies regarding the health, environmental and community impacts of exploring, drilling and fracking (hydraulic fracturing) for natural gas and its production, from the United States and internationally.

The scientific evidence overwhelmingly shows that permitting fracking in England would pose significant threats to the air, water and the health and safety of individuals and communities here. At the same time, the evidence also shows that fundamental data gaps remain and that the best imaginable regulatory frameworks fall far short of protecting our health and our environment.

The science, which now encompasses more than 550 peer-reviewed studies, has been compiled by the Nobel prize-winning health organization, Physicians for Social Responsibility and the group, Concerned Health Professionals of New York (CHPNY) in a document called The Compendium of Scientific, Medical and Media Findings Demonstrating Risks and Harms of Fracking (Unconventional Gas and Oil Extraction. V5. 2018) <http://www.psr.org/assets/pdfs/fracking-compendium.pdf> . We also refer you to the work produced by Medact in the UK, *Shale Gas Production in England An Updated Health Assessment 2016* <https://www.medact.org/2016/resources/reports/shale-gas-production-in-england/> and the evidence base for its conclusions <https://www.medact.org/2016/resources/reports/dash-gas-updated-notes-public-health-impacts-shale-gas/>

Note that this technology, involving the extraction of oil and gas from shale rock, goes by many names: fracking, HVHF, and unconventional gas exploration and extraction (UGEE). Modern fracking is different and much more extreme than low-volume and has been used only since around 2004/5 at any scale. More traditional forms of fracking that have been used in some cases since the 1950s.

Concerned both by the rapidly expanding evidence of harm and by the uncertainties that remain, we urge you to conclude that nothing short of a complete ban on UGE and the exploration & extraction of Oil & Gas from shale and other rock in England is the appropriate course of action.

The pace at which studies on the adverse impacts on health of fracking are emerging has increased substantially in the last four years. The October 2015 issue of the Physicians for Social Responsibility science Compendium tells us that “The study citation database maintained by PSE Healthy Energy shows that over half of the available studies on the adverse impacts of shale and tight gas development have been published since January 2014. In 2014, 192 peer-reviewed studies on these impacts were published. In the first six months of 2015, 103 studies appeared. The vast majority of these studies reveal problems.” PSE Healthy Energy. <http://www.psehealthyenergy.org/site/view/1180>

Altogether, the data reveal many serious health risks associated with drilling and fracking operations, and expose intractable, irreversible problems. They also make clear that the relevant risks for harm have neither been fully identified nor adequately assessed. While the scope of concerns and new information is far greater than this letter can accommodate, trends emerging in the five editions of the CHPNY Compendia (July 2014, December 2014 & October 2015-2018) confirm that “the public health risks from unconventional gas and oil extraction are real, the range of adverse impacts significant, and the negative economic consequences considerable.”

After two years conducting the first public health review that has been undertaken on the impacts of UGE, the New York State Department of Health, in collaboration with the New York State Department of Environmental Conservation, similarly concluded that UGE poses significant public health risks. The substantial report pointed to many peer-reviewed studies, data from parts of the United States where UGE is taking place, and a range of serious risks to people’s health and the environment. In December, 2014, New York State announced a ban on HVHF given the risks.

Medical professionals are duty bound to ‘first do no harm.’ This standard of duty should also be the proper course of action for policy makers in England. Amidst all the uncertainty, this much is very clear: based on the knowledge available to us now with regard to UGE, the Department of Health & Social Care, the Department of BEIS, the Department of Housing Communities & Local Government, Department of the Environment Food & Rural Affairs can come to no other determination, except to say that this admirable and appropriate standard cannot be met. Full and meaningful Public Health involvement from the Department of Health is required to ensure we get comprehensive and rigorous assessment of any issues and research that could impact our patients’ current and future state of health.

We would like to refer the Prime Minister to work, that we CHPUK support, produced by Medact in which they conclude “Presently in the absence of an independent, social, health & economic impact assessment of UGE at scale is a glaring omission. Given the availability of alternative sources of energy, these are grounds for placing an indefinite moratorium on UGE’s, until such times that there is greater clarity and certainty about the relative harms and benefits of shale gas.”

Given the significant evidence of risks and harms to health that UGE poses, we urge that the Government, in collaboration with the Department of Health & Social Care, the Department of Environment Food & Rural Affairs, the Department of Housing Communities & Local Government and the Department of BEIS in particular, introduce a formal ban on UGE in England, that will bring England into line with the rest of the UK and many other countries. Given the lack of any evidence indicating that

fracking can be done safely – and a wealth of evidence to the contrary – we consider a complete and outright ban the only responsible decision.

Thank you.

Yours sincerely,

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Co-Chair Concerned Health Professionals of the UK

Dr Tim Thornton: Retired GP

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