



EAHP WORKING GROUP ON SINGLE DOSE PACKED DRUGS

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We are pleased to inform you the EAHP's policy on single dose packed drugs, which is now being presented to all parties involved, including health professionals, politicians and legislators.

The EAHP 2006 General Assembly (GA) set up a working group on single dose packed drugs and traceability as contribution by hospital pharmacists to reduce medication errors and enhance patient safety. Some systems, especially those in the UK, raise a lot of questions about what constitutes a unit dose system. Furthermore,

there are complaints by the pharmaceutical industry about additional costs.

The working group consisted of Dr Pascal Bonnabry (Switzerland), Erik Everaert (Belgium), Dr Steffen Amann (Germany) and the EAHP Executive Director, Catherine Hartmann. It was also joined by Dr Roberto Frontini from the EAHP Board.

The working group proposed a definition of unit packaging to the 2007 GA and suggested a strategy that might persuade politicians and the pharmaceutical industry to move towards unit dose blister packaging. The group presented its work at the 2007 GA. The request and a strategy to promote unit doses were put to a vote and unanimously adopted by the assembly.

Two further guest speakers presented their position and work relative to unit doses. Patrik Muff (Switzerland) described his work as part of a Council of Europe working group on medication safety. His focus was on packaging and labelling. The Council of Europe Report on the matter comes to the same conclusions as the EAHP and recommends both unit doses and clear traceability within the systems.

Arla Pochet from the French medicines agency Afssaps, presented the work her organisation is doing in the field of unit doses, citing the US as a reference and explaining the current situation in France. She also discussed the pros and cons of unit doses, concluding that they were essential to patient safety. She suggested that all parties involved in promoting and lobbying for unit doses should join forces to reach our goal.

The EAHP will continue to work on a system to supply drugs in a safe and reliable way to hospital patients.

The EAHP's request for the introduction of single dose packed drugs

To improve patient safety in drug therapy and to ensure the highest quality in medical treatment in European hospitals, the 2007 General Assembly of the European Association of Hospital Pharmacists (EAHP), demands:

- the production of single dose packed drugs from the pharmaceutical industry
- the mandatory inclusion of a bar code on each single dose.

Hospital pharmacists are also calling on decision makers, politicians and national administrations to adopt the introduction of bar-coded single dose packed drugs in national and European regulations.

A growing number of hospitals have introduced a unit dose dispensing system, in which drugs are packed for individual patients, manually in the pharmacy, or with automated dispensing machines in the pharmacy or in the ward. To improve the efficiency of these safer procedures, hospital pharmacists urge the pharmaceutical industry to supply drugs packed in single dose units. Hospitals have implemented or are implementing computerised prescription systems, which allow a final check just before the drugs are administered to patients, via a bar code system contained in the single dose pack. This final check performed electronically by comparing the prescription with the actual prepared drugs, significantly increases the patient's safety, as the human checks are not without error (performance ≈85%). These systems also improve the traceability up to the patient level, which is requested more and more by national regulations.

The EAHP demands that primary packaging precisely describes the content up to the final check at the bedside, enables easy and safe use of the drug and provides protection against environmental influences such as light, moisture, pressure and microbial contamination during transport, handling and storage.

Single dose packaging is a pack for a single application. Alternatively, perforated multiple dose blister packs that can be easily divided into single dose packs are acceptable. Each of them must contain the whole information, no further manipulation being necessary,

Hospital pharmacists also strongly advocate bar-coding single doses and recommend the use of a recognised international standard, such as the GS1 (ex-EAN) identification system for bar codes. The GS1-128 (ex-EAN-128) standard appears to be the best standard for the traceability of single dose units. Taking into account the problem of the available space, we recommend printing it as a bi-dimensional bar code (i.e. data matrix).

For ampoules and vials, the same information should be provided on a label (not engraved on the glass), with additional information regarding the total amount and volume (x mg = y mL) and the concentration of the solution (z mg/mL).

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