

(English version)

**Question for written answer E-003538/25
to the Commission**

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(15 September 2025)

Subject: Environmental impact of medicines and reuse of unused cytotoxic drugs

While awareness of the environmental impact of medicines has been increasing only slowly, a few Member States have begun cooperating and sharing experiences on this issue. The challenge is that environmental concerns and problems of availability are closely linked, meaning that stricter legislation alone may not lead to the best outcome. Most environmental impacts result from medicines that are correctly used and excreted into waste water, but they also arise during production and, importantly, when unused medicines are wasted.

The Netherlands has successfully piloted a system for the reuse of unused cytotoxic drugs that are dispensed for home use. If the patient does not consume the medicines, they can be safely reallocated to another patient instead of being destroyed. Current EU legislation prohibits such reuse, but based on this pilot, Dutch healthcare experts have proposed an amendment to the EU Pharmaceutical Directive (Article 207a) to enable it.

How could the Commission support safe medicine reuse to reduce both the environmental impact and shortages without compromising patient safety?

Submitted: 15.9.2025

Answer given by Mr Várhelyi on behalf of the European Commission

(8 December 2025)

The Commission recognises the importance of ensuring availability of medicinal products to patients as well as the importance of reducing proportionately the negative environmental impact of pharmaceutical waste. The pursuit of these objectives must, however, under no circumstances compromise the safety of patients.

Member States shall ensure appropriate collection systems for unused or expired medicinal products ⁽¹⁾. The reuse of medicinal products that have already been dispensed to patients creates serious risks.

The pharmaceutical legislation ⁽²⁾ lays down rules to ensure a secure supply chain that preserves the identity, authenticity, and quality of medicinal products cease to apply once the products have been dispensed to the patient.

The above objective, as well as the objective of avoiding pharmaceutical waste, is supported by the Commission in its legislative proposals for the revision of the pharmaceutical legislative framework ⁽³⁾, notably with a framework for prescription practices and packaging requirements.

¹ Article 127b of Directive 2001/83/EC as amended by Directive 2004/27/EC of 31 March 2004.

² Regulation 726/2004 and Directive 2001/83/EC.

³ COM/2023/193 final and COM/2023/192 final.