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,1 the understaffed Office of Cosmetics and Color has an annual budget of only $13 million (US).4 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

REPLY

The submitted letters by Berger1 and Walter et al2 follow up on important issues of regulatory gaps in cosmetic oversights that were addressed in our commentary.3 We concur that there is need for increased attention and funding to broaden Food and Drug Administration (FDA) authority over cosmetics. In addition, Walter et al2 point to another useful avenue for clinician involvement through the Center for Food Safety and Applied Nutrition Adverse Event Reporting System maintained by the FDA. We agree that clinicians can increase transparency of adverse events from beauty product use by making reports to the system when they encounter relevant cases. However, while consumer education is an ongoing important avenue for consumer awareness given the gaps in oversight for chemicals used in the manufacture of beauty products, we see critical limits to consumer-facing efforts in the absence of larger-scale policy interventions.

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