



Gateway number: 07929

To: All NHS England dental contract holders

12th April 2018

Dear Colleague,

For information: Notice on the restrictions of use and disposal of dental amalgam

You may be aware that a new European Union Regulation 2017/852 on mercury) has been published regarding the use and disposal of mercury. Specifically Article 10 of the regulation introduces provisions that will need to be implemented by all dental professionals in the UK:

- **Article 10[1]**- With effect from 01 January 2019, dental amalgam must only be used in pre-dosed encapsulated form.
- **Article 10[2]**- From 1 July 2018, dental amalgam shall not be used for dental treatment of:
 - Pregnant or breastfeeding women
 - Children under 15 years
 - Deciduous teethexcept when deemed strictly necessary by the dental practitioner based on the specific medical needs of the patient.
- **Article 10[4]**- With effect from 01 January 2019 dental facilities must be equipped with an amalgam separator, and by 01 January 2021, all separators must retain at least 95% of amalgam particles. (This latter requirement applies to any new separators installed from January 2018 onwards).
- **Article 10[6]**- With effect from 01 January 2018 - Dental practitioners shall ensure that their amalgam waste, including amalgam residues, particles and fillings, and teeth, or parts thereof, contaminated by dental amalgam, is handled and collected by an authorised waste management establishment or undertaking.

It is recognised that three of the provisions (Article 10 [1], Article 10[4] and Article 10[6]) are already accommodated by the majority of practices in England:

- Amalgam waste should be handled by authorised waste management establishments.
- Similarly, for dental facilities in England, separators capturing 95% of particles are presently a prerequisite.

- Exclusive pre-dosed amalgam is widely available in the UK; usage within dental practice has been ubiquitous for some time.

In relation to Article 10[2] the provision on restricting amalgam in certain patient groups; consultation and careful consideration continues to be given to how implementation may be best supported at practice level. Further guidance is in development with the Chief Dental Officers for Wales Scotland and Northern Ireland and will be published in due course.

Yours sincerely,



Sara J Hurley, Chief Dental Officer England

OCDO
OFFICE OF CHIEF
DENTAL OFFICER
ENGLAND

