

ERS submission to F-gases revision

The European Respiratory Society welcomes and supports the proposed revision of the F-gases regulation by the European Commission. The scale of climate change impact on the planetary and human health, that is now, irreversible necessitates such ambition.

The World Health Organization (WHO) has warned that climate change is the biggest global threat to humanity in the 21st century. By 2050 climate change is expected to cause 250,000 deaths every year due to climate-sensitive diseases. Climate change is not just a threat to future generations, but it is already an unfolding major health crisis. During the last decades, and with accelerating speed in the last few years, humanity has already experienced the catastrophic impacts of global warming. Respiratory patients are one of the groups most affected by this impact. Individuals with already impaired respiratory function (e.g. asthmatic or chronic obstructive pulmonary diseases (COPD) patients) are particularly sensitive to climate changes.

As regards respiratory devices affected by the revision, the UN estimated that HFC emissions from MDIs were about 0.03 per cent of annual global greenhouse gas emissions in 2014.¹ As analysed in the Commission evaluation report, the HFCs amounts for MDI use have grown by about 45 % from 2015 to 2019 and have reached levels of approximately 10 Mt CO₂ eq per year.² In the context of EU emissions (4392 Mt CO₂ eq in 2018) this represents approximately 0.2% of emissions.³

¹ <https://ozone.unep.org/sites/default/files/2019-08/MTOC-Assessment-Report-2014.pdf>

² https://ec.europa.eu/clima/system/files/2022-06/f-gases_external_preparatory_study_en.pdf

³ <https://www.eea.europa.eu/publications/trends-and-drivers-of-eu-ghg>

Patients need to have a diversity of devices and inhalers available to treat their conditions and we trust the revision of the regulation will result in innovation that maintains this whilst at the same time phasing out the emissions of F-gases.

At the global level, we would urge that care is taken to ensure the legislation does not impede access or affordability of respiratory devices to patients in low-and middle-income countries.

All things being equal, we find the proposal strikes the correct balance between the necessary urgent action, and the need to provide sufficient transition time for patients and health care professionals - an important point we raised in our earlier submissions.