Question for written answer E-5907/2010
to the Commission
Rule 117
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Subject: Misuse of medicines: reducing medication mistakes by adding a smell identifying each active ingredient in tablets for safety

A large number of hospital admissions are due to the misuse of medicines – about 3 %, according to the United States Food and Drugs Administration. To a great extent these are the result of self-medication, but also of mistaking one medicine for another. Patients find most medicines difficult to distinguish, making it easy to confuse one with another. Such mistakes could be prevented by making medicines easier to identify by means of smell.

Incorporating a smell in a medicine would be a safety measure for both the general public and social groups at greater risk, such as pensioners, who use medicines more frequently[1].

Moreover since tablets do not have any identifying element specifically for blind people or those with seriously impaired vision, the incorporation of a smell as an excipient would facilitate recognition[2].

In addition to the tablet's shape, colour and imprint, its smell would be a distinctive feature and easy for patients to identify. If each active ingredient had a characteristic smell the patient would recognise it before or while taking it, and even if it were accidentally ingested could notify a medical service of the mistake, which could then treat a possible adverse reaction with greater speed[3].

1. In view of the above, does the Commission think it would be desirable to legislate on the suitablity of using smell as an identifying element in medicines?

2. Would it be appropriate to set up a committee of experts on the use of smells as a distinguishing factor in medicines, with the participation of the European Medicines Agency (EMEA)?

1 http://www.vosizneias.com/50503/2010/03/03/jerusalem-el-al-pilot-accidentally-takes-sleeping-pill-during-flight/ Bibliografía.
2 http://www.medicationreview.net/index.php/medication-error.html.
3 http://www.quic.gov/report/toc.htm.