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**Subject: Jordan's Measures for the transition to Mercury-Free Dentistry  
(Information on Non-Mercury Alternatives to Dental Amalgam in Jordan)**

Dear Minamata Convention Secretariat;

I hope you are doing well, healthy and safe,

After consultation with H.E. Dr. Mohammed Khashashneh/ Acting Secretary-General of the Ministry of Environment/ Jordan, regarding the Jordanian efforts to achieve the transition from dental amalgam to non-mercury alternatives, where these efforts can be contributed with the Asian and Pacific countries' measures, and following the COP3 decision related to the Dental Amalgam, I would like to highlight some important issues in this regard in Jordan:

Jordan seeks to achieve the transition from dental amalgam to non-mercury alternatives because these non-mercury alternatives are available, feasible, and beneficial to health and the environment. Non-mercury alternatives are available, as proven by the many dentists (and entire countries) that rely on them exclusively.

A 2019 survey found that Jordanian dentists are already using more non-mercury composite than dental amalgam.<sup>[1]</sup> Also, in Jordan, there is a national health insurance program that covers dental care at a modest cost, so it will be economically feasible for all patients to receive non-mercury alternatives.

Non-mercury alternatives are beneficial to health and environment, where the transition from dental amalgam to non-mercury alternatives is particularly important in Jordan because, as our Minamata Initial Assessment found dental amalgam is one of the sources categories that made the largest contributions to mercury inputs in Jordan.[\[2\]](#)

And because Jordan is seeking to phase down the use of dental amalgam in a phased manner, the Jordanian Ministry of Environment addressed all relevant authorities in dentistry to work on the phase-down of using dental amalgam and move towards the use of Non-Mercury Alternatives.

The Jordanian Dental Association and the Ministry of Health were addressed by the Ministry of Environment to do so, in addition to universities that teach dentistry, so that students will be taught the alternative non-mercury materials used in dental fillings instead of the dental amalgam, where Ministry of Environment will support the efforts to accelerate the phase-down of dental amalgam containing mercury.

It is worth to be mentioned that Asia-Pacific the world's largest region both in population and in size is going through the transition to mercury-free dentistry. In Asia are seven of the 10 most populous nations on earth, where Asia is both large population states but also small population states, particularly in the Pacific Island region. Among these diverse countries, cultures, and governments, intense interest exists in a rapid transition to mercury-free dentistry among which is Jordan.

Also, it is very important to benefit from the experiences of the countries of Asia and the Pacific in this field, for example, Asians and Pacific Islanders favor the transition to mercury-free dentistry for many reasons, including:

- Fish is a major source of food, and dental mercury methylation in the fish can permanent damage the developing brains of children eating the fish, or the developing brains of babies nursing from women eating fish, or in the womb from pregnant women eating fish.
- Waste facilities for dental amalgam are not well-developed in Asia, and it would be foolhardy to spend money on waste management instead of on amalgam elimination.
- A lack of storage space exists for island states – again, making the focus source reduction, that is amalgam elimination.
- In a workplace, the risk from mercury vapors is substantial to dental workers in amalgam-using clinics and hospitals.

- Dental amalgam is not modern dentistry; it is tooth unfriendly, requiring removal of good tooth matter. The alternatives like composite and ionomers are modern, non-polluting, and tooth-friendly.

Therefore, the use of non-mercury alternatives instead of dental amalgam will eliminate the source of this pollution, producing both environmental and health benefits, for example, regarding the end of amalgam use for the nation, Nepal, Philippines, Bangladesh, Japan, and New Caledonia made great efforts some are in the phase-out of dental amalgam use or stopping teaching amalgam to dental students or and others are in banning amalgam use or in stopping use of amalgam for children, pregnant women, and breastfeeding women. On the other hand, some countries made great efforts regarding the end of amalgam use in key sectors, such as Pakistan, Vietnam, Indonesia, India, and Bangladesh.

In this regard, the important role of the local community in assisting in these efforts cannot be forgotten. Therefore, the Jordanian Ministry of Environment works in cooperation with the NGOs to achieve its objectives in the transition to Mercury-Free Dentistry. Also, the activities of civil society in this regard can also be found in many countries, such as India, Vietnam, and Bangladesh.

We're looking forward to continuing working with you for the benefit of protecting our environment and health from exposure to different sources of mercury including dental amalgam mercury-containing.

Sincerely yours,

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[1] *Has the implementation of the Minamata convention had an impact on the practice of operative dentistry in Jordan?*, <https://pubmed.ncbi.nlm.nih.gov/30282511/>

[2] Minamata Initial Assessment, <http://www.mercuryconvention.org/Portals/11/documents/MIAs/Jordan-MIA-2018.pdf>, page 19