

IDEA Conference Call of the Communication Task Force

Wednesday, June 4th, 2014 from 3:00pm to 5:00pm (Brussels Time)

Final Minutes

Participants: Hans Bender (Chairman), Michèle Elbaz (Chanel), Peter Griem (Symrise), Maya Krasteva (L'Oréal), Fred Lebreux (IDEA Management Team), Florian Schellauf (Cosmetics Europe), Scott Schneider (Firmenich), Matthias Vey (IDEA Management Team).

1. Adoption of the agenda

The IDEA Management Team welcomed the participants and went through the agenda, which was adopted such as provided.

No dermatologists could join this call and the group recognized that the conclusions drawn during this call might be inadequate. Therefore, the minutes of this call will be shared with dermatologists for review and feedback.

2. Antitrust statement

The IDEA Management Team reminded the constraints of the antitrust law to the participants. All agreed that there shall be no discussions of agreements or concerted actions that may restrain competition. This prohibition includes the exchange of information concerning individual prices, rates, coverages, market practices, claims settlement practices, or any other competitive aspect of an individual company's operation. Each participant is obligated to speak up immediately for the purpose of preventing any discussion falling outside these bounds.

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3. Objective

The participants agreed that the main objective of this group is to arrive at a commonly accepted information exchange procedure, which enables an improved communication between the industry and the dermatology community. This communication would be two-sided:

- **From the industry to the dermatologists**: provide pure reference materials and fractions of fragrances in order to facilitate the diagnosis of contact dermatitis
- From the dermatologists to the industry: provide the result of clinical testing in order to feed the risk management process.

An important other objective of this group is, via the establishment of meaningful communication procedures, to hopefully prevent fragrance allergens issues from becoming public health problems as it happened with HICC. If information can be exchanged quickly and efficiently then suitable corrective risk management measures can be implemented before a fragrance allergen really becomes a problem.

4. Identification of the causes of an allergic reaction to a fragranced consumer product (sharing input samples)

A process describing how samples should be requested by dermatologists and provided by the industry has already been established and is published in the Flavour and Fragrance Journal¹. This article also gives guidance on how the industry should prepare fractions of analyzed fragrances.

The group regarded this document as well written but too general and proposed to make it more specific in order to better match industry's needs. For instance, the document should explain in details how fractions should be prepared.

ACTION: The article will be reviewed and made more specific where this is needed. Then it will be given for review to the dermatologists who are involved in the IDEA project and resubmitted to Contact Dermatitis.

The biggest issue that the industry has to face is the quasi-absence of sample requests from the dermatology community. The group agreed that dermatologists are not sufficiently aware of this procedure, partly because the article is published in a journal not read by the dermatologists (Contact Dermatitis was approached but they refused to publish this article). There was a consensus that more efforts should be done by the industry to advertise the procedure and its benefits. However, and beyond this communication aspect, the group feared that most of dermatologists do not get involved in follow-up

¹ Identification of the causes of an allergic reaction to a fragranced consumer product, P. Cadby, G. Ellis, B. Hall, C. Surot and M. Vey, *Flavour Fragr. J.*, **2011**, *26*, 2-6.



testing by lack of time or experience and simply recommend the avoidance of perfumed products when patients react to FMI and/or FMII².

Most patch test results are obtained by testing FMI, FMII and individual allergens and consumer products are not always tested and, when tested, the patch test results are frequently negative. To do a follow-up testing, a product used by the consumer must be patch test positive. Only in this case can the ingredients of the product be requested from the respective company. Some clinics in Europe conduct follow-up clinical investigations with common individual fragrance allergens (26 fragrance allergens that have to be labelled when used in cosmetics in Europe) and a very few numbers of European clinics exchange with the industry and can then patch-test a broad range of individual fragrance allergens but most do not. The reasons might be numerous as this follow-up testing is usually time-consuming, costly and unpleasant/cumbersome for the patient*. The patient may need to come 12 or 15 times to the dermatologist before a perfume ingredient is identified as causal. Additionally, it was pointed out that the teams of dermatologists in hospitals are usually quite limited compared to the daily number of patients to examine and most of dermatologists have no time for follow-up activities (which imply a lot of administrative tasks).

A relevant remark was that the procedure is too long and this could explain why the cosmetic industry only receives a limited number of requests. In effect, the patient has to await several months to figure out to which allergic he/she is allergic and he/she may get out of patience before the end of the procedure.

Dermatologists associations should be approached on that matter and events like the ESCD congress might be appropriate venues to inform the dermatology community about the benefits of testing individual fragrance ingredients.

Additionally, it was reminded that this initiative aims to protect consumers and therefore consumers should get more involved in the process. The patient has a right to know to which substances he/she is allergic and grass-rooting campaigns could be useful to raise consumers' awareness. A website may be developed to this end and, why not, a section of the IDEA website. The EU Commission is used to this kind of initiatives (e.g. "ex-smokers are unstoppable") and might want to play an active role on this issue.

5. Communication of the causes of an allergic reaction to a fragranced consumer product (sharing output clinical data)

The industry needs to get early feedback on clinical investigations carried out by the dermatologists with provided samples. A rapid understanding of a problem would indeed help to take corrective actions on time and then avoid the potential spread of an issue. Consequently, the group agreed that the article

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² FMI = Fragrance Mix I (α -Amyl cinnamaldehyde, Cinnamaldehyde, Cinnamic alcohol, Eugenol, Geraniol, Hydroxycitronellal, Isoeugenol, Oak moss), FMII = Fragrance Mix II (Citral, Citronellol, Coumarin, α -Hexyl cinnamaldehyde, Farnesol, Lyral).



discussed above should be reviewed in the light of this two-sided dialogue and the new article should be made of four parts:

- A process description of how samples should be requested by dermatologists and prepared by the industry.
- A guidance of how dermatologists should contact the industry to get its support.
- A procedure on how the result of clinical investigation should be shared with the industry.
- A process description of how risk management measures should be taken and implemented to correct problematic situations.

6. Practical implementation

The number of dermatologists who really do patch-test being relatively small, it was suggested that dermatologists are informed about this initiative on a one-to-one basis.

Technological means (website, blog, Twitter account, etc.) should also be developed to ensure that dermatologists can easily obtain up-to-date technical but also contact information on follow-up testing of fragranced products.

7. Next meeting

An open call for interest will be resent to dermatologists who are involved in the IDEA project along with the minutes of this call. Then a follow-up conference call or a meeting will be scheduled.

Preparation, 16/06/2014 (F. Lebreux, IDEA Management Team) Review, 07/07/2014 (IDEA Communication TF)

- * Example of patch testing for fragrance allergy
- 1. Patch testing of standard series, additional series + two patch test readings
- 2. Product testing + 2 patch test readings (may be done during step 1)
- 3. If the product is positive: Request of product ingredients and ingredient patch testing + 2 patch test readings
- 4. If the perfume is positive: Request of perfume ingredients and perfume fractions patch testing + 2 patch test readings
- 5. If a fraction is positive: Request of fraction ingredients and further patch testing + 2 patch test readings Step 5 may be repeated several times.