



Ontario Public Health Association
 l'Association pour la santé publique de l'Ontario
 Established/Établi 1949

The mission of OPHA is to provide leadership on issues affecting the public's health and to strengthen the impact of people who are active in public and community health throughout Ontario.

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Constituent Societies

Association of Ontario
 Health Centres (AOHC)

Association of Public Health
 Epidemiologists in Ontario (APHEO)

Association of Supervisors of
 Public Health Inspectors of Ontario
 (ASPHIO)

Canadian Institute of Public Health
 Inspectors (Ontario Branch) (CIPHIO)

Community Health Nurses'
 Initiatives Group (RNAO)

Health Promotion Ontario (HPO)

Ontario Association of Public
 Health Dentistry (OAPHD)

Ontario Association of Public Health
 Nursing Leaders, (OAPHNL)

Ontario Dietitians in Public Health
 (ODPH)

Ontario Society of Physical Activity
 Promoters in Public Health (OSPAPPH)

Charitable Registration
 Number 11924 8771 RR0001

January 8, 2017

Sharon Lee Smith
 Associate Deputy Minister
 Hepburn Block 11th FL
 80 Grosvenor St, Toronto, ON
 M7A 1R3

Dear Sharon Lee Smith,

RE: Growing Demand for Placental Encapsulation Services in Ontario

I am writing on behalf of the Ontario Public Health Association (OPHA)'s Reproductive Health Workgroup to express concern over the growing public demand for and commercialization of placental encapsulation services.

OPHA has established a strong record of success as the voice of public health in Ontario. We are a member-based, not-for-profit association that has been advancing the public health agenda since 1949. OPHA provides leadership on issues affecting the public's health and strengthens the impact of those who are active in public and community health throughout Ontario. As members of OPHA, our Reproductive Health Workgroup has a number of subject matter experts that advocate for accessible and equitable reproductive health services and supports across the province to better meet the physical, emotional and psychosocial needs of all individuals in their reproductive years. The workgroup is made up of a variety of disciplines and organizations, with many from Public Health Units across the province.

In Ontario, we have seen a growing interest in placental encapsulation, which involves dehydrating and grinding human placental tissue into pills or mixing it with alcohol to create a tincture for consumption by women, and in some cases their babies, in the postpartum period. The number of individuals and businesses in Ontario offering fee-based placental encapsulation services is also expanding. This service involves the placenta being prepared in either the family's home kitchen using the equipment provided by the preparer or transported to the preparer's home and returned to the family once complete. Handling and preparation of human tissue is done in home kitchens possibly with shared equipment, such as food dehydrators, without any inspection, licensing or monitoring for proper infection control practices or product safety.

Public interest in placental encapsulation has surfaced due to the promotion and belief by health care advocates that it positively impacts postpartum adjustment

and mood, boosts the immune system, and increases milk supply. The scientific evidence supporting these purported beliefs is currently lacking. A study by Coyle et al (2015) states that further research on the motivations of individuals engaging in the consumption of human placental tissue (also referred to as placentophagy), and the efficacy and risks of this practice are needed. Furthermore, there are no regulations in place for this commercial service. Since placental encapsulation involves the handling of human tissue and its preparation in home environments for commercial distribution, OPHA has serious concerns with the safe ingestion of the product due to infection control oversights.

Under the Food Premises Regulation in Ontario, the Ministry of Health and Long Term Care (MOHLTC) and Public Health Units are responsible for monitoring the safety and quality of food for human consumption. It is unclear to us under whose jurisdiction these services fall and we seek clarity about which regulatory and enforcement bodies are responsible for the safety and monitoring of this commercial practice. We feel this issue requires attention and a coordinated response.

While more research is needed in the area of possible benefits and harms of placental encapsulation, we feel that action is necessary in the interim to inform health professionals and the public of the potential safety concerns, such as risk of infection, and the lack of scientific research to support current claims of benefits of this practice.

Given the vulnerable nature of the population affected by this practice, we urge the MOHLTC to take this concern forward to those who are responsible for the monitoring of commercial practice and advocate for the development of a guidance statement for health professionals and the public that clarifies:

- the current lack of evidence of benefit to the practice;
- the potential contamination and infection control risk; and,
- where to get more information or report concerns.

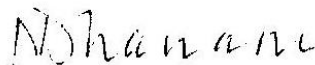
The OPHA Reproductive Health Workgroup looks forward to connecting with the Ministry of Health and Long-Term Care to provide any support needed in moving this work forward.

Thank you for your attention to this matter.

Sincerely,



Pegeen Walsh
Executive Director, OPHA



Neshma Dhanani
Chair, Reproductive Health Workgroup

References:

Coyle CW, Hulse KE, Wisner KL, Driscoll KE, Clark CT. Placentophagy: therapeutic miracle or myth? Arch Womens Ment Health (2015) 18:673–680.