EUROPEAN SOCIETY OF ONCOLOGY PHARMACY

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Action is urgently needed

Our society participated in the EU conference on 24th and 25th of September on workers protection from exposure to hazardous medicinal products. We also contributed to the country workshops that preceded this conference. We noted again that there remains a very large issue with work safety conditions throughout Europe, with unfortunately a big east-west divide and large areas where working conditions for nurses, doctors and pharmacy staff are still unsafe. Thus, we are eagerly awaiting the next steps from the EU to ensure good and safe working for all involved in the field of oncology. We noticed in particular, that the issue of reprotoxicity, which is highly relevant for our workforce, is not taken into account by the EU study. Moreover, we observed that the EU study that was supposed to be independent and transparent, engaged sub-contractors that are paid by medical device industries. By definition, this will compromise the outcome of the study.

For nearly a decade we have been fighting against the erroneous assumption, underpinned by interest-driven, pseudoscientific publications, that the use of plastic parts (Becton Dickinson calls them "CSTD" (Close system transfer device)) protects health workers from being affected by hazardous substances (in this particular case by cancer drugs).
I am not sure whether the requirements from us to obtain more detailed knowledge about a joint study will be included in the final report, in which the possible influence can be localized through 4 parallel investigations:

1) Active collecting of aerosols on the employee
2) Surface contamination wipe tests
3) Blood tests to identify sister Cromatid exchanges and Micronucleus
4) Urine collection to record possible excretions

The demands we have made since the beginning of the discussion based on the Quality standard (QuapoS since 1996) to ensure that safe handling of cytostatics becomes obligatory for young people and pregnant women, are not being implemented across Europe. The centralization of cytostatics preparations under clean room conditions to protect employees and patients has also not been introduced in many countries. Furthermore, the uniform label (the “yellow hand”) is currently only used voluntarily by approx. 70% of pharmaceutical companies to identify containers with corresponding contents and is still not specified by the EU.
We urge the EU to adhere to its principles for the protection of working people and to refrain from misleading actions.

Klaus Meier