

Microplastics and Pharmaceuticals To Be Added to List of US Drinking Water Contaminants

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STORY AT-A-GLANCE

- › Microplastics and pharmaceutical residues are now officially recognized as widespread contaminants in drinking water, meaning your daily exposure comes from routine habits like drinking tap water and using plastic products
- › Federal regulators have shifted from tracking single chemicals to targeting entire groups of contaminants, signaling that water safety now includes substances that were previously overlooked
- › Scientists confirm plastic particles accumulate throughout your body, but current tools still struggle to measure how much is present or which types cause the most harm
- › New U.S. research efforts are focused on creating tests that measure your personal microplastic burden, giving you a way to track exposure and evaluate whether your reduction interventions are working
- › You can lower your exposure immediately by improving your water filtration, reducing plastic use, and limiting unnecessary pharmaceutical intake so less contamination enters your body and the environment each day

For years, concerns about microplastics and pharmaceutical residues in drinking water were treated as fringe worries; the kind of thing that made headlines briefly before fading from public attention. That era is over. Federal agencies are now formally

acknowledging that these substances are widespread, difficult to remove, and increasingly present inside the human body. What was once speculative is now a matter of official policy and funded research.

The question is no longer whether these contaminants exist in your water and your body; it's what you can actually do about it. What makes this moment different from previous warnings is the scope of what's being confirmed. Regulators aren't flagging a single chemical or an isolated incident; they're identifying entire categories of contaminants that enter your body through ordinary daily routines: the water you drink, the food you eat, and the products you use.

At the same time, scientists are confronting an uncomfortable truth about their own limitations. The tools to precisely measure what's accumulating inside you, and what it's doing once it gets there, are still being developed. That gap between what's known and what can currently be measured is driving an urgent push at the federal level, one with real consequences for how your water is monitored, regulated, and ultimately treated.

The Government Just Redefined What Counts as Safe Drinking Water

An announcement from the U.S. Environmental Protection Agency (EPA) on April 2, 2026, introduced a new draft of its Sixth Contaminant Candidate List, a tool used under the Safe Drinking Water Act to identify substances that are not yet regulated but are known or expected to show up in public water systems.¹

This update stands out because it identifies entire groups of contaminants, including **microplastics** and **pharmaceuticals**, as priorities. That shift changes how your water is evaluated going forward, because regulators are no longer looking at isolated threats but entire categories that affect daily exposure.

The agency framed this as an effort to determine both how much of these substances reach you and what they actually do inside your body; questions that, remarkably, remain unanswered despite decades of plastic use. In simple terms, they're trying to answer

two key questions: how much of these substances you're exposed to, and what that exposure does inside your body. Until those answers are clear, the focus remains on tracking, measuring, and building the evidence needed to act.

- **Microplastics and pharmaceuticals are now treated as priority threats** – For the first time in the program's history, the EPA placed both microplastics and pharmaceuticals into high-priority contaminant groups.

Microplastics are tiny plastic particles that form as larger plastics break down, while pharmaceuticals refer to drug residues such as antibiotics, hormones, and antidepressants that enter water through human waste and improper disposal. These substances move through treatment systems and remain in the water you drink, meaning exposure is ongoing rather than occasional.

- **The agency responded directly to public concern about hidden contaminants** – The EPA made it clear this move reflects widespread demand for answers about what's in drinking water. Administrator Lee Zeldin stated, "For too long, Americans have vocalized concerns about plastics and pharmaceuticals in their drinking water. That ends today."

That statement marks a shift toward transparency and accountability, where contaminants that were once ignored are now being actively tracked and studied.

- **Hundreds of drug compounds are now being evaluated for health risk** – Alongside adding pharmaceuticals as a group, the EPA released human health benchmarks for 374 different drugs found in water systems. A benchmark is simply a safety reference point; it helps local water systems determine when a substance reaches a level that requires action. This gives your local water authority a measurable way to assess risk instead of guessing or ignoring the issue altogether.
- **The list includes multiple contaminant groups, not just plastics and drugs** – The updated list also includes per- and polyfluoroalkyl substances (PFAS), often called "**forever chemicals**," along with disinfection byproducts, 75 individual chemicals,

and nine microbes. This broader scope shows that water contamination is a layered problem involving industrial chemicals, treatment byproducts, and environmental pollutants all interacting at once.

- **This list isn't a regulation yet, but it drives what happens next** – The Contaminant Candidate List does not immediately change your water quality, but it determines what gets studied, funded, and eventually regulated. Think of it as the starting point in a pipeline. Once a contaminant is on this list, it becomes eligible for deeper investigation and future limits. That means today's "candidate" contaminants often become tomorrow's regulated hazards.

The EPA opened a 60-day public comment period and will consult its Science Advisory Board before finalizing the list, with a target decision date of November 17, 2026. This process allows input from scientists, policymakers, and the public, shaping how aggressively these contaminants are addressed in future regulations.

Scientists Are Building a Way to Measure What's Inside Your Body

From the U.S. Department of Health and Human Services (HHS), a new \$144-million initiative called the Systematic Targeting Of MicroPlastics (STOMP) was launched to solve a core problem: nobody has had a reliable way to measure how much plastic is inside your body.²

The program focuses on building tools that track, study, and remove microplastics and **nanoplastics** – particles so small they cross the blood-brain barrier and the placenta, reaching organs that larger fragments can't. Without measurement, there's no way to track progress or know whether exposure is rising or falling over time.

- **The focus is not just exposure but what happens after it enters your body** – Researchers involved in STOMP are working to understand how these particles move through different organ systems and what they do once they get there. The

agency made it clear that plastics aren't all the same; each type behaves differently, interacts with tissues differently, and carries different levels of harm.

This means your personal exposure is not just about how much plastic you encounter, but what type it is and **where it ends up inside you**.

The research highlights that certain groups, including pregnant women, children, people with chronic disease, and workers with high exposure, face higher risks from accumulation. That distinction shows this is not a one-size-fits-all issue. Your lifestyle, environment, and health status influence how much exposure you carry and how your body responds.

- **The biggest gap right now is inconsistent and unreliable measurement** — Scientists acknowledged that current lab methods produce conflicting results, which makes it difficult to compare studies or draw firm conclusions. One lab might detect a certain amount of microplastics while another lab finds something completely different in the same type of sample. That inconsistency slows progress and keeps both researchers and the public in the dark.
- **New testing tools are being designed to give you a measurable number** — One of the program's key goals is to create a clinical test that measures your individual "**microplastic burden**," meaning the total amount of plastic particles in your body. Once you have a number, you can follow changes over time, compare risk levels, and see whether interventions actually reduce your exposure.
- **Researchers are ranking which plastics matter most for your health** — The program is also building a system to classify plastics based on how harmful they are biologically. This ranking system helps answer a key question: which types of plastics demand immediate attention and which are less urgent. Instead of treating all plastics equally, this approach focuses effort where it has the greatest impact on health outcomes.

- **The program is structured in two phases to move from understanding to action –** Phase one focuses on measurement and mapping, identifying where plastics accumulate and how they interact with the body. Phase two focuses on removal, using the data from phase one to design targeted strategies that eliminate harmful particles. This step-by-step structure gives you a clear path: first identify the problem, then remove it in a precise way.

With reliable testing and classification systems in place, public health agencies and health care providers gain the ability to guide decisions, monitor progress, and evaluate interventions over time. This transforms the issue from something abstract into something measurable and manageable, giving you a clearer path to take action.

You Can Reduce Your Exposure to Microplastics and Pharmaceutical Residues Starting Today

Federal programs will take years to produce regulated limits and clinical tests. In the meantime, your exposure continues every day. The good news is that your most significant sources of exposure – your water, your food packaging, and your medication habits – are largely within your control right now. That's why I wrote my book, [**"Microplastics Cure," available for preorder now.**](#)

In it, I explain how this invisible exposure affects your long-term health, why your body struggles to clear plastics once they accumulate, and how daily habits either worsen or reduce that burden.

The book lays out clear, science-backed steps you can take now to lower exposure and support your body's natural defenses. If you're feeling overwhelmed, focus on one step at a time. Treat this like a simple system you improve week by week. The goal isn't perfection. The goal is steady reduction.

- 1. Install a high-quality water filtration system that targets microplastics and pharmaceuticals** — Your drinking water is one of the most direct exposure routes, so focus on that first. Look for a water filtration system designed to remove fine particles and chemical residues. If you're using standard pitcher filters, understand they typically don't address these newer contaminants. A properly designed system gives you a daily baseline of cleaner water.
- 2. Stop adding to the problem with plastic-heavy food and drink habits** — Every time you heat food in plastic, drink from disposable bottles, or store meals in plastic containers, you increase your exposure. Switch to glass, stainless steel, or ceramic wherever possible. If you rely on convenience foods, start with one swap; replace your most frequent plastic use first and build from there.
- 3. Reduce unnecessary pharmaceutical use** — A large portion of drug contamination starts with everyday use and disposal. Look at where medications show up in your routine. If you reach for over-the-counter drugs regularly, start by addressing the root issue — sleep quality, diet, stress, and movement.

Build a foundation that lowers your reliance on medications so they become a targeted tool, not a daily habit. When you do need them, use them intentionally and dispose of unused medications through proper take-back programs, not down the drain.

- 4. Support your body's ability to handle toxic load through cellular energy** — Your body isn't passive in this process. Microplastics generate oxidative stress inside cells, impairing the **mitochondria** — your cells' energy-producing structures — and reducing your body's capacity to manage toxic load. The more efficiently your mitochondria function, the better equipped your cells are to respond to this kind of chronic chemical stress.

Support mitochondrial function with consistent sunlight exposure, adequate healthy carbohydrates, and balanced nutrition, including limiting **linoleic acid** (LA), a polyunsaturated fat concentrated in seed oils like soybean, corn, canola, and

sunflower, which contributes to mitochondrial dysfunction when consumed in excess.

- 5. Replace one high-exposure habit this week and lock it in before adding another —** Instead of trying to overhaul everything at once, pick the single biggest exposure point in your routine and eliminate it. If you drink bottled water daily, switch to filtered water. If you heat food in plastic containers, replace them with glass. Focus on one change, repeat it every day until it becomes automatic, then move to the next.

This approach keeps you consistent and prevents burnout while steadily lowering your overall exposure.

FAQs About Microplastics and Pharmaceuticals in Your Drinking Water

Q: My water utility says my tap water is safe. Why should I be concerned about this?

A: Federal agencies confirm that both microplastics and pharmaceutical residues are present in public water systems. These substances come from plastic breakdown, human waste, and improper medication disposal, and they pass through standard water treatment processes, which means your exposure is ongoing.

Q: Why are regulators only now taking action on these contaminants?

A: The U.S. EPA recently added microplastics and pharmaceuticals to its Contaminant Candidate List for the first time, marking a major shift in how water safety is evaluated. This list drives future research and regulation, meaning these contaminants are now a priority after years of public concern.

Q: How do microplastics build up inside my body?

A: Plastic particles enter through water, food, and air, then move through your bloodstream and settle in different organs. Researchers from HHS report that microplastics have been detected across multiple organ systems, and scientists are still working to understand how different types affect tissues in different ways.

Q: Why is it so hard to measure my exposure?

A: Current testing methods are inconsistent, which means results vary from one lab to another. That's why a new national program is focused on developing tools to measure your total "microplastic burden," giving you a clear number that reflects how much plastic has accumulated in your body and allowing progress to be tracked over time.

Q: What's the most effective way to reduce my exposure right now?

A: Start with your water. Installing a high-quality filtration system designed to remove microplastics and pharmaceutical residues gives you immediate control over one of your biggest exposure sources. From there, reduce plastic use in food storage and limit unnecessary medication use to lower the overall burden entering your system each day.

Sources and References

- [¹ U.S. Environmental Protection Agency April 2, 2026](#)
- [² U.S. Department of Health and Human Services April 2, 2026](#)