

THE WMA STATEMENT ON SAFE INJECTIONS IN HEALTH CARE

Adopted by the WMA General Assembly, Washington 2002

PREAMBLE

1. According to the World Health Organization, an estimated 12 billion injections are administered worldwide each year. Of these injections, many millions are unsafe, especially those that are administered with a re-used syringe and/or needle.
2. The most common diseases acquired from unsafe injections are hepatitis B, hepatitis C and AIDS. Each year, unsafe injections account, on a worldwide basis, for an estimated:
 - 8 to 16 million new hepatitis B virus infections
 - 2.3 to 4.7 million new hepatitis C virus infections
 - 80,000 to 160,000 new human immunodeficiency virus infections
3. In many countries disposable equipment is always used in health care settings, and the major problem is the safe use and disposal of sharps.
4. In the majority of cases, physicians are involved in the prescription and/or administration of injections. Therefore they are in a prime position to bring about changes in behaviour, which could lead to the appropriate and safe use of injections.
5. Safe and appropriate use of injections is a necessary component of HIV prevention. Safe practices to prevent HIV infection also yield substantial spin-off benefits outside the HIV prevention area, such as for other infections like hepatitis B and C.

BASIC CONSIDERATIONS

6. Unsafe injections result from the overuse of therapeutic injections and unsafe injection practices. These practices include the use of unsterilized or inadequately sterilized needles, the re-use of syringes and the inappropriate and unsafe disposal of syringes and needles.
7. Safe injection practices prevent harm to the recipient, the provider and the community. Unsafe injections cause widespread harm by spreading pathogens on a large scale.

8. Physician attitudes and inappropriate practice standards may be important determinants in the overuse of "therapeutic" injections in certain countries. These are a result of the assumption that some patients only feel satisfied with a treatment if it includes an injection. Scientific evidence has shown that this assumption is incorrect. Patients prefer good communication with physicians to receiving injections. Furthermore the payment schemes in some health care systems may be structured in a way that they provide perverse incentives for unnecessary use of injections.
9. Most non-injectable medications are equivalent in action and efficacy to those which are injectable.
10. Unsafe injections are a waste of precious healthcare resources and can easily be prevented through integrated interventions. For an effective national, regional or local strategy to promote safe injections, the following primary elements are necessary:
 - 10.1 The use of injection should be limited to suitably trained health care professionals and trained lay persons;
 - 10.2 Behaviour change among patients and health care professionals to decrease injection overuse and achieve injection safety;
 - 10.3 The availability of necessary equipment and supplies, where possible disposable;
 - 10.4 The appropriate management of sharps waste.
11. Increased availability of appropriate injection equipment and supplies, where possible disposable, increases the safety of injections without necessarily increasing the number of unnecessary injections.

RECOMMENDATIONS

12. That National Medical Associations cooperate with their national governments or other appropriate authorities to develop effective policies on the safe and appropriate use of injections. These policies would demand appropriate financing and include the assessment of current injection practices and the development of an integrated plan. Such a plan should support the provision of adequate supplies of injection equipment, measures to enforce proper standards of sterilisation where needed, the management of sharps waste and training programs to deter the overuse of injections and promote safe injection practices.

13. That physicians worldwide are urged to:

- 13.1 Prescribe non-injectable medication rather than injectable medication whenever possible and promote the use of non-injectable medication with patients and their colleagues;
- 13.2 Use injectable medications only if safe and appropriate and administer injections in a way that does not harm the recipient, the provider and the community;
- 13.3 Ensure that only waste disposal containers for sharp objects be used to safely dispose of used surgical material (e.g. needles, blades, etc.), and that the covers of sharp instruments not be re-utilised.
- 13.4 Raise awareness regarding the risks involved with unsafe injections and help bring about behaviour changes in patients and health professionals to promote safe and appropriate injections. Training in this area should emphasise that needles should not be re-sheathed.

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