

## International Mercury Treaty Enabling Activities Program (IMEAP)

Following the signing of the Minamata Convention on Mercury (the ‘mercury treaty’) in 2013 and the release of the IPEN Minamata Declaration on Toxic Metals, IPEN expanded its Mercury-Free Campaign and developed a broad program of treaty-enabling activities to be implemented in conjunction with IPEN Participating Organizations (POs). The International Mercury Treaty Enabling Activities Program (IMEAP) is geared toward raising awareness about the mercury treaty while generating data on key thematic elements of mercury pollution to help enable countries to implement the Minamata Convention.

IPEN launched IMEAP in early 2014 and continues to mobilise resources for IPEN POs to conduct activities that support implementation of the mercury treaty<sup>1</sup>.

The key objectives of the IPEN IMEAP are:

1. *Preparing for Treaty Ratification & Implementation:* Creating synergies between NGOs in developing countries with ongoing UN agency or government-led mercury activities and NGO priority-setting.
2. *Enabling Activities to Prepare Countries for Treaty Ratification & Implementation:* Support to NGOs to carry out national and thematic mercury treaty activities.
3. *Communication of Issues Related to Mercury and Treaty Ratification & Implementation:* Global dissemination of project results & south-south collaboration.

The following project forms part of the overall IMEAP activities and contributes to the greater global understanding of mercury pollution issues while providing information that may contribute to Minamata Initial Assessments (MIA) and raise public awareness in preparation for early ratification of the Minamata Convention on Mercury.

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## **IPEN Mercury Treaty Enabling project: Nepal**

**NGO:** Center for Public Health and Environmental Development (CEPHED), Nepal

**Country:** Nepal

**Date:** April 10, 2015 (IMEAP: 2014 Phase)

**Title of project:** **Strengthening Mercury Free Health Care Campaign in Nepal through National Level Public Awareness**

### **Summary**

This project investigates the extent of mercury pollution in the health care sector of Nepal including dental institutions and other health care settings and suggests recommendations to transition to a mercury-free healthcare system. In addition the project provides data on the status of mercury pollution in Nepal across a range of sectors including health care products, lighting products and cosmetics. CEPHED also provide research outcomes on mercury pollution from industrial sources as well as the results of biomonitoring for fish and humans (including a subsection on the mercury body burden of health care professionals). The combined outcomes of this research was presented in a series of awareness raising meetings throughout Nepal that resulted in strong engagement with high level policy officials, health care professionals and NGOs. Highlights of the project include significant awareness raising success with policy makers and considerable public interest through broad media coverage. The project also influenced some tertiary institutions to change dental curricula toward mercury free dentistry and government to consider adding dental amalgam to the 2013 ban on mercury based medical equipment (a policy position which CEPHED had campaigned for strongly). This project contributes to the Minamata Convention enabling activities by addressing a range of mercury issues as noted in articles 4, 5,8,9,11,16,18 and 19 of the treaty.

### **Describe which aspects of mercury pollution you have prioritized for awareness raising and why it is required:**

The current awareness raising activities under this project has been focused and prioritized to include but is not limited to:

- General introduction of mercury and its impacts;
- mercury issues in Nepal (e.g. dental amalgam, measuring equipment),
- mercury based products and process (vaccines, mercury containing products and wastes and traditional uses of mercury);
- Mercury poisoning and contamination cases in Nepal as well as international mercury impacts including Minamata disease;

The project also considers import of mercury, mercury based compounds and products in Nepal as including:

- National, regional and district level awareness and capacity building on heavy metals (Hg, Pb, Cd);
- Research on mercury uses and management in Dental Hospitals in Nepal;
- Research on mercury in CFL imported and used in Nepal;
- Research on mercury in cosmetics (skin whitening creams );
- Mercury uses and release from healthcare sectors in Nepal;
- Bio-Monitoring of mercury contamination in Fish and Human Body in Nepal;
- Bio-Monitoring of mercury contamination in Dental Health Care Professionals in Nepal;

- Mercury Free Health Care Facilities model development initiative of CEPHED;
- Mercury Free Dentistry initiatives in Nepal; Government response;
- Promote and uses of mercury free alternatives for mercury free health care services;

In addition this project considers the global movement to address the mercury pollution issue through civil society and the Minamata Convention;

- Regional (South Asia) Movement on Mercury Free Dentistry; provision of Minamata Convention (Annex A, Part I , Part II, Article 4 Para 1: Mercury Added Products and Para 3: Dental Amalgam); non mercury alternatives in Health Care services and dental fillings; phase out plan and policy of mercury, mercury based products and practices; measures that phase down dental amalgam;

Additional mercury sources are also addressed (crematoria, metal plating, coal burning, vaccines, hydropower, mercury waste management) and finally consideration of the way forward for mercury-free dentistry and health care services.

Our awareness program is comprehensive and has especially focused on bio monitoring of mercury, mercury free health care services, mercury free dentistry as well as promotion of alternative and safer mercury free equipment, chemicals, dental curriculum and practices.

**Describe what levels of awareness exist on mercury pollution issues among the public, regulators, media, industry and government.**

As heavy metals including mercury issues has been regularly raised and publicized by the CEPHED for the last 4-5 years, there is some level of public awareness about the mercury issues in Nepal. However, with this specific and more focused awareness campaign under IMEAP /IPEN project, the awareness level among various stakeholders and especially the regulators, media, health professionals (health care and dental doctors) as well as government institutions is now very high. We have been able to convey these specific mercury pollution issues to the broad public and to policy makers.

**Public:** There is still very little level of awareness about the mercury issues among general public because the area we have covered is small in comparison to the total population of the country. However, our mass media outreaches through radio, television and newspaper as well as social media have maximized the outreach.

**Regulators and Government:** There is enough level of awareness about the mercury pollution among the regulators. Based on our continuous research and awareness on these issues and long engagement, we were able to convey the mercury pollution issue among all the regulators and convince them to take action. As a result of that activity the Government of Nepal, Ministry of Health and Population (MOHP) has already banned the Import, Purchase and Uses of all mercury based equipment in Nepal effective from July 16, 2013. Additionally the Government of Nepal has already signed the Minamata Convention on Mercury and is in the process of ratification.

MOHP has also written a letter to the Custom Department to regulate the import of mercury and mercury based products

**Media:** Media houses and individual media personnel were made aware so as to have increased range of media coverage on the issues. So far there are more than 100 media reports on the issues of heavy metals and mercury specifically in different media including electronics (radio, television and social media) and printed newspapers and magazines.

Especially during this IMEAP/IPEN project period and during our program events, about 30 different media news articles from district, regional to national level were published and broadcasted. It has been estimated that over 200,000 people read, watched and listened to media on mercury issues.

**Industry/Importer/Dealers:** Nepal does not have mercury mining industries. However, mercury, mercury based products and chemicals has been found to be imported, sold, distributed and used massively in many different sectors by different dealers and retailers. So we have also made them aware about the mercury and its impacts.

As response to the information about the mercury related issues provided by CEPHED, the majority of the dealers and surgical suppliers has shifted towards the import of mercury free alternatives and have substantially reduced the import of mercury based products and chemicals.

#### **Health care professionals and Health Care Service Centers:**

The major sector under this IMEAP/ IPEN project we have prioritized is the health care service provider centers and health care professionals especially the dental health care professionals and regulators from environment and health sectors. Since our previous studies shows that the health sectors of Nepal are the major consumers of the mercury and mercury based products and chemicals.

Moreover, our study of Bio-monitoring of mercury clearly shows the health care professionals and people with dental filling have shown higher level of mercury contamination. Similar levels of contamination were found with the fish and fish dependent communities and fisher folk where 53% of those studied reported more than the prescribed doses of 1ppm.

## Bio-Monitoring of Mercury: 100% Positive Result in Human body, Fisher folk and Dental Health Care Professionals-DHP)

Bio Monitoring Studies in Nepal	Sample Size	Hg Mean (ppm)	Min Hg (ppm)	Max Hg (ppm)	Reference dose (ppm)	Fraction of samples over Ref. Dose
Fisher folk	15	1.057	0.345	1.719	1.00	53%
D H P	5	0.294	0.205	0.447	1.00	0%
All hair samples (CEPHED 2012)	20	0.866	0.205	1.719	1.00	40%
CEPHED & NDA, 2013	50+4	0.196	0.097	0.547	1.00	0%

Source: CEPHED 2012, CEPHED & NDA 2013 laboratory results.

## Summary of Hair Mercury Concentration and fish intake by country for 220 Women of Child Bearing Age

Countries	Samples No.	Min ( $\mu\text{g/g}$ )	Max ( $\mu\text{g/g}$ )	% results $\geq 1 \mu\text{g/g}$	Mean Age (yr)	Mean No. fish meals per week
Armenia	25	0.01	0.37	0	33.9	1.4
Bangladesh	40	0.16	2.12	5	27.2	2.9
India	23	0.03	0.97	0	30.9	3.2
Cote D Ivoire	26	0.22	3.20	23	28.4	NA
Japan	24	0.60	4.11	71	33.1	2.7
Mauritius	25	0.19	8.05	36	34.2	1.6
Nepal	20	0.11	1.00	0	28.9	0.4
South Africa	9	0.11	0.98	0	28.7	1.3
Spain	28	0.31	6.38	64	37.4	6.7
<b>Total</b>	<b>220</b>	<b>0.01</b>	<b>8.05</b>	<b>24</b>	<b>31.4</b>	<b>2.8</b>

Source: ZMWG/EEB 2013, p 13

Thus the major focus of this awareness program was health care professionals especially dental doctors, health care facilities and regulators from health and environment sectors along with the local government from metropolitan cities and media.

**Indicate why you have prioritized a particular group or groups in your community with which to raise awareness of mercury pollution.**

The health care professionals and health care facilities are found to be highly vulnerable populations with respect to the mercury pollution in Nepal and hence we prioritized them to be aware so as to prevent them from being subject to additional exposure.

The regulators from the health and environment sectors were other prioritized groups of people included under this program so as to inform them about the status of mercury pollution and remind them about the national, regional and international movements about the mercury, mercury pollution and abatements initiatives. The program prioritized the regulators and media so as to persuade them to respond with appropriate legislative and institutional measures to address the mercury pollution issues. At the same time the direct engagement of the media were achieved so as to have the increased media coverage to the general public and all other sectors.

**Detail the methods that you have chosen to raise awareness among the population on mercury issues and why they are of strategic significance.**

The methods we have chosen are as follows:

1. Preparation, Production and Dissemination of briefing papers on Mercury status in Nepal (Article 17 and 18)
2. Awareness Raising and Capacity building of the concerned stakeholder (Article 16)
3. One to one meeting with the individual and professional association
4. Participate in the World Oral Health Day Rally for the promotion of mercury free dentistry
5. Press Releases and media out reaches
6. Advocacy campaign and follow up.

**Assess the level of awareness of the Minamata Convention and the need for early ratification among the public, regulators, media, industry and government.**

As government of Nepal has already signed the Minamata Convention on Mercury and is preparing for the ratification, we contacted the government agencies concerned with ratification through one to one meeting with Secretary, Joint Secretary of Focal Ministry of the Convention as well as written several formal advocacy letters to all concerned ministries.

There has been a number of media articles stressing the need for early ratification of the Minamata Conventions as well as highlighting the need to address the mercury pollution problems.

**Project Outcome:**

**Describe the activity conducted:**

**During the program implementation period, following activities were conducted.**

1. **Preparation and Production of Briefing Paper on Mercury:** A briefing paper on Mercury, An initiative of Mercury Free Dentistry and Health Care Services in Nepal prepared and published 1000 copies under IPEN/IMEAP project in association with WAMFD, UNDP GEF SGP and Nepal Dental Association contains the wide range of information on Mercury and associated issues of global, regional and national level studies and initiatives.



Mercury is a notorious heavy metals of global concern and known to be a potent poison of the human nervous system [1]. Mercury is a chemical element with symbol Hg and atomic number 80 and atomic mass 200.592 g.mol<sup>-1</sup> [2], in its pure form; mercury is a shiny silver white metal that is liquid at room temperature. It is naturally occurring heavy, odorless, lustrous liquid metal found mainly in four forms: metallic (liquid), inorganic, organic and gaseous. Organic form of mercury is highly toxic forms in comparison to other inorganic and elemental forms.



Mercury issues in Nepal

Mercury has been used in various products and processes. Mercury and mercury containing compounds are highly toxic and have a variety of significant adverse effects on human health, wildlife, aquatic animals and the environment. While consumption of mercury in many developed countries

#### Mercury Poisoning and Contamination Cases in Nepal

- National Poisoning Information Centre (NPIC) recorded 185 mercury poisoning cases in last 10 years [10].
  - A Bio Monitoring of Mercury in 19 Fish sample shows contamination ranges from 0.003 to 0.242 ppm (CEPHED/ IPEN/DR/2012) [11]
  - A Bio Monitoring of Mercury in Fisher Folks found ranges from 345 to 1715 µg/kg with 58% (8 of 15) higher than reference doses of 1000 µg/kg (CEPHED/ IPEN/DR/2013) [12].
  - A bio monitoring of Mercury among 50+ Dental Doctor & Nurses found ranges from 205 to 447 µg/kg (CEPHED/ IPEN/DR/2013) [13]
  - A bio monitoring of Mercury in fish eating 20 female of child bearing age ranges from 0.11 to 1 ppm (CEPHED/DM/NC/2013) [14]
  - A nurse from Patuade died of consuming huge amount of mercury to abort her last unwanted pregnancy.
  - A patient died of severe Mercury Exposure in Biratnagar (Dr. D. N. Thakur, M.S. from Regional Hospital, Biratnagar).
  - Metal plating worker professional from Symbhuresh Stupa was found dead due to excessive mercury toxicity (Dr. Surya Man Shrestha)
  - Metal plating workers have severe dental caries, muscular damage and early death (Mr. Deepak Maharjan, Advisor (CNCI)).
  - Mercury used to abort pregnancy, has been widely practiced in hilly as well as border Terai areas.
- Note: Some of these cases were not recorded anywhere listed based on personal and professional information.

Cover Page of Briefing Paper on Mercury

The briefing paper contains information in detail about:

- general introduction of mercury and its impacts;
- mercury issues in Nepal (dental amalgam, measuring equipment's, mercury based products and process, vaccines, mercury containing products and wastes and even traditional uses of mercury);
- Mercury poisoning and contamination cases in Nepal;
- International episode of mercury impacts including Minamata disease;
- Import of mercury, mercury based compound and products in Nepal;
- national, regional and district level awareness and capacity building on heavy metals (Hg, Pb, Cd);
- research on mercury uses and management in Dental Hospitals in Nepal;
- research on Mercury in CFL imported and used in Nepal;
- Research on Mercury in Cosmetics (skin whitening creams);
- Mercury uses and release from healthcare sectors in Nepal;
- bio-monitoring of Mercury contamination in Fish and Human Body in Nepal;
- Bio monitoring of Mercury contamination in Dental Health Care Professional in Nepal;
- Mercury Free Health Care Facilities model development initiative of CEPHED;
- Mercury Free Dentistry initiatives in Nepal;
- Government response to promotion and uses of mercury free alternatives for mercury free health care services;

- Global movement to address mercury issue such as the Minamata Convention (Annex A, Part I, Part II, Article 4 Para 1: Mercury Added Products and Para 3: Dental Amalgam), the Regional (South Asia) Movement on Mercury Free Dentistry;
- non mercury alternatives in health care services and dental fillings;
- phase out plan and policy on mercury, mercury based products and practices and measures that phase down dental amalgam;
- additional issues (crematoria, metal plating, coal burning, vaccines, hydropower, mercury containing toxic waste management) and finally the way forward for mercury free dentistry and health care services. The complete briefing paper can be found in **Annex (1)**.

## 2. **Conducting an Awareness Raising and Capacity Building Training Workshop on Mercury Free Dentistry and Health Care Services in Nepal.**

The initial target awareness raising program was 3 and target beneficiaries were 150. However with the additional support from World Alliance for Mercury Free Dentistry (WAMFD), we were able to organize four awareness and capacity building training workshops (**33 % more than target**) directly benefiting over **250 (67% more than target)** people from different sectors especially the dental doctors, hospital administration, academicians, NGOs, local bodies, government officials, media personnel and mercury base products and chemicals suppliers.

**2.1 Biratnagar, Nepal, 28<sup>th</sup> February 2015:** The Program was organized by Center for Public Health and Environmental Development (CEPHED), Nepal in association with a professional association called Nepal Dental Association (NDA) branch office Biratnagar, local government agencies called District Public Health Office, Morang and the Government of Nepal. In total, 59 participants and high officials from all concerned stakeholders including Government officials, professional associations, universities and institutions providing dental education, dental doctors, media personnel, non-governmental organizations, municipality, District Development Committee etc were participants. The Program concluded with the following outputs:



**Participants of program posing for the group photograph after inaugural session, Photo Credit: Manish Thapa**

- Localization of mercury free dentistry and health care service issues at ground level with possible options for alternative curriculum and cavity filling materials.
- Awareness raised about the time bound provisions set by Minamata Convention which is the real starting point of change in behaviors of the stakeholders to consider making the shift from mercury based to non-mercury alternatives.
- Sectorial roles and responsibilities for the achievement of mercury free dentistry goal as set by Minamata Convention.



- Strategic approach towards curriculum changes from the respective dental colleges of the Nepal.
  - Overall awareness raised for individuals as well as institutions which were capacitated about the mercury free dentistry and health care services.
- **Chitwan, Nepal 4<sup>th</sup> March 2015:** Conducted a day long Awareness Raising and Capacity Building Training Workshop on Mercury Free Dentistry and Health Care Services in Nepal in medical city of Chitwan of Nepal with large number of hospitals. The Program was organized by Center for



Participants posing during program, Source: Manish Thapa



Guests during inaugural session, Source: Manish Thapa

Public Health and Environmental Development (CEPHED) Nepal, in association with Nepal Dental Association (NDA) branch Public Health Office, Chitwan, Government of Nepal and Private Hospital Coordination Committee, Chitwan. In total, 89 participants and high officials from all concerned stakeholders including the Government officials, professional associations, universities and institutions providing dental education, dental doctors, NGOs, hospitals, dental suppliers and media personnel were the participants of program. The program succeeded in achieving its original planned objectives of awareness raising and capacity building for the health care professionals and dentistry and other stakeholders. The stakeholders were informed of the necessity to include mercury free alternatives in the dental curriculum (theory and practical) courses in Nepal.

**2.3 Pokhara, Nepal 18<sup>th</sup> March, 2015:** CEPHED conducted of a day long Awareness Raising and Capacity Building Training Workshop on Mercury Free Dentistry and Health Care Services in Nepal. The program was organized by Center for Public Health and Environmental Development (CEPHED) Nepal in association with Nepal Dental Association (NDA), Kaski Chapter, local government agencies the District Public Health Office, Kaski, and Government of Nepal.

The program was also joined by Dr. Shahriar Hossain, the WAMFD Vice President, Asia who shed light on the need and ways of moving mercury free dentistry in Nepal.

In total, 54 participants and high level officials from all concerned stakeholders including Government



Participants of program posing for the group photograph after inaugural session. Source: Manish Thana

officials, representative from municipalities, professional associations, universities and institutions providing dental education, dental doctors, hospital representative, dental suppliers and media personnel participated in program.

The program was carried out with technical presentation from CEPHED, WAMFD and Oral Health Project ongoing in Kaski. The program also included the group activity to discuss several aspects of mercury free health care services and mercury free dentistry. The views of participants from the exclusive working group are summarized as follows:

- **Need for Enacting Act and Regulations:**
  - Advocate for policy making
  - Increase the awareness of public and their demands for mercury free dentistry
  - Elements of public health course for dental health to be implemented and monitored regularly.
  - Control the import and purchase of hazardous chemicals
  - Punish the offenders by strict laws and regulations
  - Orientation to law maker
- **Need of Alternative Medical Curriculum (Dental/Medical) :**
  - Interaction with concerned authorities regarding the curriculum revision particularly with curriculum makers i.e. Ministry of Health, Education, Medical Associations.
  - Use of mercury free health services in dental settings
  - Inclusion of dental care in nursing and paramedics focusing on mercury hazard prevention.
- **Research and Awareness for Mercury Free Dentistry and Health Care Services :**
  - Awareness and interaction campaigns at community level
  - Budget provision from the Government of Nepal
  - Effective implementation from Monitoring Units.
  - Increased evidence base practice i.e. mercury free
  - Research on use of heavy metals in ayurvedic medicine.
  - More research about hazards of mercury

The program also provided the suggestions for the respective government bodies and concerned stakeholders from different group level towards addressing the issues of Mercury in Health Care Services and Dentistry Sector.

#### 2.4 High Level Policy



Participants forming two group and discussing for the time bond phase down of mercury and revision of curriculum for mercury free dentistry. Source: Manish Thapa

**Meeting on Mercury Free Dentistry and Health Care Services in Nepal, 22 March 2015, Kathmandu,** Amalgam Phasedown, National Regulation and Alternative Curriculum. A High Level Policy Meeting was conducted with the active participation of Minamata Convention on Mercury Focal Ministry and designated Government Officials such as Honorable Secretary, Ministry of Science, Technology and Environment (MOSTE); Chief, Curative Division, Ministry of Health and Population (MOHP); Director General, Department of Drug Administration (DDA/MOHP); Director, Department of Commerce and Supply; Director, Department of Custom; President, Nepal Dental Association; Vice President, WAMFD, Asia and designated personnel such as Dean and HOD of the Medical Sciences and Dental colleges under Kathmandu University and Tribhuvan University of the country.

The program included the technical presentation on several issues of dentistry as a curriculum and perception on issues from Government as well as Dental Colleges. Program provided the following outputs as recommendations or suggestions:

- Probable activities from Dental Care Institutions to reduce the use of mercury from dentistry sector.
- List of activities from Government sector such as limiting the import, sell and distribution of mercury, ban the use of powder, liquid form of amalgam and introduce capsule form of amalgam in all government/private hospitals and introduction of waste disposal system for amalgam.
- Revision of existing curriculum to give equal weight to the other dental restorative material as well.
- Inclusion of other restorative techniques and materials on preclinical and clinical teaching
- Revision in the evaluation criteria by including other restorative materials also along with amalgam.
- Give more emphasis on teaching mercury toxicity, precautions during the manipulation and disposal of dental amalgam.

**Table 1 Classification of participants according to their professional sector of all the awareness raising and high level policy meeting**

<b>Awareness Raising, Capacity Building Training Workshop and High Level Policy Meeting on Mercury Free Dentistry and Health Care Services in Nepal</b>						
<b>Programs</b>	<b>Locations/ Districts</b>	<b>Dental</b>	<b>Dental</b>	<b>Media</b>	<b>Others</b>	<b>Total</b>
Awareness Raising Workshop,	Biratnagar, Morang,	28-02-2015	20	4	35	<b>59</b>
Awareness Raising Workshop,	Bharatpur, Chitwan	04-03-2015	28	16	45	<b>89</b>
Awareness Raising Workshop, ,	Pokhara, Kaski	18-03-2015	13	5	37	<b>55</b>
High Level Policy Meeting,	Kathmandu	22-03-2015	23	9	16	<b>48</b>
<b>Total</b>	4		<b>74</b>	<b>30</b>	<b>133</b>	<b>251</b>
<b>Target</b>	3					<b>150</b>

<b>Achievement over target</b>	<b>33%</b>					<b>67%</b>
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**3 Advocacy and Follow up:** To meet the objectives of the Minamata Convention to phase out/down the use of mercury , mercury based products and practices from health and environment perspectives, health care services and dentistry sector, several advocacy letters was sent and follow up to all the concerned government bodies such as Ministry of Science, Technology and Environment, Ministry of Health and Population, Department of Custom, Department of Drug Administration, Ministry of Trade, Commerce and Supplies, Department of Commerce and Supplies, Universities and colleges etc. The advocacy letter was written to promote a ban on the import, distribution and use of mercury containing instruments, chemicals, as well as changes in the medical/dental curriculum and early ratification of the Minamata Convention on Mercury.

**4 Translation of Minamata Convention text to local language:** A translation of full official text of Minamata Convention to local language (Nepali) is being completed. Now the translation document is in process of editing and publication and then will be submitted to all law makers as they have not yet resumed for the meeting.

**5 Dissemination of Briefing Paper and Poster on Environmental Sound Health Care Waste Management and Mercury Free Health Care Services in Nepal:** The newly produced Mercury briefing paper and posters with the awareness raising information regarding the Mercury in Health Care Services and Dentistry Sector were disseminated to all the participants of the awareness raising and capacity building programs, to the concerned government agencies, academic institutions as well as individuals.



**Dissemination of Resource Materials by Manish Thapa, CEPHEP Photo Source: CEPHEP**

**6 Press Releases in English and National language:** Press Release regarding the workshops and meetings were prepared, release and also provided to all the local media as well as the national media on the date the program was conducted. Responding to these press releases several press and media covered the issue at national and international level carrying our event news in all electronic, print and social media.

**7 Celebration of World Oral Health Day, March 20, 2014.** CEPHEP Participation in the Rally organized on the occasion of celebrating World Oral Health Day 2015 by our strategic partners Nepal Dental Association to show our solidarity as well as raise awareness among the dental doctors, students and general public. CEPHEP took part in rally program conducted by Nepal Dental Association on the occasion of week-long celebration of Oral Health. CEPHEP participated with a banner with information "Mercury Free Dentistry". Nearly 500 professional dentists as well as dental students were the participants of the rally program which rallied for more than 3 km distance. We successfully able to convey the message of mercury free dentistry among all.



CEPHED Team participating in a rally program Photo Source: Dr. Shahriar Hossain



CEPHED Team with Treasurer, NDA during rally program, Photo Source: Dr. Shahriar Hossain

### **Engagement of and impact on Target Groups:**

Provide detail on your NGOs engagement with the target groups and report the result of the activity on the target groups.

Basically the major objective of the programs is to create awareness among government departments, dental professionals and consumers regarding the toxicity of mercury poisoning issues, its sources and the requirement of acts and regulations. Throughout the program, CEPHED had strong communication with following bodies:

Target Group	Reaction from Target Group
<b>Ministry of Science, Technology and Environment (MOSTE)</b>	<ul style="list-style-type: none"> <li>• Briefing about the progress of ministry towards ratification of Minamata Convention.</li> <li>• Working on the ratification process of the Convention</li> <li>• Committed to respond to the high level policy meeting recommendation for the Mercury Free Health Care Services and Mercury free dentistry.</li> </ul>
<b>Ministry of Health and Population (MOHP)</b>	<ul style="list-style-type: none"> <li>• Effective implementation of decision to ban the import, distribution and use of mercury containing instruments.</li> </ul>
<b>Department of Drug Administration (DDA)</b>	<ul style="list-style-type: none"> <li>• Suggestion to increase the number of research activities in products for the determination of contamination level of mercury.</li> </ul>
<b>Department of Commerce and Supply (DoCS)</b>	<ul style="list-style-type: none"> <li>• Informed about the provision of own import/export control regulation from which the control of mercury containing instruments could be gazette if there are strong enough documents to support the claim to control the instruments.</li> </ul>
<b>Department of Custom (DoC)</b>	<ul style="list-style-type: none"> <li>• Informed about the possible action from Department side to control the mercury containing instruments.</li> <li>• Requirement of regulation</li> </ul>
<b>Nepal Dental Association (NDA)</b>	<ul style="list-style-type: none"> <li>• Commitment to support the phase down of mercury amalgam.</li> <li>• Well coordination in organization of awareness raising program on Chitwan, Morang and Kaski.</li> <li>• Also helping to coordinate for the required changes in dental curricula.</li> <li>• Cooperated in the conduction of survey.</li> </ul>
<b>District Public Health</b>	<ul style="list-style-type: none"> <li>• Commitment to raise awareness among public.</li> </ul>

<b>Office, Morang, Chitwan and Kaski</b>	<ul style="list-style-type: none"> <li>• Further activities towards effective implementation of MOHP's decision to ban the import, distribution and use of mercury containing instruments.</li> <li>• Commitment to phase out the use of mercury based equipment in the health sectors as also decided by their mother ministry MOHP.</li> </ul>
<b>Private Hospital Coordination Committee (PHCC), Chitwan</b>	<ul style="list-style-type: none"> <li>• Commitment to prohibit the use of mercury containing instruments from all the private hospitals that falls under the PHCC.</li> </ul>
<b>Institute of Medicine, TU</b>	<ul style="list-style-type: none"> <li>• Commitment to have a meeting for the discussion of curriculum revision with all the medical colleges, IOM board and Nepal Medical Council Board.</li> </ul>
<b>Kathmandu University School of Medical Science</b>	<ul style="list-style-type: none"> <li>• Progress towards the inclusion of alternative of mercury in Dental Curriculum</li> <li>• Committed to further increase the number of alternative courses.</li> </ul>
<b>Nepal Medical Association (NMA)</b>	<ul style="list-style-type: none"> <li>• Commitment to push for the mercury free dentistry from NMA only if the things are set as per requirement.</li> <li>• Positive towards phase down of mercury from dentistry sector.</li> </ul>
<b>Municipality</b>	<ul style="list-style-type: none"> <li>• Commitment to include the awareness raising program on mercury on their upcoming budget plan.</li> <li>• Commitment to prepare the management strategy for the end-of-life management of mercury containing instruments and products.</li> </ul>

**Impact on target policies:** Define the target policies and the result of the NGO activity on the target policies.

In terms of the target policy results, MOHP has already banned import, purchase and use of mercury based medical equipment since July 16, 2013. They have shown increasing interest to initiate the process of inclusion of mercury amalgam as well under this banning decision as well as bring the changes in the medical and/or dental education curriculum. Some universities e.g. Kathmandu University in fact had already started making changes in the curriculum and replacing the mercury based teaching and practices with 'mercury free' in a phase-wise manner.

**Outreach to Stakeholders:** Record the key stakeholders and sectors that were engaged in this activity, and any potential to develop further involvement with these stakeholders:

<b>Stakeholders</b>	<b>Potential to follow-up</b>
Ministry of Science, Technology and Environment	Yes
Ministry of Health and Population	Yes
Department of Drug Administration	Yes
Department of Commerce and Supply	Yes
Department of Custom	Yes

Nepal Dental Association	Yes
District Public Health Office, Morang, Chitwan and Kaski	Yes
Private Hospital Coordination Committee (PHCC), Chitwan	Yes
Institute of Medicine, TU	Yes
Kathmandu University School of Medical Science	Yes
Nepal Medical Association	Yes
Bharatpur Municipality	Yes
Pokhara Sub Metropolitan City	Yes
Patan Hospital	Yes
Kantipur Dental College	Yes
Kist Medical College	Yes
Nobel Medical College	Yes
Nepal Medical College	Yes
Nepal Health Research Council, MOHP	Yes
Nepal Academy of Medical Science, Bir Hospital	Yes
Trade Export Promotion Centre, Government of Nepal	Yes
UNDP GEF SGP	Yes
Oral Health Kaski	Yes
Professional Dentists	Yes
Chitwan Medical College	Yes
District Development Committee, Chitwan	Yes
Consumer Forum	Yes
Western Regional Hospital	Yes
Nepal Nursing Campus	Yes
BPKIHS	Yes
District Development Committee, Morang	Yes
Ayurvedic Hospital and Doctors	Yes
NGOs and Municipalities	Yes
Media Houses and Journalists	Yes

**Deliverables, outputs and/or products:** List the types of outputs from the activity, including report or information materials.

- Briefing Paper on Mercury
- Poster on Mercury Free Health Care Services and Health Care Waste Management.
- Press Release about the programs (In English and Nepali) to the media persons.
- Events Reports
- Press Coverage

**Communication Efforts:** Describe efforts to communicate this activity to the media and/or general public.

For the communication activities, CEPHED has conducted following activities:

- Press Release (English and Nepali): CEPHED prepared a press release of all the programs and sent to all the local as well as national media houses.
- Article: CEPHED prepared an article on several issues such as Mercury Free Health Care Services and Mercury Free Dentistry. CEPHED provided an article to the local as well as national media houses.
- Dissemination of briefing paper: CEPHED prepared a briefing paper on the details about mercury, its sources, its impact on human health and environment, global activities to remove the mercury uses, regional as well as national level activities to control the use of mercury, national level policy to ban the mercury containing instruments and disseminated to the participants of district level programs organized by CEPHED.
- Dissemination of posters: CEPHED prepared a poster on Mercury Free Health Care Services and Health Care Waste Management and disseminated to the participants of district level programs organized by CEPHED.

#### List of Media

S.No.	Date	Title	Name of Media
1.	1 <sup>st</sup> March 2015	Mercury is harmful for human health	Pushpanjali National Weekly
2.	4 <sup>th</sup> March 2015	Health Care Service Provider avoiding MOHP's decision	Ratopati <a href="http://www.ratopati.com/2015/03/04/213865.html">http://www.ratopati.com/2015/03/04/213865.html</a>
3.	4 <sup>th</sup> March 2015	Hospitals don't want to follow Ministerial Decision	Narayani Online <a href="http://narayanionline.com/news/2015-03-03%2014:50:42/171399583454#.VQVjxOEieZQ">http://narayanionline.com/news/2015-03-03%2014:50:42/171399583454#.VQVjxOEieZQ</a>
4.	4 <sup>th</sup> March 2015	Hospitals from Chitwan avoid following MOHP's decision	Khabar Chitwan <a href="http://www.khabarchitwan.com/16834">http://www.khabarchitwan.com/16834</a>
5.	4 <sup>th</sup> March 2015	Awareness and Capacity Building Program on Mercury Free Dentistry and Mercury Free Health Care Services in Nepal under WAMFD	Environmentalhealth.asia



		and IPEN/IMEAP Program	
6.	5 <sup>th</sup> March 2015	Majority of the health care services from Chitwan were found using mercury	DC Nepal
7.	4 <sup>th</sup> March 2015	Use of Mercury in majority of the hospitals in Chitwan	Radio Chitwan <a href="http://www.radiochitwan.com.np/2015/03/blog-post_88.html">http://www.radiochitwan.com.np/2015/03/blog-post_88.html</a>
8.	4 <sup>th</sup> March 2015	Program Coverage in Visual Format	DC Nepal <a href="http://www.dcnepallive.com/video/quick-video.php?nid=32098">http://www.dcnepallive.com/video/quick-video.php?nid=32098</a>
9.	4 <sup>th</sup> March 2015	Program Coverage through Social Media	Ratopati
10.	4 <sup>th</sup> March 2015	Program Coverage through Social Media	Narayani Online
11.	5 <sup>th</sup> March 2015	Hospitals from Chitwan violates Ministerial Decision	Non Stop Khabar <a href="http://nonstopkhabar.com/detail_page.php?id=3961">http://nonstopkhabar.com/detail_page.php?id=3961</a>
12.	5 <sup>th</sup> March 2015	Program Coverage through Social Media	DC Nepal
13.	18 <sup>th</sup> March 2015	Public Awareness Program for Mercury Free Health Care Services	arthikdainik.com.np
14.	19 <sup>th</sup> March 2015	Public Awareness Program for Mercury Free Health Care Services	Arthik Daily
15.	19 <sup>th</sup> March 2015	One Day Workshop for Mercury Free Health Care Services	Don News
16.	21 <sup>st</sup> March 2015	Mercury containing instrument causing health care staff's health in danger	The Asia Week
17.	22 <sup>nd</sup> March 2015	Use of Mercury must be banned	Internet Khabar
18.	23 <sup>rd</sup> March 2015	Use of Mercury in 90 percent of Ayurvedic Medicine	The Asia Week
19.	23 <sup>rd</sup> March 2015	Urge to ban the use of mercury	Gorkhapatra
20.	23 <sup>rd</sup> March 2015	Call to Phase out mercury in health care	The Himalayan Times
21.	23 <sup>rd</sup> March 2015	Call to phase out mercury in health care	Article.wn.com
22.	23 <sup>rd</sup> March 2015	Call to phase out mercury in health care	Thehimalayantimes.com
23.	23 <sup>rd</sup> March 2015	Experts stress on the banning of use of mercury	The Weekly Nepal
24.	23 <sup>rd</sup> March 2015	Government stated to control the use of Mercury	NEWS 24 Video <a href="https://www.youtube.com/watch?v=CNBFjJKhGY">https://www.youtube.com/watch?v=CNBFjJKhGY</a>
25.	23 <sup>rd</sup> March 2015	Government stated to control the use of Mercury	News24 Nepal
26.	23 <sup>rd</sup> March 2015	A High Level Policy Meeting on Mercury Free Dentistry and Health Care Services concluded in Capital city Kathmandu, Nepal organized by CEPHEd on 22 March, 2015	Environmentalhealth.asia
27.	27 <sup>th</sup> March 2015	Phase Down of Mercury Amalgam: Mercury Free Dentistry: National Regulation and Revision of Dental Curriculum Demanded	RevoScience
28.	18 <sup>th</sup> March 2015	Workshop on "Mercury Free Dentistry and Health Care Services in Nepal"	Asian Center for Health Website
29.	Jan-March 2015	Celebrated Oral Health Day	ESDO Newsletter
30.	Jan-March 2015	Initiatives for Mercury Free Dentistry and Health Care Sector in Nepal	ESDO Newsletter



List of Media (In Pictorial Form)



Mercury is harmful for human health, Pushpanjali National Weekly, 1 March, 2015

## स्वास्थ्य मन्त्रालयको निर्देशन मान्दैनन् स्वास्थ्य संस्था

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प्रकाश सिग्देल

चितवन, फागुन २०-

चितवनका अधिकांस स्वास्थ्य संस्थाले स्वास्थ्य उपचारमा अझै पनि पारो अर्थात मर्करी र मर्करीजन्य रसायन को प्रयोग गर्ने गरेका छन् ।नेपाल सरकार स्वास्थ्य मन्त्रालयले २०७० चैत्र १७ गते सबै स्वास्थ्य संस्थामा परिपत्र जारी गरी ७ दिन भित्रमा मर्करी मुक्त स्वास्थ्य सेवा प्रदान गर्न निर्देशन दिएको थियो । करिब एक बर्ष विद्य लाग्दा पनि अस्पतालहरूले मन्त्रालयको निर्देशन कार्यान्वयन नगरेको निजी अस्पताल समन्वय समितिका सह सचिव शेष सापकोटाले बताए ।

सापकोटाका अनुसार जिल्लाको सरकारी अस्पताल, मौलाकाली अस्पताल, भरतपुर सामुदायीक अस्पताल, चितवन अस्पताल लगायत अन्य केहि

भरतपुर सामुदायीक अस्पताल, चितवन अस्पताल लगायत अन्य केहि अस्पतालले मर्करी मुक्त स्वास्थ्य सेवा प्रदान गरेको भएपनि अधिकांसले मन्त्रालयको निर्देशन कार्यान्वयन गरेका छैनन् ।जिल्लाका ठूला मेडिकल कलेजहरूमा यो समस्या अझै बढि रहेको पाइएको छ । ठूला मेडिकल कलेजहरूले सञ्चालन गरेको दन्त उपचारमा सबै भन्दा बढि मर्करीजन्य रसायन अर्थात पारोको प्रयोग हुने गरेको पाइएको छ ।डेन्टल अस्पतालले चाँदीले दाँत भर्ने बेला अमलगमको रूपमा मर्करी प्रयोग गर्ने गरेको जनस्वास्थ्य तथा वातावरण प्रबर्द्धन केन्द्रका इन्जिनियर मनिष थापाले बताए ।

थापाका अनुसार अस्पतालहरूले रक्तचाप नाप्ने यन्त्र र थर्मामिटर पनि पारो युक्त प्रयोग गर्दै आएका छन् ।त्यस्तै ल्यावमा पनि परिक्षणका क्रममा मर्करीजन्य रसायनको प्रयोग हुँदै आएको छ ।मर्करीको प्रयोगले क्यान्सर हुने हुनाले अस्पतालहरूले डिजिटल प्रविधि अपनाएर मर्करी अर्थात पारोको प्रयोग बन्द गर्नु पर्ने उहाको तर्क छ ।

दन्त चिकित्साको पाठ्य क्रममा मर्करीमा आधारित उपचार प्रणाली समावेश गरिएकाले पाठ्यक्रम नै सुधार नगर्दासम्म दन्त चिकित्सामा मर्करीको प्रयोग कर्मी गर्न नसकिने दन्त चिकित्सक डा।आसुतोससिंहले बताए ।पाठ्यक्रम सुधारका लागि मन्त्रालयसम्म पहल हुनु आवश्यक रहेको उनको भनाई छ ।जिल्लाका अस्पतालहरूलाई कडाईको साथ मन्त्रालयको चैत्र १७ को परिपत्र कार्यान्वयन गर्न आफुले निर्देशन दिएको र अनुगमन कार्य पनि अगाडि बढाएको जनस्वास्थ्य प्रशासक मधुसुदन कोईरालाले बताए । त्यस्तै अस्पतालहरूले बतीको लागि पनि मर्करीकै प्रयोग गरेका छन् ।

यसैबीच जिल्ला जनस्वास्थ्य कार्यालय चितवन, निजी अस्पताल समन्वय समिति, नेपाल डेन्टल यशोसियसन र जनस्वास्थ्य तथा वातावरण प्रबर्द्धन केन्द्रको आयोजनामा आज मर्करी मुक्त स्वास्थ्य सेवा प्रदान बिषयक छलफल भएको छ ।कार्यक्रममा स्वास्थ्य संस्थसंग आबद्ध व्यक्तिहरूको सहभागीता रहेको छ ।

कार्यक्रममा जनस्वास्थ्य तथा वातावरण प्रबर्द्धन केन्द्रका कार्यकारी निर्देशक रामचरित्र शाहले मर्करीमुक्त दन्त चिकित्सा सेवाको थालनी गरी प्रभावकारी र भरपर्दो उपचार सेवा प्रदान गर्न सबैसंग आग्रह दिए ।आवश्यक ऐन र कानुनको तर्जुमाको लागि सुझाव दिने, लिने तथा तन्त चिकित्साको पाठ्यक्रममा समेत मर्करी अमलगमको सट्टा बैकल्पिक सुरक्षित फिलिड र उपकरण सम्बन्धि अभ्यासका लागि कार्यक्रम उपयोगी हुने उनको भनाई छ ।

संसारबाटनै यसको प्रयोगलाई निरुत्साहित गर्न संयुक्तराष्ट्र संघले मिनामाता मर्करी महासन्धिलाई सन २०१३ मा आत्मसाथ गरी सकेको छ भने, यस महासन्धिलाई हाल सम्म नेपाललगायत १२८ देशले हस्ताक्षर गरी सका छन् ।युरोपियन समुदायले थर्मामिटर, रक्तचाप नाप्ने यन्त्र, मर्करी अमलगम लगायत तथा अन्य सामागिको उपयोग बन्द गरिसकेको जनस्वास्थ्य तथा वातावरण प्रबर्द्धन केन्द्रका कार्यकारी निर्देशक शाहले बताए ।

Hospitals dont want to follow ministerial decision, Narayani Online, 4th March 2015

## मन्त्रालयको निर्देशन मान्दैन चितवनका अस्पताल

प्रकाश सिग्देल



चितवन । चितवनका अधिकांस स्वास्थ्य संस्थाले स्वास्थ्य उपचारमा अझै पनि पारो अर्थात मर्करी र मर्करीजन्य रसायनको प्रयोग गर्ने गरेका छन् । नेपाल सरकार स्वास्थ्य मन्त्रालयले २०७० चैत्र १७ गते सबै स्वास्थ्य संस्थामा परिपत्र जारी गरी ७ दिन भित्रमा मर्करी मुक्त स्वास्थ्य सेवा प्रदान गर्न निर्देशन दिएको थियो ।

करिव एक वर्ष भित्र लाग्दा पनि अस्पतालहरूले मन्त्रालयको निर्देशन कार्यान्वयन नगरेको निजी अस्पताल समन्वय समितिका सहसचिव शेष सापकोटाले बताए । उनले जिल्लाको सरकारी अस्पताल, मौलाकाली अस्पताल, भरतपुर सामुदायिक अस्पताल, चितवन अस्पताल लगायत अन्य केही अस्पतालले मर्करी मुक्त स्वास्थ्य सेवा प्रदान गरेको भए पनि अधिकांसले मन्त्रालयको निर्देशन कार्यान्वयन नगरेको बताए ।

जिल्लाका ठूला मेडिकल कलेजहरूमा यो समस्या अझै बढी रहेको पाइएको छ । ठूला मेडिकल कलेजहरूले सञ्चालन गरेको दन्त उपचारमा सबै भन्दा बढी मर्करीजन्य रसायन अर्थात पारोको प्रयोग हुने गरेको छ । डेन्टल अस्पतालले चाँदीले दाँत भर्ने बेला अमलगमको रूपमा मर्करी प्रयोग गर्ने गरेको जनस्वास्थ्य तथा वातावरण प्रबर्द्धन केन्द्रका इन्जिनियर मनिष थापाले बताउँछन् । उनले अस्पतालहरूले रक्तचाप नाप्ने यन्त्र र थर्मोमिटर पनि पारोयुक्त प्रयोग गर्दै आएको बताए । त्यस्तै ल्यावमा पनि परिक्षणका क्रममा मर्करीजन्य रसायनको प्रयोग हुँदै आएको छ । मर्करीको प्रयोगले क्यान्सर हुने हुनाले अस्पतालहरूले डिजिटल प्रविधि अपनाएर मर्करी अर्थात पारोको प्रयोग बन्द गर्नुपर्ने उनको तर्क छ । दन्त चिकित्साको पाठ्य क्रममा मर्करीमा आधारित उपचार प्रणाली समावेश गरिएकाले पाठ्यक्रम नै सुधार नगर्दासम्म दन्त चिकित्साका मर्करीको प्रयोगकर्मी गर्न नसकिने दन्त चिकित्सक डा.आसुतोस सिंहले बताए । पाठ्यक्रम सुधारका लागि मन्त्रालयसम्म पहल हुनु आवश्यक रहेको उनको भनाई छ । जिल्लाका अस्पतालहरूलाई कडाईका साथ मन्त्रालयको चैत्र १७ को परिपत्र कार्यान्वयन गर्न आफुले निर्देशन दिएको र अनुगमन कार्य पनि अगाडि बढाएको जनस्वास्थ्य प्रशासक मधुसुदन कोइरालाले जानकारी दिए । त्यस्तै अस्पतालहरूले बेतीको लागि पनि मर्करीको प्रयोग गरेका छन् ।

यसैबीच जिल्ला जनस्वास्थ्य कार्यालय चितवन, निजी अस्पताल समन्वय समिति, नेपाल डेन्टल यशोसिसन र जनस्वास्थ्य तथा वातावरण प्रबर्द्धन केन्द्रको आयोजनामा आज मर्करी मुक्त स्वास्थ्य सेवा प्रदान विषयक छलफल भएको छ । कार्यक्रममा स्वास्थ्य संस्थासँग आबद्ध व्यक्तिहरूको सहभागिता रहेको थियो । कार्यक्रममा जनस्वास्थ्य तथा वातावरण प्रबर्द्धन केन्द्रका कार्यकारी निर्देशक रामचरित्र शाहले मर्करीमुक्त दन्त चिकित्सा सेवाको थालनी गरी प्रभावकारी र भरपर्दो उपचार सेवा प्रदान गर्न सबैसँग आग्रह गरे । आवश्यक ऐन र कानुनको तर्जुमाको लागि सुझाव दिने, लिने तथा तन्त्र चिकित्साको पाठ्यक्रममा समेत मर्करी अमलगमको सट्टा वैकल्पिक सुरक्षित फिलिड र उपकरण सम्बन्धि अभ्यासका लागि कार्यक्रम उपयोगी हुने उनको भनाई थियो ।

संसारबाट नै यसको प्रयोगलाई निरुत्साहित गर्ने संयुक्तराष्ट्र संघले मिन्यामाता मर्करी महासन्धिलाई सन् २०१३ मा आत्मसाथ गरिसकेको जानकारी दिँदै शाहले यस महासन्धिलाई हालसम्म नेपाललगायत १२८ देशले हस्ताक्षर गरिसकेको बताए । युरोपियन समुदायले थर्मोमिटर, रक्तचाप नाप्ने यन्त्र, मर्करी

Hospitals from Chitwan violate Ministerial Decision, NonStop Khabar, 5th March, 2015



माथि तथ्य समाचार पढ्नु भनेर हाम्रो अनुरोध



## स्वास्थ्य मन्त्रालयको निर्देशन मान्दैन चितवनका

### स्वास्थ्य संस्था

७ दिन भित्रमा मर्करी मुक्त स्वास्थ्य सेवा प्रदान गर्न निर्देशन

खबर चितवन ०५ MARCH 4, 2015

प्रकाश सिग्देल

चितवन, फागुन २०- चितवनका अधिकांस स्वास्थ्य संस्थाले स्वास्थ्य उपचारमा अझै पनि पारो अर्थात मर्करी र मर्करीजन्य रसायनको प्रयोग गर्ने गरेका छन् ।

नेपाल सरकार स्वास्थ्य मन्त्रालयले २०७० चैत्र १७ गते सबै स्वास्थ्य संस्थामा परिपत्र जारी गरी ७ दिन भित्रमा मर्करी मुक्त स्वास्थ्य सेवा प्रदान गर्न निर्देशन दिएको थियो । करिव एक वर्ष भित्र लाग्दा पनि अस्पतालहरूले मन्त्रालयको निर्देशन कार्यान्वयन नगरेको निजी अस्पताल समन्वय समितिका सहसचिव शेष सापकोटाले बताए ।

सापकोटाले अनुसार जिल्लाको सरकारी अस्पताल, मौलाकाली अस्पताल, भरतपुर सामुदायिक अस्पताल, चितवन अस्पताल लगायत अन्य केही अस्पतालले मर्करी मुक्त स्वास्थ्य सेवा प्रदान गरेको भएपनि अधिकांसले मन्त्रालयको निर्देशन कार्यान्वयन गरेका छैनन् ।

जिल्लाका ठूला मेडिकल कलेजहरूमा यो समस्या अझै बढी रहेको पाइएको छ । ठूला मेडिकल कलेजहरूले सञ्चालन गरेको दन्त उपचारमा सबै भन्दा बढी मर्करीजन्य रसायन अर्थात पारोको प्रयोग हुने गरेको पाइएको छ ।

डेन्टल अस्पतालले चाँदीले दाँत भर्ने बेला अमलगमको रूपमा मर्करी प्रयोग गर्ने गरेको जनस्वास्थ्य तथा वातावरण प्रबर्द्धन केन्द्रका इन्जिनियर मनिष थापाले बताए ।

थापाका अनुसार अस्पतालहरूले रक्तचाप नाप्ने यन्त्र र थर्मोमिटर पनि पारो युक्त प्रयोग गर्दै आएका छन् ।

त्यस्तै ल्यावमा पनि परिक्षणका क्रममा मर्करीजन्य रसायनको प्रयोग हुँदै आएको छ ।

मर्करीको प्रयोगले क्यान्सर हुने हुनाले अस्पतालहरूले डिजिटल प्रविधि अपनाएर मर्करी अर्थात पारोको प्रयोग बन्द गर्नु पर्ने उनको तर्क छ । दन्त चिकित्साको पाठ्य क्रममा मर्करीमा आधारित उपचार प्रणाली समावेश गरिएकाले पाठ्यक्रम नै सुधार नगर्दासम्म दन्त चिकित्साका मर्करीको प्रयोगकर्मी गर्न नसकिने दन्त चिकित्सक डा.आसुतोस सिंहले बताए ।

पाठ्यक्रम सुधारका लागि मन्त्रालयसम्म पहल हुनु आवश्यक रहेको उनको भनाई छ ।

जिल्लाका अस्पतालहरूलाई कडाईका साथ मन्त्रालयको चैत्र १७ को परिपत्र कार्यान्वयन गर्न आफुले निर्देशन दिएको र अनुगमन कार्य पनि अगाडि बढाएको जनस्वास्थ्य प्रशासक मधुसुदन कोइरालाले बताए ।

त्यस्तै अस्पतालहरूले बेतीको लागि पनि मर्करीको प्रयोग गरेका छन् । यसैबीच जिल्ला जनस्वास्थ्य कार्यालय चितवन, निजी अस्पताल समन्वय समिति, नेपाल डेन्टल यशोसिसन र जनस्वास्थ्य तथा वातावरण प्रबर्द्धन केन्द्रको आयोजनामा आज मर्करी मुक्त स्वास्थ्य सेवा प्रदान विषयक छलफल भएको छ ।

कार्यक्रममा स्वास्थ्य संस्थासँग आबद्ध व्यक्तिहरूको सहभागिता रहेको छ । कार्यक्रममा जनस्वास्थ्य तथा वातावरण प्रबर्द्धन केन्द्रका कार्यकारी निर्देशक रामचरित्र शाहले मर्करीमुक्त दन्त चिकित्सा सेवाको थालनी गरी प्रभावकारी र भरपर्दो उपचार सेवा प्रदान गर्न सबैसँग आग्रह दिए ।

आवश्यक ऐन र कानुनको तर्जुमाको लागि सुझाव दिने, लिने तथा तन्त्र चिकित्साको पाठ्यक्रममा समेत मर्करी अमलगमको सट्टा वैकल्पिक सुरक्षित फिलिड र उपकरण सम्बन्धि अभ्यासका लागि कार्यक्रम उपयोगी हुने उनको भनाई छ ।

संसारबाट नै यसको प्रयोगलाई निरुत्साहित गर्ने संयुक्तराष्ट्र संघले मिन्यामाता मर्करी महासन्धिलाई सन् २०१३ मा आत्मसाथ गरी सकेको छ भने, यस महासन्धिलाई हाल सम्म नेपाललगायत १२८ देशले हस्ताक्षर गरी सका छन् ।

युरोपियन समुदायले थर्मोमिटर, रक्तचाप नाप्ने यन्त्र, मर्करी अमलगम लगायत तथा अन्य सामाजिकको उपयोग बन्द गरिसकेको जनस्वास्थ्य तथा वातावरण प्रबर्द्धन केन्द्रका कार्यकारी निर्देशक शाहले बताए ।

Hospitals from Chitwan avoid following MOHP's decision, 4th March 2015, Khabar Chitwan

**Rato Pati** shared a link  
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स्वास्थ्य मन्त्रालयको निर्देशन मान्दैनन् स्वास्थ्य संस्था - Nepal  
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Program Coverage through Social media, Rato Pati, 4th March 2015

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Program Coverage from Social Media, DC Nepal, 5th March, 2015

Despite the fact that a decision was made in 17th Chaitra of 2070 BS by the Ministry of Health ordering all the health sectors to make mercury free health service, however, most of the health institutions based in Chitwan are still applying mercury in course of health treatment. Deputy Secretary of Private Hospital Coordination Committee, Shesh Shapkota said that no health institutions in the district have adopted the directive of the ministry despite the Home Ministry's directive made a year ago. Except Bharatpur Community Hospital and Chitwan Hospital, the health institutions based in the district have not implemented the directive of the health ministry in stopping the use of mercury in course of human treatment, added Shapkota. Most of the medical colleges in the district have been ignoring the directive of the ministry. The so called popular medical colleges have been adopting excessive use of mercury during the dental treatment, it is learnt.

Video by Punam Gautam

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Despite the fact that a decision was made in 17th Chaitra of 2070 BS by the Ministry of Health ordering all the health sectors to make mercury free health service, however, most of the health institutions based in Chitwan are still applying mercury in co

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Program Coverage in Visual, DC Nepal, 4th March 2015

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प्रकाश सिग्देल चितवन, फागुन २०- चितवनका अधिकांस स्वास्थ्य संस्थाले स्वास्थ्य उपचारमा अझै पनि पारो अर्थात् मर्करी र मर्करीजन्य रसायन को प्रयोग गर्न गरेका छन् ।नेपाल सरकार स्वास्थ्य मन्त्रालय

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News Updated By- Aryan Niembang | Posted From- Washington DC | March 05, 2015

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चितवनका अधिकांस स्वास्थ्य संस्थामा स्वास्थ्य उपचारमा अझै पनि पारो अर्थात मर्करी र मर्करीजन्य रसायनको प्रयोग गरिँदै गरिएको छ।

पुनम गौतम, फागुन २०, चितवन - चितवनका अधिकांस स्वास्थ्य संस्थामा स्वास्थ्य उपचारमा अझै पनि पारो अर्थात मर्करी र मर्करीजन्य रसायनको प्रयोग गरिँदै गरिएका छन्।

नेपाल सरकार स्वास्थ्य मन्त्रालयले २०७० चैत्र १७ गते सबै स्वास्थ्य संस्थामा परिपत्र जारी गरी ७ दिन भित्रमा मर्करी मुक्त स्वास्थ्य सेवा प्रदान गर्न निर्देशन दिएको थियो। करिब एक वर्ष विना लाग्दा पनि अस्पतालहरूले मन्त्रालयको निर्देशन कार्यान्वयन नगरेको निजी अस्पताल समन्वय समितिका सह सचिव शेष सापकोटाले बताएका छन्।

सापकोटाका अनुसार जिल्लाको सरकारी, मौलाकालीका, भरतपुर सामुदायिक अस्पताल, चितवन अस्पताल लगायत अन्य केहि अस्पतालले मर्करी मुक्त स्वास्थ्य सेवा प्रदान गरेको भएपनि अधिकांशले मन्त्रालयको निर्देशन कार्यान्वयन नगरेको बताईएको छ।

जिल्लाका ठूला मेडिकल कलेजहरूमा यो समस्या अझै बढि रहेको पाईएको छ। ठूला मेडिकल कलेजहरूले सञ्चालन गरेको दन्त उपचारमा सबै भन्दा बढि मर्करीजन्य रसायन अर्थात पारोको प्रयोग हुने गरेको पाईएको छ।

डेन्टल अस्पतालले चाँदीले दाँत भर्ने बेला अमलगमको रूपमा मर्करी प्रयोग गर्ने गरेको जनस्वास्थ्य तथा वातावरण प्रवर्द्धन केन्द्रका इन्जिनियर मनिस थापाले बताउनुभयो। उहाँका अनुसार अस्पतालहरूले रक्तचाप नाप्ने यन्त्र र थर्मामिटर पनि पारो युक्त प्रयोग गर्दै आएका छन्।

त्यस्तै ल्यावमा पनि परिक्षणका क्रममा मर्करीजन्य रसायनको प्रयोग हुँदै आएको छ। मर्करीको प्रयोगले क्यान्सर हुने हुनाले अस्पतालहरूले डिजिटल प्रविधि अपनाएर मर्करी अर्थात पारोको प्रयोग बन्द गर्नुपर्ने उहाँको तर्क रहेको छ।

दन्त चिकित्साको पाठ्य क्रममा मर्करीमा आधारित उपचार प्रणाली समावेश गरिएकाले पाठ्यक्रम नै सुधार नगर्दासम्म दन्त चिकित्सामा मर्करीको प्रयोग कर्मी गर्न नसकिने दन्त चिकित्सक डा. आसुतोस सिंहले बताउनुभयो।

पाठ्यक्रम सुधारका लागि मन्त्रालयसम्म पहल हुनु आवश्यक रहेको उहाँको भनाई छ। जिल्लाका अस्पतालहरूलाई कडाईको साथ मन्त्रालयको चैत्र १७ को परिपत्र कार्यान्वयन गर्न आफुले निर्देशन दिएको र अनुगमन कार्य पनि अगाडि बढाएको जनस्वास्थ्य प्रशासक मधुसुदन कोईरालाले बताउनुभयो। त्यस्तै अस्पतालहरूले बत्तीको लागि पनि मर्करीकै प्रयोग गरेका छन्।

यसैबीच जिल्ला जनस्वास्थ्य कार्यालय चितवन, निजी अस्पताल समन्वय समिति, नेपाल डेन्टल एशोसियसन र जनस्वास्थ्य तथा वातावरण प्रवर्द्धन केन्द्रको आयोजनामा आज मर्करी मुक्त स्वास्थ्य सेवा प्रदान विषयक

कार्यक्रममा जनस्वास्थ्य तथा वातावरण प्रवर्द्धन केन्द्रका कार्यकारी निर्देशक रामचरित्र शाहले मर्करीमुक्त दन्त चिकित्सा सेवाको थालनी गरी प्रभावकारी र भरपर्दो उपचार सेवा प्रदान गर्न सबैसंग आग्रह गर्नुभएको छ। आवश्यक ऐन र कानूनको तर्जुमाको लागि सुझाव दिने, लिने तथा दन्त चिकित्साको पाठ्यक्रममा समेत मर्करी अमलगमको सट्टा बैकल्पिक सुरक्षित फिलिड र उपकरण सम्बन्धि अभ्यासका लागि कार्यक्रम उपयोगी हुने उहाँको भनाई छ।

संसारबाट नै यसको प्रयोगलाई निरुत्साहित गर्न संयुक्तराष्ट्र संघले मर्करी महासन्धिलाई सन् २०१३ मा आत्मसाथ गरी सकेको छ भने, यस महासन्धिलाई हाल सम्म नेपाललगायत १२८ देशले हस्ताक्षर गरीसकेको जनाईएको छ। यूरोपियन समुदायले थर्मामिटर, रक्तचाप नाप्ने यन्त्र, मर्करी अमलगम लगायत तथा अन्य सामाग्रीको उपयोग बन्द गरिसकेको जनस्वास्थ्य तथा वातावरण प्रवर्द्धन केन्द्रका कार्यकारी निर्देशक शाहले बताउनु भयो।

Most of the health care services from Chitwan were found using mercury, 5th March, 2015

# मर्करीमुक्त स्वास्थ्य सेवासम्बन्धी जनचेतना कार्यक्रम

■ आर्थिक तदारकता

पोखरा, वैत १९

पोखरामा मर्करीमुक्त स्वास्थ्य सेवा एवं दन्त चिकित्सासम्बन्धी जनचेतना कार्यक्रम सम्पन्न भएको छ । जनतामा मर्करीको प्रयोग र यसको असरबारे जनचेतना अभिवृद्धि गर्ने तथा मर्करी अर्थात् पारोका विभिन्न प्रयोजनहरूमध्ये स्वास्थ्य सेवा र विशेष गरी दन्त चिकित्सा सेवामा रद्दता भन्ने मर्करी अमलगम (चाँदी भर्ने)को प्रयोगबाट उत्पन्न हुन सक्ने स्वास्थ्य र वातावरणीय समस्याहरूको समाधानका लागि एक दिने कार्यक्रमलाई कार्यान्वयन गरिएको नेपाल दन्त चिकित्साक संघले जनाएको छ ।

जिल्ला जनस्वास्थ्य कार्यालय कार्तवी, नेपाल दन्त चिकित्सक संघ, पोखरा उपमहानगरपालिकाको संयोजकत्व तथा जनस्वास्थ्य तथा वातावरण प्रवर्द्धन केन्द्रको

आयोजनामा सम्पन्न भएको कार्यशाला गोष्ठीमा कालीकान्त दन्त चिकित्सक, अस्पताल प्रमुख, नर्सिङ विद्यालय प्रमुख, मेडिकल कलेज, डेन्टल स्वास्थ्यकर्मी, उपभोक्ताकर्मीलगायत विभिन्न क्षेत्रका गरी ६० जनाले सहभागिता जनाएका थिए । कार्यशाला गोष्ठीमा स्वास्थ्य तथा जनसंख्या मन्त्रालयबाट मर्करीमुक्त उपकरणहरूको आयात, खरिद तथा उपयोगमा बन्देज गर्ने निर्णय भइसकेको र सन् २०१३ अक्टोबर १०मा नेपाल सरकार शिक्षा, प्रविधि तथा वातावरण मन्त्रालयले मिनमाता मर्करी महासभामा हस्ताक्षर गरी अनुमोदन गर्ने तयारीमा रहेको जनस्वास्थ्य तथा जनसंख्या मन्त्रालयबाट मर्करी मुक्त उपकरणहरू र रसायनहरूबाट विरामी, शिशुमा कुरुवा, दन्त चिकित्सकहरू, नर्सलगायतका यस क्षेत्रसँग सम्बन्धित

मानिसको शरीरमा समेत असर गर्न थालेको भन्ने यसप्रति सम्बन्धित पक्षको व्यानाकर्षण गराइएको थियो ।

कार्यशालामा बोल्ने अधिकांशले महासभामा व्यवस्था भएअनुसार मर्करी अमलगमको प्रयोग गिराउनुका लागि कार्यन्वयन गराउनु र नेपाल सरकार स्वास्थ्य तथा जनसंख्या मन्त्रालयको मर्करीमुक्त उपकरणहरूको आयात, खरिद तथा प्रयोगमा बन्देज लगाएको निर्णयको प्रभावकारी कार्यान्वयन गराउन माग गरेका छन् ।

मर्करीको प्रयोग घटाउन आवश्यक ऐनकानूनको तर्जुमाको लागि सुझाव दिने तथा दन्त चिकित्सा शिक्षाका पाठ्यक्रममा समेत मर्करी अमलगम र उपकरणहरूको सट्टा वैकल्पिक सुरक्षित फिलिंग र उपकरणहरूसम्बन्धी यथेष्ट ज्ञान समावेश गराउन उक्त गोष्ठीको आयोजना गरिएको थियो ।

कार्यक्रममा बोल्ने जनस्वास्थ्य कार्यालय कार्तवीका वरिष्ठ स्वास्थ्य प्रशासक भोजराज सुवेदीले सरकारद्वारा आर्थिक वर्ष २०७०/७१ सालको सुर्खवातसँगै मर्करीमुक्त उपकरणहरूको आयात, बिक्रीवितरण तथा प्रयोगमा बन्देज लगाउने निर्णयको कार्यान्वयनमा जिल्लाको तपेनाट प्रभावकारी रूपले लागू गर्ने र सधैं स्वास्थ्य संस्थाहरूलाई सोहीअनुसार गर्न/गराउनुपर्नेमा जोड दिएका थिए । कार्यक्रममा मर्करीको जानकारी, यसको वर्तमान अवस्था तथा मानव स्वास्थ्यमा र वातावरणमा पर्ने असरबारे समेत जानकारी गराइएको थियो । कार्यक्रममा दन्त चिकित्साका मर्करी अमलगमको व्यावहारिक प्रयोग तथा दन्त शिक्षाको पाठ्यक्रममा अभ्यास, मर्करीमुक्त स्वास्थ्य सेवा तथा अनुसन्धान एवं जनचेतनामूलक कार्यक्रमको बारेमा बुझ्न छलफल गरी प्रतिबद्धता जनाउन समूहगत अभ्यास र प्रस्तुति गरिएको थियो ।

Public Awareness Program for Mercury Free Health Care Services, Arthik Daily, 19th March 2015



One Day Workshop for Mercury Free Health Care Services, Don News, 19th March 2015





**AWARENESS AND CAPACITY BUILDING PROGRAM ON MERCURY FREE DENTISTRY AND MERCURY FREE HEALTH CARE SERVICES IN NEPAL UNDER WAMFD AND IPEN/IMEAP PROGRAM ON 4 MARCH, 2015**



Awareness Raising and Capacity Building Training Workshop On 'Mercury Free Dentistry and Health Care Services in Nepal (Amalgam Phasedown, National Regulation and Alternative Curriculum)' was held on 4th March, 2015 in Bharatpur, Chitwan District of Nepal in association with GON, MOHP, DPHO Chitwan, NDA and Private Hospital Coordination Committee Chitwan and participated by over 60 Dental Doctors , other health care professional as well as Journalist

**Awareness and Capacity Building Program on Mercury Free Dentistry and Mercury Free Health Care Service in Nepal under WAMDS and IPENIMEAP program on 4 March 2015, [environmentalhealth.asia](http://environmentalhealth.asia)**

**A HIGH LEVEL POLICY MEETING ON MERCURY FREE DENTISTRY AND HEALTH CARE SERVICES CONCLUDED IN CAPITAL CITY KATHMANDU, NEPAL ORGANIZED BY CEPHED ON 22 MARCH, 2015**



**A high Level policy meeting on mercury free dentistry and health care services concluded in capital city, Kathmandu, Nepal, Organised by CEPHED, 23rd March 2015, [environmentalhealth.asia](http://environmentalhealth.asia)**

# मर्करीमुक्त स्वास्थ्य सेवासम्बन्धी जनचेतना कार्यक्रम

आर्थिक संवाददाता,  
पोषण, चैत ४,

पोषणमा मर्करीमुक्त स्वास्थ्य सेवा एवं दन्त चिकित्सान्मन्थनी जनचेतना कार्यक्रम सम्पन्न भएको छ । जनतामा मर्करीको प्रयोग र यत्को असरबारे जनचेतना अभिवृद्धि गर्ने तथा मर्करी अर्थात् पारोका विभिन्न प्रयोजनहरूमध्ये स्वास्थ्य सेवा र विशेष गरी दन्त चिकित्सक सेवामा दौलतना गर्ने र्करी अन्त्य गर्न (गोष्ठी मर्करी)को प्रयोगबाट उत्पन्न हुनसक्ने स्वास्थ्य र वातावरणीय समस्याहरूको समाधानका लागि एक दिने कार्यक्रम शाल गोष्ठी आयोजना गरिएको नेपाल दन्त चिकित्सक सघले जनाएको छ ।

जिल्ला जनस्वास्थ्य कार्यालय कास्की, नेपाल दन्त चिकित्सक संघ, पोखरा उपमहानगरपालिकाको संयोजकत्व तथा जनस्वास्थ्य तथा वातावरण प्रबन्धन केन्द्रको आयोजनामा सम्पन्न भएको कार्यशाला गोष्ठीमा कास्कीका दन्त चिकित्सक, अस्पताल प्रमुख, तर्सिङ विद्यालय प्रमुख, मेडिकल कलेज, डेन्टल स्वास्थ्यकर्मी, उपभोक्ताकर्मी लगायत विभिन्न क्षेत्रका गरी ६० जनाले सहभागिता जनाएका थिए ।

कार्यशाला गोष्ठीमा स्वास्थ्य तथा जनस्वास्थ्य मन्त्रालयबाट मर्करीयुक्त उपकरणहरूको आयात, खरिद तथा उपयोगमा बन्देज गर्ने निर्णय भइसकेको र सन् २०१३ अक्टोबर १०मा नेपाल सरकार विज्ञान, प्रविधि तथा वातावरण मन्त्रालयले निम्नमात्र मर्करी महासन्धिमा हस्ताक्षर गरी अनुमोदन गर्ने तयारीमा रहेको अवस्थामा नेपालमा दन्त चिकित्सा र अन्य स्वास्थ्य सेवाहरूमा अत्यधिक प्रयोग भइरहेको मर्करी, मर्करीयुक्त उपकरणहरू र रसायनहरूबाट विरामी, विरामी कुटुम्हा, दन्त चिकित्सकहरू, नर्स लगायतका यस क्षेत्रसँग सम्बन्धित मानिसको शरिरमा समेत असर गर्न थालेको भन्दै यस्ताति सम्बन्धित पक्षको ध्यानकर्षण गराइएको थियो ।

कार्यशालामा बोल्ने अधिकारले महासन्धिमा व्यवस्था भएअनुरूप मर्करी अन्त्यको प्रयोग जिल्लाहित गर्ने गराउनेतर्फ र नेपाल सरकार स्वास्थ्य तथा जनस्वास्थ्य मन्त्रालयको मर्करीयुक्त उपकरणहरूको आयात, खरिद तथा प्रयोगमा बन्देज लगाएको निर्णयको प्रभावकारी कार्यान्वयन गराउन माग गरेका छन् ।

मर्करीको प्रयोग घाटान अवश्यक रोकानुनको तर्जुनाको लागि मुझाव दिने तथा दन्त र चिकित्सा शिक्षाको पाठ्यक्रममा समेत मर्करी अन्त्यमा र उपकरणहरूको न्हा वैकल्पिक सुनिश्चित कालिग र उपकरणहरूसम्बन्धी रथेठ जान समावेश गराउन उक्त गोष्ठीको आयोजना गरिएको थियो ।

कार्यक्रममा बोल्दै जनस्वास्थ्य कार्यालय कास्कीका वरिष्ठ स्वास्थ्य प्रशासक भोजराज तुवेदीले सरकारद्वारा आर्थिक वर्ष २०७०-७१ लागू हुनेसँगै मर्करीयुक्त उपकरणहरूको आयात, बिक्रीवितरण तथा प्रयोगमा बन्देज लगाउने निर्णयको कार्यान्वयनमा जिल्लाको तर्जुनाबाट प्रभावकारी रूपले लागू गर्ने र सबै स्वास्थ्य संस्थाहरूलाई सोबि अनुसन्धान गर्ने गराउनुपर्नेमा जोड दिएका थिए ।

कार्यक्रममा मर्करीको जनकारी, यसको वर्तमान अवस्था तथा मानव स्वास्थ्यमा र वातावरणमा पर्ने असरबारे समेत जानकारी गराइएको थियो । कार्यक्रममा दन्त चिकित्सक मर्करी अन्त्यको व्यावहारिक प्रयोग तथा दन्त शिक्षाको पाठ्यक्रममा अभ्यास, मर्करीमुक्त स्वास्थ्य सेवा तथा अनुसन्धान एवं जनचेतनामूलक कार्यक्रमको बारेमा बृहत् छलफल गरी प्रतिबद्धता जनाउन सन्तुष्टता अभ्यास र प्रस्तुति गरिएको थियो ।

## Awareness Raising Program on Mercury Free Health Care Services, 18th March 2014, Pokhara, aarthikdainik.com.np

### Call to phase out mercury in health care, the himalayan times, 23rd March, Social meddia

## Call to phase out mercury in health care



**K**ATHMANDU: Government officials, academician, dental professionals and environmental experts stressed the...  
The Himalayan 2015-03-23 [Read full article](#)

## Call to phase out mercury in health care, 23rd March, article.wn.com

HIMALAYAN NEWS SERVICE  
KATHMANDU: Government officials, academician, dental professionals and environmental experts stressed the protection of human health and environment by introducing national regulation on mercury-free dentistry and health care services.

"The government is doing homework to ratify the Minamata Convention on Mercury. After that, Nepal must eliminate the use of mercury containing instruments in health care services and use of amalgam in dentistry," Krishna Chandra Paudel, secretary at the Ministry of Science, Technology and Environment said at a high-level policy meeting on "Mercury Free Dentistry and Health Care Services in Nepal" organised in the capital today. He said mercury was dangerous to public health and environment and its import and use, especially in the health sector, including in dentistry had to be immediately stopped.

The programme was organised by Centre for Public Health and Environmental Development (CEPHED) in association with MoSTE, Ministry of Health and Population and Nepal Dental Association with the support of World Alliance for Mercury Free Dentistry (WAMFD), IFEN/IMEAP and UNDP GEF SGP to address the issues of the use of mercury amalgam in dentistry and various mercury based measuring equipment in health care services.

"As mercury is recognised as a harmful chemical for human health and environment, ODA is planning to enlist mercury as hazardous chemical and ban the use of mercury amalgam in dental health care services with the formulation of necessary policy," Balkrishna Khakurel, Director General at the Department of Drug Administration said.

From policy level perspective, MoHP has decided to ban import, purchase and use of mercury containing product and equipment. Implementation of this policy is in the initial phase. MoSTE has signed the Minamata Convention on Mercury and is in the process of ratifying the Convention.

Dr Suprathal Shrestha, NDA president, said, "Since dentistry as profession is always supposed to be the patient-friendly, NDA is committed to phase out the use of amalgam and progress towards mercury-free dentistry in the coming years. NDA is planning to take the initiative to support Nepal Medical Council and pursue revision of dental curriculum to reduce and ultimately eliminate mercury use in academic settings and practices."

### Call to phase out mercury in health care, Thehimalayantimes.com, 23rd March 2015



### Workshop on E-waste with Youth

February 2015: ESDO team conducted a workshop on 7th February, 2015 in Spellbound, Dhanmondi 12. Twenty-five members of Green Club attended the workshop. The main objective of the workshop was to raise awareness about e-waste among the young generation since they are involved more with latest gadgets; hence, the main contributor of e-waste generation.



### Celebrated Oral Health Day 2015

March 2015: Secretary General of ESDO, Dr. Shahriar Hossain attend oral health day 2015 rally in Nepal during his Nepal visit organized by Nepal Dental Association-NDA. In that time he also attend two national mercury-free dentistry program at Kathmandu and Pokhara in Nepal. Which is organized by ESDO's partner organization CEPHEP, Nepal.

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**Celebration of Oral Health Day @ ESDO Newsletter Jan to March 2015**

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स्वास्थ्य लगायत अन्य क्षेत्रमा मर्करीको प्रयोग नियन्त्रण गर्नेका लागि सरकारले विशेष नीति ल्याउन लागेको छ । मर्करीको प्रयोगले स्वास्थ्य तथा वातावरणमा अस...

NEWS24NEPAL.TV

**Government Claims Controlling Mercury Uses, News 24 Nepal Television News, 22<sup>nd</sup> March 2015**

# Call to phase out mercury in health care

Himalayan News Service  
Kathmandu, March 22

Government officials, academician, dental professionals and environmental experts stressed the protection of human health and environment by introducing national regulation on mercury-free dentistry and health care services.

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Call to Phase out mercury in health care, 23rd March, 2015, The Himalayan Times

**पारोको प्रयोगलाई प्रतिबन्ध लगाउनुपर्नेमा विज्ञको जोड**  
March 23rd, 2015 | by Weekly Nepal

काठमाडौं, १९ वैशाख (संवाद) स्वास्थ्य विभागले स्वास्थ्य सेवाको विकासका लागि स्वास्थ्य सेवालाई दायर चिकित्सकहरूले जसको न्यूनोत्पन्न गर्नुपर्नेमा एक वर्षको लागि प्रतिबन्ध लगाउनुपर्नेमा विज्ञको जोड दिएका हुन्।

जनस्वास्थ्य तथा वातावरण प्रदूषण नियन्त्रण विभागले स्वास्थ्य सेवाको विकासका लागि दायर चिकित्सकहरूले जसको न्यूनोत्पन्न गर्नुपर्नेमा विज्ञको जोड दिएका हुन्।

विज्ञहरू, प्रतिबन्ध लगाउनुपर्नेमा स्वास्थ्य विभागले स्वास्थ्य सेवालाई दायर चिकित्सकहरूले जसको न्यूनोत्पन्न गर्नुपर्नेमा विज्ञको जोड दिएका हुन्।

उनले सो अनुमोदनपश्चात सन् २०१० सम्म अन्य मुलुकहरूले नेपालले पनि पारोयुक्त थर्मामिटर, रक्तचाप नाप्ने यन्त्र, व्याटी, स्वीच आदिको प्रयोग बन्द गर्नुपर्ने र प्रयोग हुने पारोको मात्रा घटाउँदै अन्ततः निरमूलोत्पन्न गर्नुपर्ने पनि जानकारी दिए।

दन्त चिकित्सक सङ्घका अध्यक्ष डा सुप्रभात श्रेष्ठले स्वास्थ्य सेवामा प्रयोग हुँदै आएको स्वास्थ्यको हितकोषबाट हानिकारक रसायन पारोको आयातलाई प्रतिबन्धित औषधिको रूपमा नियमन कार्य गर्नुपर्नेमा जोड दिँदै दन्त चिकित्सा शिक्षाको वैकल्पिक पाठ्यक्रमको विकास गर्नुपर्ने बताए।

सिफेडका कार्यकारी निर्देशक रामचरित्र साहले नेपालमा पारोमुक्त स्वास्थ्य सेवा तथा पारोमुक्त दन्त चिकित्सा सेवाको लागि भइरहेको सरकारी, गैरसरकारी तथा अन्य पेसागत सङ्घ संस्था र दन्त चिकित्सकका प्रयास अपुग भएको विचार व्यक्त गर्दै दन्त चिकित्सामा पारोको प्रयोग निरस्तसाहित तथा पूर्णतया बन्दैज गर्ने गराउनेतर्फ आवश्यक कार्ययोजना बनाउन सुझाव दिए।

काठमाडौं विश्वविद्यालयका डिन डा नरेन्द्र राणा, स्वास्थ्य तथा जनसङ्ख्या मन्त्रालयअन्तर्गत रोग निवारण विभागका प्रमुख डा गुणराज लोहनी, संयुक्त राष्ट्र संघीय विकास कार्यक्रमका जनस्वास्थ्यसम्बन्धि राष्ट्रिय संयोजक गोपालराज शेरचनलगायतले दन्त पाठ्यक्रममा पारोको व्यवहारिक रूपमा भइरहेको प्रयोग जोखिमपूर्ण रहेकाले दन्त शिक्षाको पाठ्यक्रमकै परिमार्जनको आवश्यकता रहेको अँल्याए।

सहायध्यापक डा रिमा जोशीले नेपालमा पारोमुक्त दन्त चिकित्सासम्बन्धी पहलको बारेमा चर्चा गर्दै दन्त चिकित्सा क्षेत्रलाई व्यवस्थित तथा मर्यादित बनाउन पारोको विकल्प खोज्नुपर्ने बताए।

स्वास्थ्य तथा जनसङ्ख्या मन्त्रालयका उपसचिव राजिव पौखरेलले स्वास्थ्य तथा जनसङ्ख्या मन्त्रालयले पारोमुक्त समाजका निम्ति पारोयुक्त उपकरणको आयात, खरिद/विक्री तथा प्रयोगमा प्रतिबन्ध लगाउनेसम्बन्धी प्रक्रियाको थालनी भइसकेको बताए।

Experts stress on the banning of use of mercury, 23<sup>rd</sup> March 2015, Weekly Nepal

# मर्करीयुक्त उपकरणले स्वास्थ्यकर्मीको स्वास्थ्य जोखिममा

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बढ्दो दमन चिकित्सा सेवा, दमन चिकित्सक, अस्पताल, कलेज एवं स्वास्थ्य संस्थाहरूको चिकित्सकीय स्वास्थ्य सेवामा लाग्ने बढ्दो बजेटले गर्दा छ । तर स्वास्थ्य संस्थाहरूको स्वास्थ्य प्रयोग हुने मर्करीयुक्त उपकरणहरू, जसमा लाग्ने धर्मोमिटर, रक्तचाप नाप्ने यन्त्र, एक्स-रे मिएर, चिकित्सकीय इन्जाेक्शन तथा औषधीमा प्रयोग गरिएका मर्करीयुक्त डोज चिउरेमेटिम लगायतका सामग्रीको संरक्षणमा आघात भइरहेको देखिएको छ । यि एक एक चिकित्सकीय प्रयोग पछिको उचित न्यवस्थापन गर्नुका स्वास्थ्यकर्मी, चिकित्सकीय, चिरामीका कुकुराको स्वास्थ्यमा प्रतिबन्धन अझ बढिरहेको छ ।

मर्करीको प्रयोग घरपरिवारगत रूपमा केहि धार्मिक बस्तुहरू जस्तै मर्करीयुक्त शिवाविदुम, कप, मुर्ति, साजा, गरमइलाको जखप लगायत अधिकांश आधुनिक औषधीहरूमा प्रयोग गरिँदै आएको छ । यसको अस्पष्ट शक्ति, प्रजनन, पनाबी, सजजन शिधु, गर्भहानी इन्जाेक्शन लगायत अन्य दुर्भेद प्रयोगको मानिसहरूलाई नरामरी प्रभाव पार्छ । यसको चिना टोकलट जतिमै छात्राहरूलाई प्रयोग गरेर धरौटाका चिकित्सकीय उपकरणहरू अझ बढ्दै गइरहेका छन् ।

दमन चिकित्सकीयमा निकै ठुलो मात्रामा प्रयोग हुने मर्करी (घरौटा) को प्रयोग र यसको स्वास्थ्यमा पर्ने नकारात्मक असरहरूको चिकित्सकीय सामुदायिकबाट चिरामीलाई हुने चिकित्सकीय जलकाठी खोप्ने वा दिनेगरीको कुनै न्यवहारमा लगेको वा एकदमै न्यून रहेको कुरा चिकित्सकीय न्यवस्थापनहरूले देखाएको छ ।

खासगरी नेपालमा मर्करी अर्थात घाँटी चिकित्सकीय प्रयोगहरू अझै अत्यधिक मात्रामा स्वास्थ्य सेवा र लयमा पनि दमन चिकित्सकीय सेवामा दौलमा भने चिकित्सकीय चिकित्सकीय प्रयोग भइरहेको छ । नेपालमा दमन चिकित्सकीय र स्वास्थ्य सेवा अत्यधिक प्रयोग भइरहेको मर्करी र मर्करीयुक्त रसायन एवं उपकरणहरूबाट चिकित्सकीय, चिरामी कुकुरा, स्वास्थ्यकर्मीको शरीरमा समेत मर्करी देखिने गरेको छ । स्वास्थ्य सेवामा प्रयोग गरिने मर्करीबाट उत्पन्न हुने यसको असरकारी प्रभावका लागि स्वास्थ्य तथा जलवायुमा अन्तर्गतबाट मर्करीयुक्त उपकरणहरूको आवात, खरीद तथा उपकरणमा बन्देज गर्ने निर्णय हुनुका साथै ल्याबको कार्यान्वयन समेत भइरहेको छ । साथै सन् २०१३ अक्टोबर १० मा नेपाल सरकार, शिक्षा, प्रविधि तथा वातावरण सन्तुलनको मन्त्रालयले कानूनमा मर्करी सहायनिधमा इन्जाेक्शन गरी अनुमोदन गर्ने तयारी भइरहेको छ । सहायनिधमा न्यवस्थापन एवं अनुहार मर्करी असरकारीको प्रयोग निकै बढि गरी र गराउने उद्देश्यले स्वास्थ्य तथा जलवायुमा अन्तर्गतको मर्करीयुक्त उपकरणहरूको आवात, खरीद तथा प्रयोगमा बन्देज लगाउने निर्णयको कार्यान्वयन गर्ने प्रयास भइरहेको छ ।

हालैका वर्षहरूमा अझै मर्करी स्वास्थ्य सेवा अत्यधिक मात्रामा प्रयोग हुँदै आइरहेको मर्करीजन्य रसायन तथा उपकरणहरूमा पर्ने मर्करीका कारण स्वास्थ्यमा स्वास्थ्यकर्मी समेत प्रभावित बन्दै गइरहेको छ । विश्वव्यापी रूपमा वातावरणीय स्वास्थ्यजन्य असरकारीको एउटा प्रमुख कारण ल्याबको रूपमा देखा परेको विश्वव्यापी मर्करीजन्य उपकरणको प्रयोगमा निकै बढि गरी र गराउने उद्देश्यले स्वास्थ्य तथा जलवायुमा अझ बढ्दो जसले मिलाइरहेको मर्करी सहायनिधलाई आन्तरिकमा लगेको छ । यस सहायनिधलाई हालसम्म नेपाल लगायत १२८ देशहरूले इन्जाेक्शन एवं १० देशले अनुमोदन समेत गरी कार्यान्वयन तिर अघि बढेको छ ।

घातु अन्तर्गतको शुक्ल रसायन मर्करीजन्य उपकरण एवं रसायनहरूबाट वातावरण तथा जलवायुमा पर्ने असरकारीको जलवेतताका कारण अमेरिकाको अधिकांश अस्पतालले मर्करीयुक्त उपकरण तथा सामग्रीहरूको प्रयोगमा बन्देज लगाइसकेको छ । युरोपियन मुलुकहरूले सन् २००७ देखि मर्करी धर्मोमिटर, रक्तचाप नाप्ने यन्त्र, मर्करी असरकारी लगायत तथा अन्य सामग्रीहरूको प्रयोगमा बन्देज गरीसकेको छ । हाल आघर घरमा प्रयोग गरीने यि एक एक यन्त्रमा समेत मर्करीको मात्रा २ माईलीग्राम भन्दा बढी प्रयोग गर्ने ल्याबलेगरी मापदण्ड लोकिइएको छ ।

खासगरी अर्जेन्टिना, चिकित्सकीय, लो, इन्जाेक्शन, डेलसर्क, कालिमा, मंगोलिया, इन्जाेक्शन, ताईवान, लगायत नेपालमा पनि मर्करीयुक्त उपकरणहरू, रसायनहरू एवं मर्करी असरकारीको प्रयोगमा प्रतिबन्धन लगाइसकिएको छ ।

## मर्करीबाट हुने हानीबाट यसरी बच्ने

मर्करीयुक्त डेन्टल चिकित्सकीय अट्टा कम्पाउन्ड, ग्लास आइन्लीमर, कोम्पोसर्, जिरोमोसिपम र सिरोमिफ जस्ता सुरक्षित मर्करीयुक्त चिकित्सकीय प्रयोग गर्नु उचित हुन्छ । दमन र चिकित्सकीय शिलाको पाठ्यक्रममा समेत मर्करी असरकारीको अट्टा वेकलियफ सुरक्षित चिकित्सकीय र उपकरणहरूको उपयोग आवश्यक ज्ञान र अभ्यासहरू हुनु आवश्यक छ । जलवेतता तथा स्वास्थ्यकर्मीको क्षमता अभिवृद्धीको उल्लेख गरी मर्करीयुक्त दमनचिकित्सकीय एवं स्वास्थ्य सेवा लक्ष्यको धारणा गर्नु पर्ने सेवा भएको छ । यसको साथै धर्मोमिटर तथा रक्तचाप नाप्ने यन्त्रको वारिमा चिकित्सकीय धर्मोमिटर तथा रक्तचाप नाप्ने उपकरणको प्रयोग गर्नुपर्छ । टर्म्बोलाईट, चिउरे र फ्लोरोमेट चोसको फ्लुज कुटेमा ल्याबका चिउरेका सामान अन्य फोस्फोरसमा मिसाउनु हुँदैन । कतिपय मुलुकहरूले यसको प्रयोग पछिको न्यवस्थापनमा समेत ध्यान दिँदै आइरहेका छन् । विश्वव्यापी रूपमा फैलिँदै गइरहेको मर्करीयुक्त चिकित्सकीय सेवा अभिमानको धारणा नेपालमा पनि हुनु आवश्यक छ ।

मर्करीयुक्त रसायनहरू, उपकरणहरूको प्रयोग गरेर र भइरहेको मर्करीयुक्त रसायन एवं उपकरणहरूलाई चिकित्सकीय प्रयोग गर्ने गरी ल्याब र मर्करीयुक्त दमन चिकित्सकीय र स्वास्थ्य सेवाको धारणा गर्नु जरुरी भइसकेको छ । यसो गर्नाले जलवायुमा तथा वातावरणलाई समेत हानिकारक घातु मर्करीबाट जोगाउन सकिन्छ ।

— डा. जलवायु तथा वातावरण प्रवृत्तको केन्द्रका वातावरण वैज्ञानिक हुन् ।



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## Mercury-Free Dentistry: National Regulation & Revision of Dental Curriculum Demanded

01 April 2015

PHASE DOWN OF MERCURY AMALGAM



**Kathmandu**—Academicians, dental professionals and environmental experts emphasizes the protection of human health and environmental pollution and urge the government to take initiative step to introduce national regulation on mercury-free dentistry, mercury free health care services and an alternative dental curriculum.

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## Mercury Free Dentistry National Regulation and Revision of Dental Curriculum Demanded, IPEN Web Page April 1, 2015

### WORKSHOP ON “MERCURY FREE DENTISTRY & HEALTH CARE SERVICES IN NEPAL, 18 MARCH, 2015



Awareness raising and capacity building training workshop on “Mercury Free Dentistry & Health Care Services in Nepal” was held on 18 March, 2015 in Nepal. The workshop was organized by CEPHEP in association with District Public Health Office (DPHO) and Nepal Dental Association. The workshop was attended by Dr. Shahriar Hossain, Vice President of World Alliance for Mercury Free Dentistry and Secretary General of ESDO; Mr Ram Charitra Sah, Executive Director, Center for Public Health and Environmental Development, Nepal and many more government officials and professional associations.

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— ESDO's newly developed brochure on the major initiatives undertaken by Asian Center for Environmental Health (Asian Center) and its partner organizations I

A High level policy meeting on Mercury Free Dentistry and Health Care Services concluded in capital city Kathmandu, Nepal organized by CEPHEP on 22 March, 2015 →

## Workshop on Mercury Free Dentistry & Health Care Services in Nepal 18th March 2015 @ [www.environmentalhealth.asia](http://www.environmentalhealth.asia)



Snap from TV Coverage, 22nd March, 2015, News 24nepalTV, Video

## मर्करीको प्रयोग नियन्त्रण गर्न लागिएको राज्यपक्षको भनाइ

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स्वास्थ्य लगायत अन्य क्षेत्रमा मर्करीको प्रयोग नियन्त्रण गर्नका लागि सरकारले विशेष नीति ल्याउन लागेको छ । मर्करीको प्रयोगले स्वास्थ्य तथा वातावरणमा असर गर्ने भएकाले मर्करीको प्रयोग नियन्त्रण गर्न लागिएको राज्यपक्षको भनाइ छ । स्वास्थ्य तथा जनसंख्या मन्त्रालयबाट मर्करीयुक्त उपकरणहरूको आयात, खरिद तथा उपयोगमा बन्देज गर्ने निर्णय भएसँगै सरकारले विशेषगरी दन्तचिकित्सा क्षेत्रमा मर्करीको प्रयोग नियन्त्रण गर्न लागेको हो । आइतबार काठमाडौंमा आयोजित अन्तरक्रिया कार्यक्रममा विज्ञान, प्रविधि तथा वातावरण मन्त्रालयका सचिव डक्टर कृष्णचन्द्र पौडेलले मर्करीको प्रभावलाई न्यूनीकरण गर्न संयुक्त राष्ट्र संघीय वातावरण कार्यक्रमले निर्देश गरेको मिनामाता मर्करी महासन्धीमा हस्ताक्षर गरी अनुमोदन गर्ने तयारी रहेकाले यसको प्रयोग निरस्तसही गर्न आवश्यक नीति निर्माणको तयारीमा रहेको जानकारी दिनुभयो । दन्त चिकित्सा क्षेत्रलाई मर्करीमुक्त बनाउनका लागि सरोकारवाला निकायहरूसित आयोजित सो अन्तक्रिया कार्यक्रममा दन्त चिकित्सकहरूले भने मर्करीको विकल्प खोजेर मात्र यसको प्रयोगमा नियन्त्रण गरिनु उचित हुने धारणा राखे । मर्करीको प्रयोग न्यूनीकरणका लागि दन्त शिक्षा पाठ्यक्रममा परिमार्जन गर्ने लागिएको बताइएको छ । मर्करीको प्रयोग दन्तचिकित्साका क्षेत्रमा नभई अन्य क्षेत्रमा समेत हुनेगरेको चिकित्सकहरूको तर्क छ। मर्करीलाई एक प्रकारको मन्दविषका रूपमा लिइन्छ ।

**Use of Mercury to be banned by Government, 22nd March, 2015, News 24nepalTV 1**



## 'पारोको प्रयोगलाई प्रतिबन्ध लगाउनुपर्छ'

Written By: IK Reports on March 22, 2015

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काठमाडौं, ८ चैत । पारो मानव स्वास्थ्यका लागि हानिकारक रहेकाले यसको प्रयोगलाई दन्त चिकित्साका क्षेत्रमा न्यूनीकरण गर्नुपर्नेमा एक कार्यक्रमका सहभागी वक्ताले सुझाएका छन् ।

जनस्वास्थ्य तथा वातावरण प्रवर्द्धन केन्द्र 'सिफेड'ले आज आयोजना गरेको कार्यक्रममा विज्ञान, प्रविधि तथा वातावरण मन्त्रालयका सचिव, दन्त चिकित्सक, वातावरणविदलगायतले मानव स्वास्थ्य तथा वातावरणीय प्रदूषण नियन्त्रणका लागि पारोमुक्त समाज निर्माणमा जोड दिएका हुन् ।

विज्ञान, प्रविधि तथा वातावरण मन्त्रालयका सचिव कृष्णचन्द्र पौडेलले पारोको प्रभावलाई न्यूनीकरण गर्न संयुक्त राष्ट्र सङ्घीय वातावरण कार्यक्रमले आत्मसात् गरेको मिनामाता मर्करी महसन्धिमा नेपाल सरकारले हस्ताक्षर गरिसकेकाले अहिले त्यसको अनुमोदनका लागि गृहकार्य भइरहेको बताए ।

विज्ञान, प्रविधि तथा वातावरण मन्त्रालयका सचिव कृष्णचन्द्र पौडेलले पारोको प्रभावलाई न्यूनीकरण गर्न संयुक्त राष्ट्र सङ्घीय वातावरण कार्यक्रमले आत्मसात् गरेको मिनामाता मर्करी महसन्धिमा नेपाल सरकारले हस्ताक्षर गरिसकेकाले अहिले त्यसको अनुमोदनका लागि गृहकार्य भइरहेको बताए ।

उनले सो अनुमोदनपश्चात सन् २०२० सम्म अन्य मुलुकहरूमा नेपालले पनि पारोयुक्त थर्मोमिटर, रक्तचाप नाप्ने यन्त्र, ब्याट्री, स्वीच आदिको प्रयोग बन्द गर्नुपर्ने र प्रयोग हुने पारोको मात्रा घटाउँदै अन्ततः निर्मूल्यकरण गर्नुपर्ने पनि जानकारी दिए ।

दन्त चिकित्सक सङ्घका अध्यक्ष डा सुप्रभात श्रेष्ठले स्वास्थ्य सेवामा प्रयोग हुँदै आएको स्वास्थ्यको दृष्टिकोणबाट हानिकारक रसायन पारोको आयातलाई प्रतिबन्धित औषधिको रूपमा नियमन कार्य गर्नुपर्नेमा जोड दिँदै दन्त चिकित्सा शिक्षाको वैकल्पिक पाठ्यक्रमको विकास गर्नुपर्ने बताए ।

सिफेडका कार्यकारी निर्देशक रामचरित्र साहले नेपालमा पारोमुक्त स्वास्थ्य सेवा तथा पारोमुक्त दन्त चिकित्सा सेवाको लागि भइरहेको सरकारी, गैरसरकारी तथा अन्य पेसागत सङ्घ संस्था र दन्त चिकित्सकका प्रयास अपुग भएको विचार व्यक्त गर्दै दन्त चिकित्सामा पारोको प्रयोग निरुत्साहित तथा पूर्णतया बन्दैज गर्ने गराउनेतर्फ आवश्यक कार्ययोजना बनाउन सुझाव दिए ।

काठमाडौं विश्वविद्यालयका डिन डा नरेन्द्र राणा, स्वास्थ्य तथा जनसङ्ख्या मन्त्रालयअन्तर्गत रोग निवारण विभागका प्रमुख डा गुणराज लोहनी, संयुक्त राष्ट्र सङ्घीय विकास कार्यक्रमका जनस्वास्थ्यसम्बन्धि राष्ट्रिय संयोजक गोपालराज शेरचनलगायतले दन्त पाठ्यक्रममा पारोको व्यावहारिक रूपमा भइरहेको प्रयोग जोखिमपूर्ण रहेकाले दन्त शिक्षाको पाठ्यक्रमकै परिमार्जनको आवश्यकता रहेको औल्याए ।

सहप्राध्यापक डा रिमा जोशीले नेपालमा पारोमुक्त दन्त चिकित्सासम्बन्धी पहलको बारेमा चर्चा गर्दै दन्त चिकित्सा क्षेत्रलाई व्यवस्थित तथा मर्यादित बनाउन पारोको विकल्प खोज्नुपर्ने बताए ।

स्वास्थ्य तथा जनसङ्ख्या मन्त्रालयका उपसचिव राजिव पोखरेलले स्वास्थ्य तथा जनसङ्ख्या मन्त्रालयले पारोमुक्त समाजका निम्ति पारोयुक्त उपकरणको आयात, खरिद-बिक्री तथा प्रयोगमा प्रतिबन्ध लगाउनेसम्बन्धी प्रक्रियाको थालनी भइसकेको बताए । रासस

## Phase Down of Mercury Amalgam

March 27, 2015 - Culture, Environment, Social Science - no comments

### Mercury-Free Dentistry: National Regulation & Revision of Dental Curriculum Demanded



**Kathmandu**—Academician, dental professionals and environmental experts emphasizes the protection of human health and environmental pollution and urge the government to take initiative step to introduce national regulation on mercury-free dentistry, mercury free health care services and an alternative dental curriculum.

In line with the Phase down of Mercury amalgam, a High Level Policy Meeting on Mercury Free Dentistry and Health Care Services in Nepal was organized by CEPHED in association with Nepal Dental Association (NDA), Ministry of Science, Technology and Environment (MOSTE) and Ministry of Health and Population (MOHP) with the support of the World Alliance for Mercury Free Dentistry (WAMFD), IPEN/IMEAP and UNDP GEF SGP to address the issues of massive use of mercury amalgam in dentistry and various mercury based measuring equipments in health care services in the light of phase down the mercury amalgam, revised the dental school curriculum and effective implementation of the Government of Nepal, Ministry of Health and Population's decision to ban the Import, Purchase and Use of mercury containing products in the health sectors.

Altogether 60+ high level officials from all concerned stakeholders including the government, developmental agencies, professional associations, academic universities and institutions providing dental education, dental doctors and media personnel's took part and vigorously discussed on the issue of phasing down the use of mercury amalgam, immediate needs of dental education curriculum and have required national policies in place. Notable participants of program include the Secretary, MOSTE, international experts and Dean and HOD from different universities and medical colleges of country.

From policy level perspective, in one side, Ministry of Health and Population has already made a decision to ban the import, purchase and uses of mercury containing products, equipments and are in implementation phase, whereas in other side Ministry of Science, Technology and Environment had signed the Minamata Convention on Mercury and are process of ratification of Convention. From professional perspective, the continuous use of mercury in dentistry as amalgam filling and the use of numerous mercury containing instruments in health care services in Nepal has already recognized as their health issues as they are getting higher exposure of this toxic mercury such as dental doctors, nurses, patients' care takers, waste handlers as March, 2015, Sunday, academician, dental professionals and environmental well as heavy environment load of mercury.

The Inauguration program was completed under the chairmanship of Dr. Suprabhat Shrestha, President, Nepal Dental Association (NDA). Program was formally inaugurated by Dr. Krishna Chandra Paudel, Secretary, Ministry of Science, Technology and Environment through irrigating a plant as a symbol of environment conservation and playing the radio jingle on mercury through CEPHED's Audio Notice Board.

Welcome address delivered by Mr. Ram Charitra Sah, Executive Director and Environment Scientist of CEPHED. He highlighted the mercury free health care services and mercury free dentistry initiatives taken by government, private sectors, professional associations and individual dental doctors and advocate for the urgent need of time bond commitment towards phase out plan, regulatory frameworks and inclusion of mercury free alternatives in the dental curriculum from the respective sectors. All distinguished guests shed light on the issues and praise the efforts of CEPHED jointly taken with all concerned stakeholders.

Dr. Krishna Chandra Paudel, Secretary, MOSTE stated "currently Government of Nepal is doing homework for the ratification of Minamata Convention and is committed to ratify the Convention soon. After the ratification, Nepal must eliminate the use of mercury containing instruments in health care services and the use of amalgam in dentistry." As we have learned that Mercury is dangerous to public health and environment, its importation and uses in any purposes especially in the health sectors including dentistry need to be immediately stopped. Dr. Balkrishna Khakurel, DG, Department of Drug Administration shared "as mercury is recognized as the harmful chemical for human health and environment, DDA is planning to enlist mercury as hazardous chemical and ban the use of mercury amalgam in the dental health care services with the formulation of required policies."

Dr. Suprabhat Shrestha, President, Nepal Dental Association stated "since Dentistry sector as profession is always supposed to be the patient friendly, Nepal Dental Association is committed to phase down the use of amalgam and progress towards mercury free dentistry in coming years. Nepal Dental Association is planning to take the initiative to support the Nepal Medical Councils well as peruse with academic institutions and universities regarding the revision of dental curriculum for the reduction and ultimately elimination of mercury use in academic setting and practices and move towards mercury free dentistry

Dr. Shahriar Hossain, Vice President, WAMFD, South Asia shared his experiences and what has been happening in national, regional and international arena about the phase out of mercury in dentistry and revision of the dental curriculum and suggest the gathering to follow the best initiatives around the world to protect human life and environment.



Several notable guests such as Dr. Narendra Rana, Dean, School of Medical Science, KU, Dr. Guna Raj Lohani, Chief, Curative Division, MOHP, Mr. Gopal Raj Sherchan, National Coordinator, UNDP GEF SGP, etc. shared their views regarding the health hazard of mercury and shown their commitments to make the desired institutional, legislative and academic process of addressing the issues immediately.

Associate Prof. Dr. Reema Joshi shared the official views and commitments of NDA initiative of Mercury Free Dentistry in Nepal and shares the important steps taken as the professional association like NDA towards mercury free dentistry and lobbying for curriculum changes.

Dr. Nitin Agrawal, Lecturer, IDM, TU shared the status of dental curriculum from the practical use of mercury perspective and calls for urgent need of revised the dental curriculum in line with the mercury free dentistry.

Dr. Reetu Shrestha, Lecturer at Kathmandu University School of Medical Science shared the progress from Kathmandu University towards the curriculum revision towards phasing down of mercury amalgam related teaching materials and practices.

From Ministry of Health and Population, Mr. Rajeev Pokhrel, Under Secretary, MOHP highlighted the Government of Nepal initiatives and decision to ban the import, purchase and use of Mercury based equipments and also share the views new initiatives of inclusion of mercury amalgam under put the restriction of import and uses in Nepal.

A detail working group session to discuss the Challenges and requirements of alternative curriculum of Dentistry in Nepal and strategies to be followed to develop the relevant National Regulations on Mercury Free Dentistry and Health Care Services was designed and a time bound sectorial commitments for Mercury Free Dentistry (Practices and Teaching), Mercury Free Health Care Services and Research and Public Awareness Activities was drawn.

विकसित देशहरूको दन्त चिकित्सा क्षेत्रमा पारोको प्रयोगमाथि प्रतिबन्ध लगाइएको छ र नेपालमा पारोयुक्त चिकित्सा उपकरण आयात, उत्पादन र प्रयोगमा प्रतिबन्ध लगाउने निर्णय गरिएको दुई वर्ष भएको छ तर नेपालको दन्त चिकित्सा क्षेत्रमा पारोको प्रयोग नियन्त्रणमा आउन सकेको छैन। दंतको उपचार गराउन गएका कतिपय बिरामीले मुखमा विष हालेर घर फर्कनु पर्छ। अर्थात् दंत चम्काउन वा दंतको मर्मत गर्ने प्रयोग गरिने तत्व पारो हो। नबुझनेले यसलाई दंतमा चाँदी भरेको भन्छन्। दन्त जसलाई चिकित्सा क्षेत्रले 'डेन्टल अमाल्गम' भन्छ।

२०६९ साल, फागुन २१ गतेको सचिवस्तरीय निर्णयबाट आगामी आर्थिक वर्ष २०७०/७१ देखि नेपाल सरकारले मर्करीयुक्त उपकरणहरू खरीद र उपयोग बन्द गर्ने र निजी क्षेत्रलाई पनि खरीद उपयोग नगर्न अनुरोध गरिएको थियो।

विश्वका करोडौं मानिसको स्वास्थ्य र जीवनमा पारोको खतरा हटाउन अन्तरसरकारीस्तरमा चार वर्षसम्म पाँच चरणमा भएको विस्तृत छलफलपछि तयार पारिएको मिनामाता सन्धिमा नेपालले हस्ताक्षर गरिसकेको छ। जसले विविध कार्यमा भइरहेको पारोको प्रयोगलाई बन्द गर्ने, घटाउने र नियन्त्रण गर्ने पक्षलाई समेटेको छ। यसमा पारोको उत्पादन, आयात निर्यात र सुरक्षित भण्डारणलाई सम्बोधन गरिएको छ।

सन्धिमा हस्ताक्षर गर्नेहरू सन् २०२० सम्ममा पारोयुक्त विभिन्न उपकरणको उत्पादन, आयात र निर्यातमा प्रतिबन्ध लगाउन बाध्य भएका छन्। नेपालका अस्पतालमा पारोयुक्त थर्मामिटरको प्रयोग धेरै हदसम्म कम भइसकेको छ तर केही अन्य उपकरण र दन्त चिकित्सा क्षेत्रमा पारोको प्रयोग हटाउन सार्ने जस्तो सफलता मिलेको देखिँदैन।

पारोको प्रयोग बन्द गर्न अभियान चलाइरहनुभएका जनस्वास्थ्य तथा वातावरण प्रवर्द्धन केन्द्रका कार्यकारी निर्देशक रामचरित्र साहले सरकारको निर्णय स्वागतयोग्य भएको तर त्रिभुवन विश्वविद्यालय र काठमाडौं विश्वविद्यालयमा अध्यापन गर्ने तथा त्यहाँको पाठ्यक्रम तयार पार्नमा सहयोगी भूमिका निर्वाह गर्ने केही दन्त चिकित्सकको दोषारे प्रवृत्तिले समस्या आइरहेको बताउनुभएको छ। उहाँ भन्नुहुन्छ पारोमुक्त स्वास्थ्य सेवा पुऱ्याइरहेको दावी उनीहरू गर्छन् तर आफ्ना विद्यार्थीलाई दन्त चिकित्सामा पारोको महत्त्व बताउने, अमाल्गमको पद्धति सिकाउने गर्नुका साथै परीक्षामा समेत तत्सम्बन्धी



# दाँतमा विष

प्रश्न सोधिनले पारोमुक्त चिकित्सा प्रणालीको स्थापनामा उदासिनता प्रस्ट्याउँछ। साहका अनुसार अधिकांश चिकित्सकले आफ्ना रोगीलाई दंतमा हाल्न लागेको तत्व पारो हो र त्यसको दुष्प्रभावबारेमा जानकारी नै दिँदैनन्। त्यसले सबैभन्दा पहिले त दन्त चिकित्सकलाई नै रोगीको समग्र स्वास्थ्यप्रति उत्तरदायी बनाउनु जरुरी देखिन्छ।

दंतमा हालिएको पारोले मुटु रोग हुने, री भर्ने, स्नायु विकार, पाचनमा गडबडी, थकान लाग्ने, डिप्रेसनजस्ता समस्या उत्पन्न हुनसक्छ। लगभग सय प्रकारका स्वास्थ्य समस्या पारोसँग जोडिएको बताइन्छ।

दन्त चिकित्सा सेवामा पारोको प्रयोग धेरै हुन्छ। साहको संस्थाले सन् २०१२ को जुनमा लिएको नमूनामा अनुसन्धान गर्दा दन्त चिकित्सक र त्यस क्षेत्रका नर्सको शरीरमा पनि पारोको केही अंश पाएको थियो। युरोपेली संघअन्तर्गतका धेरै जसो

मुलुकमा दन्त चिकित्सा क्षेत्रमा पारोको प्रयोगमा प्रतिबन्ध लगाइएको छ। नेपालमा सन् २०१३/०१४ मा १९ सय एक किलो पारो तथा करीब दुई लाख थान पारोयुक्त थर्मामिटर आयात भएको छ। यति ठूलो मात्रामा आयात हुने पारोको प्रयोग कहाँ हुन्छ भन्ने खोजी गरिनु जनस्वास्थ्यका दृष्टिले अत्यन्त महत्त्वपूर्ण छ। साथै सबै अस्पताललाई डिजिटल थर्मामिटर प्रयोग गर्न लगाउने भनिए पनि दुई लाखको संख्यामा पारोयुक्त थर्मामिटर फिकाइनुको अर्थ के हुनसक्छ ?

**पारो र त्यसको प्रभाव**

प्रकृतिमा प्रायः सबैतिर पाइने पारो मात्र एक यस्तो घातु हो जो सामान्य तापक्रममा तरल अवस्थामा रहन्छ। एक थोपा पारोले आठ हेक्टरभन्दा ठूलो तलाउलाई प्रदूषित गरी त्यसमा रहेका माछा खान नहुने अवस्थामा पुऱ्याउन सक्छ।

सन् १९५६ मा जापानको मिनामाता समुद्री खाडीबाट ल्याइएका माछा र सेल्फिस खाएर मिनामाताका कयौं मान्छेले ज्यान गुमाउनु परेको थियो। पछि अनुसन्धान गर्दा ती माछा मिथाइलमर्क्युरीबाट प्रदूषित भएको पत्ता लाग्यो। त्यस्तै, सन् १९७१ मा मिथाइलमर्क्युरीद्वारा उपचार गरिएको गहुँका कारणले चार सयभन्दा बढी इराकीले ज्यान गुमाएका थिए। साहले दिएको जानकारी अनुसार हेटीडाँडामा एक नर्सले अर्निच्छत गर्भ पतन गर्न पारो खाँदा ज्यान गुमाउनु

परेको थियो। अफ्रि पनि केही पहाडी र तराईको सीमावर्ती क्षेत्रमा गर्भ तुहाउन पारो प्रयोग गर्ने चलन रहेको छ। ज्वरो मापन गर्न घरमा राखिएको थर्मामिटरमा पारो हुन्छ। अनुसन्धानले देखाए अनुसार एक थर्मामिटरको पारोले ठूलो क्षेत्रलाई प्रदूषित गर्न सक्छ। ज्वरो नाप्ने घरेलु एक थर्मामिटरमा ०.५ देखि १ ग्रामसम्म पारो हुन्छ। पारो अर्थात् मर्क्युरीका विभिन्न स्वरूप छन्।

मिथाइलमर्क्युरीको प्रभावमा पर्ने भ्रूण, शिशु र बालबालिकामा स्नायु विकार उत्पन्न हुन्छ। मिथाइलमर्क्युरीले पार्ने अन्य असरमा दृष्टि कमजोर हुने, शरीरमा स्पन्दन अनियमित भएर प्रायः पैताला, हात, अनुहारमा सियो धोचेजस्तो महसूस हुने, हिँडडुल गर्दा सन्तुलन कम हुने, बौद्धा लरबराउने, शरीर काम्ने, मांसपेशी कमजोरलागायत हुनसक्छन्।

घरमा वा अस्पतालमा थर्मामिटर फुट्टा खसेको पारो सफा नगरेमा एकै छिनमा हराउँछ। यसै कारणले पनि होला पारोको व्यवस्थापनमा चासो कम दिएको देखिन्छ। चाँदी जस्तो चम्कने तरल देह्रुदा बालबालिकाले रमाइलो मान्ने पनि गर्छन् तर त्यसरी खसेको पारो वाष्प भएर उड्छ र सास लिँदा फोक्सो हुँदै शरीरका अन्य भागमा पुग्छ।

-जोश ओजडा

Figure 1. Poison in teeth, Gorgkhatra National Daily , 20th April 2015

**Communication with National or Local Authorities:** Indicate any communication to or coordination with your National Mercury Treaty Focal Point, or any other national or local authority related to mercury management regarding your Activity?

Communication has been established with National and Local Authorities as they were one of the major targets as well as participating organisations and even jointly organised the events, supported the local level arrangement and high level of engagement in organising the regional level awareness and capacity building programs.

Moreover, the other strategic partners Nepal Dental Association and its districts chapter are made joint organizers of the events so as to make them fully engaged and informed.

The local authorities such as District Public Health Officer, District Public Health Officer, Municipalities, Private hospital coordination committees etc. were major stakeholder actively participated and engaged in the process.

**Mercury Treaty Focal Point:** Provide the name and contact details of your National Mercury Treaty Focal Point.

Mr. Mahendra Man Gurung  
Joint Secretary  
Ministry of Science, Technology and Environment (MOSTE)  
Government of Nepal  
Singh Darbar, Kathmandu, Nepal  
Phone: 977-1-4211641, 4211586, 4211737, 4211869, 4211996,4211661  
Fax: 977-1-4211954  
Email: [info@moste.gov.np](mailto:info@moste.gov.np)

**Recommendations, from a public interest, NGO perspective, on reducing and eliminating human sources of mercury:**

Following are the sector specific recommendations from a public interest NGO perspective on reducing and eliminating human sources of mercury:

- A. For Government (Environment, Health and Information and Communication Ministry)**
- Effective legislative and institutional frameworks to deal with mercury pollution and abatements.
  - Effective implementation of formulated Act, Regulations, Plans, Policies and standards.
  - More research on the impact of mercury on public health, aquatic animals and environment.
  - Impose bans on of mercury based products, chemicals and equipment as well as mercury based practices.
  - Market monitoring and import regulation
  - Bio monitoring of mercury ( human and animals)

- Mass awareness and capacity building

**B. For General Hospital/Clinics**

- Shift to mercury free health care services by replacing all mercury based products, practices and equipment.
- Environmentally sound health care waste and mercury waste
- Change in attitude and promote the mercury free products and practices.

**C. For Dental Hospital and Clinics**

- Stop using mercury in dentistry immediately.
- Provide and promote mercury free dental services

**D. For Medical College (General medicine and Dental treatments)**

- Revise Curriculum and update new content on safer alternatives
- Provide alternative knowledge on restoration and filling materials
- Increase awareness raising activities
- Conduct bio monitoring of mercury in health care professionals (Doctors, Nurses, Paramedical, laboratory personnel), waste handlers and even vulnerable populations such as patients, people with dental fillings, fish eating population etc.
- Bio monitoring of mercury on aquatic animals such as fish and others.
- Indoor air monitoring of mercury to assess the status of the occupational exposures.

**E. For Individual Dental and/or Medical practitioners**

- Change in practise from mercury based to safer alternatives
- Empathetic approach with long term health benefit.
- To provide the information clearly about the effect of mercury to the consumer.
- Educate the patients and people
- Promote and practice mercury free dentistry
- More research and documentation of the mercury poisoning cases and other association diseases.

**F. Research based organization**

- More qualitative and quantitative research for various organizations
- Mass awareness about mercury and its impacts evidence based
- Research to find out safer alternatives that are affordable for general public.

**G. For Business Communities (Dental/Medical/Surgical etc. Suppliers)**

- Import, sale and distribute mercury free alternatives
- Promote and practice environment and public health friendly business
- Raise awareness and contribute to the researches.

**H. For NGO and INGOs**

- Funding, awareness campaign, research, advertisement or promotion and advocacy for the protection and promotion of human health and environment from ill effect of mercury.

**I. For Media**

- Contribute to the wider information dissemination on mercury, its impacts and ways to prevent exposure and getting affected.
- Increase media coverage and in depth research and evidence based news articles.
- Promote the safer alternatives and best practices.

**J. For Individual Public**

- Self aware regarding the education about mercury and its toxicity and other health care services.
- Raise awareness and promote safer alternatives.
- Keep asking the government, health care providers about the impact and uses of mercury and ask for alternatives.
- Report to the concerned authorities any malpractice, misinformation provided by the health care providers.
- Report and get regularly tested and treated about any health complications of mercury and associated products and practices.
- Keep mercury waste separate from other waste streams.
- Keep all the bills and receipt of any medicine and medical treatment received so as to use for the compensations in case of any associated health complications.

**Detail any changes from the original project plan:**

The preparation and production of the Mercury Convention in Nepali language has been done but not disseminated because the law makers are not scheduled to meet during the project period.