

Unit-dose dispensing of drugs: beware of ideas that look great at first glance!

The issue of unit-dose dispensing of drugs by pharmacists returned to the French National Assembly on 9 December for its consideration as part of the War on Waste and Circular Economy bill.

France's pharmaceutical companies fully share the goals of ensuring the proper use of drugs and reducing waste. **At the same time, they have serious reservations about unit-dose dispensing for one very simple reason: it is totally incompatible with the mandatory serialization of individual packs introduced on 9 February this year, and poses real risks to the safety and traceability of drugs at the time they are delivered to patients.**

Traceability of drugs is compromised

The requirement for the serialization of individual packs introduced by the 2011 EU Falsified Medicines Directive requires every pack of prescription-only drugs dispensed in retail and hospital pharmacies to carry a unique identification number. Scrupulously applied by pharmaceutical companies since 2019, this 'pack marking' rule, accompanied by anti-tampering devices applied to all drug packs, guarantees the authenticity of the drugs concerned and the integrity of the boxes in terms of forced opening. Over and above the cost involved in modifying manufacturing lines solely for the French market, **unit-dose dispensing would effectively render inoperative a system introduced barely a year ago with the express purpose of ensuring secure patient access to high-quality drugs.**

A pollution-generating system

Unit-dose dispensing is also an energy-hungry system that runs counter to the environmental benefits targeted by the War on Waste bill. To dispense drugs individually, pharmaceutical companies would, in practice, have to cease using a 'traditional' blister pack in favour of a blister pack with individual pre-cut sections to facilitate the task of the pharmacist in splitting the blisters. **In addition to the changes that would have to be made to packaging lines, these**

pre-cut blister packs, which will be much larger than the conventional alternative, are likely to generate 30% more aluminium and PVC waste, thereby totally contradicting the waste reduction goals advocated by the War on Waste legislation.

Leem restates the following facts:

- It is the health authorities that decide on the number of drug units per pack, and ensure that this number is matched to treatment dosage and duration.
- Any general introduction of unit-dose dispensing for the treatment of long-term diseases (there are 10 million patients with long-term diseases in France today) would be totally inappropriate, since pharmacies dispense repeat prescriptions for these drugs on a monthly basis.
- For short-term treatments, the unit-dose dispensing trial run in 2014 for 14 antibiotics dispensed through 100 French pharmacies showed no significant improvement in compliance. Other much more effective measures will emerge, including the January 2020 introduction of TRODs (tests rapides d'orientation diagnostique - rapid tests for guiding the diagnosis) for angina conducted by pharmacists. According to the French National Health Insurance (Assurance maladie) authority, 80% of the 9 million cases of angina seen annually are the result of virus infections and require no antibiotic treatment. By distinguishing viral angina from bacterial angina at an early stage, TRODs aim to limit the unnecessary dispensing of antibiotics.

Lastly, Leem is keen to stress that the main cause of waste is not packaging, but inappropriate prescribing and poor patient compliance with the treatment prescribed for them. **According to the latest figures from eco-organisation Cyclamed, which collects unused and out-of-date drugs, the quantity of medicines recycled per head by the French population was just 162 grams in 2018. This is a very long way away from the “1.5 kg of drugs thrown away each year by the French”** quoted in parliamentary debates.

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