New WHO global injection safety initiative

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Service Delivery and Safety Department
WHO/UNICEF/UNFPA joint statement on the use of AD syringes for immunization services

Policy on Injection Safety

All countries should use only Auto-Disable (AD) syringes for immunization injections *(WHO & UNICEF in favor of AD mechanisms triggered at the start of injection)*

Bundling Policy

Ensure sufficient numbers of AD syringes, reuse prevention reconstitution syringes and Safety boxes for each vaccine dose

Reconstitution syringes

UNICEF supplies only syringes with re-use prevention features
WHO Injection Safety programme/SIGN strategies

1. Patient Safety
   - Reduction of unnecessary injections (Advocacy, IEC, revision of list of essential medicines)
   - Eliminating reuse of injection equipment (ADs, RUPs)

2. Health Workers' Safety
   - NSI prevention (training, SIPs, sharps boxes)
   - Hepatitis B vaccination,
   - Provision of Post Exposure Prophylaxis (PEP)

3. Safety of the community
   - Safe sharps waste management
Type of intervention:

- Needlestick injuries prev – 18
- Immunization – 11
- Training IS practices - 5
- Access to disposable syr – 4
- MMIS – 4
- Waste management – 3
- Education to reduce injections – 3
- PEPFAR/PATH – 3
- Safety needles/syringes - 2
Injections worldwide - 16 billion/year

10%
Immunization injections
Most vaccines are administered by injections

90%
Therapeutic injections
Many medications can be administered orally
New WHO initiative on injection safety under the DG mandate

**Main objective:** to promote rational and safe use of injections
- Consolidate results achieved by SIGN and others
- Reduce *curative unsafe* injections
- Avoid *unnecessary* injections (when an oral option is available)

**Main outputs:**
- Global policy (with background technical work)
- Global strategy and campaign
WHO policy statement on the use of safety-engineered syringes for intramuscular, intradermal and subcutaneous injections in health-care settings

Systematic reviews on:

- The effects of use by health-care workers of syringes with a sharps injury protection mechanism
- The effects of use by health-care workers of syringes with a reuse prevention feature
- The knowledge, attitudes, beliefs, values, preferences and feasibility related to sharp injury prevention syringes and reuse prevention syringes
- **Main outcomes:** Incidence of HIV, HBV HCV infections, other blood-borne infections among HCWs and patients. Incidence of needle stick injuries in HCWs

DG launch on 17 December 2014
Target audience

- Ministers of health and finance
- National advisory bodies responsible for policy making on IS as part of a comprehensive IPC programme
- Public and private health institutions
- Professional societies
- Patients associations
- UN agencies
- International development partners
- Injection device manufacturers and their umbrella organizations
Key points for the policy document – draft (1)

- Rational and safe use of all injections worldwide is a high priority
- Reaffirmation of previously issued WHO-UNICEF-UNFPA joint statement into national policies and strategies
- Recommendation for transition to the exclusive use, when appropriate, of WHO prequalified (or equivalent) safety engineered injection devices including reuse prevention (RUPs) syringes and sharps injury protection (SIPs) devices for therapeutic injections in healthcare settings and development of related national policies
Recommendation that health systems and healthcare facilities develop standards for rational use and supply of **standard disposable syringes** for specific procedures and settings where they remain necessary (e.g. for medication reconstitution, multiple drugs mixing, nasal feeding, IV pumps, emergency settings, needle–syringe programs for people who inject drugs [PWID], etc)

Recommendation to develop and implement strategies for the **reduction of overuse of injection** according to WHO recommended components
Urging donor agencies to fund only procurement of safety engineered injection devices in all projects including injectable medications (e.g. contraceptives, vaccines, TB and Malaria programmes)

Recommendation that donor agencies financing injectable products also finance appropriate quantities of safety engineered injection devices, single dose diluents, safety boxes and the cost of sharps waste management

Strongly encouraging international and local manufacturers to switch to safety engineered injection devices production and seek PQS prequalification, while keeping the production of single use disposable syringes to meet the needs of specific procedures and programs
Key features for advocacy and global campaigning plans

- Political commitment
- Sound communication strategy
- WHO global injection safety initiative branding
- International donors' engagement strategy
- Industry engagement strategy
- Key stakeholders’ engagement strategy
- Emphasis on health-care workers’ safety, education and training
- Public awareness-raising and patient education and involvement
- Evaluation plan and indicators
Tackling the value chain as a whole...

Stakeholders:

- global policymakers
- international donors
- ministries of health
- country governments
- regulatory agencies
- NGOs
- manufacturers
- private sector suppliers
- healthcare workers
- patients
### MAIN COST-EFFECTIVENESS RESULTS

- **Benefits from Safe Injection Practices:** Total saving of $857 Mio in treatment costs globally.

- Saving of $103 Mio in distribution and waste management costs globally, as a result of the overall reduction in the total number of injections needed thanks to training and education programmes.

- *For each dollar invested in global safe injection practices in 2010, an average of $14.57 to be saved (range, $4.44 per dollar invested in EMRD to $50.72 in AMRB).*

- Average saving of $4.87 per dollar invested still achieved, even in a scenario with no reduction in the absolute number of injections used, as a result of the awareness campaigns.

- *Cost per DALY averted: $38.61*
Thank you for your attention!

Many thanks to:
• Dr Selma Khamassi
• Ms Lisa Hedman

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Web sites
http://www.who.int/injection_safety/en/
http://www.who.int/patientsafety/en/
http://www.who.int/gpsc/5may/EN_PSP_GPSC1_5May2013/en/