

Letter to the Editor: Protect Our Nurses from Unnecessary Occupational Exposure to Hazardous Drugs

Yu E*

ICU Medical Inc., Hong Kong

***Corresponding author:** Emily Yu, ICU Medical Inc, 3301, Tower 2, Enterprise Square 5, 38 Wang Chiu Road, Kowloon Bay, Hong Kong, Tel: +852 94645359; Email: emily.yu@icumed.com

Dear Editor,

I am writing in concerns in the context of occupational safety for nurses, regarding their long-term occupational exposure to hazardous drugs. Health risk of exposure to these agents include malignancy, infertility and other reproductive outcomes. The issue has raised a lot of attention since decades ago. Guidelines and recommendations have focused on how to protect staff during drug preparation from its potential harm on their health. Yet, little has been done to minimize risk for nurses who administer doses of antineoplastic drugs to patients every day.

Since its' publication in 2016, the USP general chapter <800> has arouse much discussion among healthcare professionals. It has become official in Dec 2019. It is one of the first document which has enforced that Closed System Transfer Device (CSTD) should be used during hazardous drug compounding, and must be used during hazardous drug administration, whenever dosage form allows [1]. Although USP <800> is not legally enforceable, it is time for governments to take further actions in order to improve oncology nurses' occupational safety.

CSTD, as a supplementary engineering control, not only protects healthcare professionals, but also patients. According to definition of NIOSH, CSTD "mechanically prohibits the transfer of environmental contaminants into the system, and escape of hazardous drug or vapor concentrations outside the system" [2]. Most CSTD available in market also allow healthcare professionals to operate without needle, hence prevent needle stick injury as well. Due to these benefits, this

Letter to Editor

Volume 4 Issue 4 Received Date: July 15, 2020 Published Date: July 22, 2020 DOI: 10.23880/nhij-16000225

type of devices has been widely used in the drug preparation stage in the pharmacy area. In recent years, they are gradually adopted in drug administration by nurses. CSTD serves as a step to enhance both occupational safety and patient care outcome, however, CSTD is not an acceptable substitute for any other protection measures, such as use of isolator or biological safety cabinet, and PPE.

The group of hazardous drugs include a wide spectrum of antineoplastic drugs which are used for cancer treatment. One should note that some of these drugs are also used outside the oncology unit. Education and training are needed for healthcare professionals in the context of protecting themselves from unnecessary. Nursing schools and universities should consider including the topic in their program, to promote the awareness among their students, while taking care of their patients with passion, selfprotection is equally important.

References

- 1. USP (2018) General chapter <800> hazardous drugs-handling in healthcare settings. United States Pharmacopeial Convention, pp: 2-19.
- 2. NIOSH (2018) Preventing Occupational Exposures to Antineoplastic and Other Hazardous Drugs in Health Care Settings. Cincinnati, OH: US Department of Health and Human Services; 2004, National Institute for Occupational Safety and Health.

