

Ethanol under the BPR: preventing a disproportionate decision with major public-health impact

Call for support

What is happening?

A Working Group of the European Chemicals Agency (ECHA) under the EU Biocidal Products Regulation (BPR) has recommended classifying **ethanol** (the most widely used disinfectant in healthcare and public hygiene) as a **Category 1A carcinogen and reproductive toxicant**.

If approved by Member States, this would **ban all public uses and severely restrict professional uses**, despite the absence of new scientific evidence. A decision of this magnitude is now moving toward the Biocidal Products Committee (BPC) **on the 26th November 2025**, and Member State intervention is urgently needed.

Why this issue matters?

Ethanol is the most widely used and trusted disinfectant in Europe. It is essential for:

- **hospital hand rubs,**
- **infection control in schools, shops and public spaces,**
- **food hygiene,**
- **veterinary and farm biosecurity measures (incl. bird-flu control).**

A strict and scientifically unwarranted hazard classification would have immediate, real-world consequences:

- **No more hand sanitiser in shops or public buildings.**
- **Pregnant nurses and pregnant workers barred from using ethanol-based disinfectants.**
- **No ethanol disinfection available on farms during animal disease outbreaks.**
- **Hospitals forced to rely on less effective alternatives.**

There is no equivalent substitute for ethanol in these essential uses.

What the science show:

The latest OECD guideline studies and the evaluating authority's conclusions show:

- **Ethanol is not mutagenic.**
- **There is no evidence justifying Category 1A carcinogenicity or reproductive toxicity.**
- **Risk assessments identified no unacceptable risks for any user group.**

The current proposal relies largely on **evidence from alcohol abuse**, which is not relevant to controlled use in disinfectants. The ECHA expert group **did not reach consensus**, indicating scientific uncertainty.

Why this requires political attention

A misapplied classification would create:

- major disruption in hospitals and public-health systems,
- increased infection risks,
- weakened pandemic preparedness,
- supply-chain and workplace consequences far beyond the biocides sector.

This is **not a technical decision**: it is a **public-health and political issue**, requiring proportionality, scientific consistency, and EU-level coherence.

Call for action by Member States

1. Do not endorse the current Working Group recommendation

Avoid approving the proposal to classify ethanol as a Category 1A carcinogen and reproductive toxicant for biocidal use.

2. Refer hazard assessment back to the appropriate CLP forum (RAC)

Ensure the correct technical process applies.

3. Require a full impact assessment

Prior to any classification decision, as required under Article 75(1)(g) BPR.

4. Recognise that

- General public use **cannot legally** continue under a CMR 1 classification
- Derogation mechanisms are not viable for routine, essential hygiene applications, but also in case of health crisis

5. Participate actively in the next steps

*The **BPC Plenary will take place on 26 November 2025 and Member States will have 7 days to submit a Minority Opinion.***

This file requires immediate political attention.

A disproportionate classification of ethanol would undermine Europe's infection-control, public-health resilience, and regulatory coherence, all without a scientific basis. Member State leadership is essential to ensure a responsible and proportionate outcome.

Last but not least, we would also like to draw your attention to a joint statement co-signed by 1,000 associations, companies, organisations, and individuals. You will find it here:

<https://aise.eu/handsupforethanol/act-now-future-ethanol-based-biocidal-products/>