Caucasian women. Although obstetrics-gynecology providers are more concerned (rightfully) with medical devices and pharmaceuticals, there have been numerous cosmetics-related controversies in women's health. Talc-containing baby powders remain inconclusively linked to ovarian cancer, and consumers continue to voice concern regarding the carcinogenic risks of parabens. The investigation of a haircare product with the distinction of having the most consumer complaints (>1200) ever collected by the Food and Drug Administration (FDA) is still ongoing after 3 years. Although greater awareness surrounding the chemical risks within cosmetics is needed, providers can participate directly in improving cosmetics safety through direct reporting to the FDA.

The FDA first made the Center of Food Safety and Applied Nutrition Adverse Event Report System (CAERS) publicly available in 2016. To increase broader transparency, the database includes provider and consumer cosmetics-related adverse event reports from 2004–2016. Our recent publication revealed a strikingly low number of adverse event reports per year (<400). Although the gender of the reporter was available (women reporters predominated), the data had limited utility because key details such as ethnic background, concomitant product use, and medical history were unavailable.

In the United States, cosmetics regulation has remained largely unchanged since the Food Drug and Cosmetics Act first passed in 1938. Unlike pharmaceutical and medical device manufacturers, cosmetics makers are not obligated to fully concerning. A recent epidemiologic study demonstrated a differential risk of estrogen–receptor–positive breast cancer with darker hair-dye products that are used more often by African American women compared with Caucasian women. Although obstetrics-gynecology providers are more concerned (rightfully) with medical devices and pharmaceuticals, there have been numerous cosmetics-related controversies in women's health. Talc-containing baby powders remain inconclusively linked to ovarian cancer, and consumers continue to voice concern regarding the carcinogenic risks of parabens. The investigation of a haircare product with the distinction of having the most consumer complaints (>1200) ever collected by the Food and Drug Administration (FDA) is still ongoing after 3 years. Although greater awareness surrounding the chemical risks within cosmetics is needed, providers can participate directly in improving cosmetics safety through direct reporting to the FDA.

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to forward consumer complaints to the FDA, which leads to widespread underreporting. The FDA has no authority to mandate recalls of cosmetics, and cosmetic manufacturers are not required to register with the FDA. Despite a global market that has exceeded $400 billion, the understaffed Office of Cosmetics and Color has an annual budget of only $13 million (US). Currently proposed legislation, the Personal Care Products Safety Act, in the Senate would make manufacturer reporting mandatory, require FDA registration, and broaden the FDA’s authority over cosmetics. Until then, the potential of CAERS as a useful epidemiologic tool for cosmetics safety depends on the voluntary participation of obstetrics-gynecology providers.

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REFERENCES

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