EFA Position Paper on the need for Metered Dose Inhalers (MDI's)

Chloro-fluoro carbons (CFC's) have traditionally been the propellants used in many kinds of aerosol sprays, including inhalers. It is known that CFC's damage the ozone layer above the earth's surface. The ozone layer provides essential protection from harmful effects of the sun's rays on life on earth.

Most countries of the world signed the Montreal Protocol that bans the production of all CFC's with effect from January 1996 (January 1995 in the European Union), except for "essential uses". Metered dose inhalers for the treatment of asthma and chronic obstructive lung diseases are included in the essential use category.
In response to the Montreal Protocol's ban on CFC', CFC free MDIs were developed using hydrofluorocarbons (HFC) as a propellant. HFCs do not deplete the ozone layer, however it has been learned that they are greenhouse gasses and contribute to the global warming. The Kyoto protocol, agreed in 1997, seeks to reduce emissions of HFCs and other greenhouse gasses.

Inhalation is the most common method of taking medication for these respiratory diseases. Inhalers deliver the medicine directly to the airways where it is needed. There are two types of inhalers: aerosol inhalers, also known as MDIs and dry powder inhalers (DPIs). Dry powder inhalers do not require a propellant and are not effected by the change to non-CFCs. However, not all patients can use dry powder devices, particularly those with reduced inspiratory effort, for example small children and elderly persons. In addition dry powder inhalers are more expensive than aerosols.

In Europe most countries use more MDIs than DPIs; in some countries up to 90% of the inhalers are aerosols. Exceptions are the Scandinavian countries and the Netherlands where the majority of inhalers are DPIs.
The overall use of MDIs is very large: it is estimated that 70 million patients worldwide use over 450 million aerosols a year. And many of these still are CFC containing MDIs.

The European Federation of Asthma and Allergy Associations (EFA), representing the patient based asthma and allergy associations in Europe, therefore fully supports the acceleration of the introduction of safe and effective CFC-free MDI's and the development of national or regional phase out strategies.
Although the quantity of CFCs in MDI's is only a very small percentage of the total amount of CFCs, the global warming potential of CFC’s versus HFC’s is significantly higher. Therefore EFA supports the transition to HFC’s

However, MDI's are indispensable to the adequate treatment of asthmatic and allergic lung diseases and COPD, especially in children, elderly people and in the severe stages of disease.

EFA urges all parties involved to put all efforts into the production and approval of CFC free devices, albeit ensuring that all devices are properly tested and not introduced prematurely. Delays in the transition are considered harmful in the light of the Kyoto protocol.
Introduction of new CFC containing inhalers is considered unnecessary and undesirable by EFA. The cost difference for the new product should be kept to an absolute minimum as well as the difference in price for DPIs, so the patient should not have to pay a higher price.

EFA urges the national governments, while developing policies to meet the Kyoto protocol obligations not to take measures against medical uses of HFC MDIs, in the light of the need to ensure availability of MDIs for patients.

EFA urges all parties involved to keep the asthma and allergy patient associations fully informed about planned developments on national or local level so that they can play their part in informing and reassuring patients in their respective countries.

27 February 2002

EFA - MDI Committee

Ms. E. Bell, United Kingdom
Ms. M. Franchi, Italy
Dr. E.M.A.L. Rameckers, the Netherlands
Dr. E. Valovirta, Finland

For more information please contact
Edith M.A.L. Rameckers, MD
Maastrichterweg 10
6277 NW Slenaken
the Netherlands
Tel: +31 43 457 4264
Fax: +31 43 457 4265
E mail:E.Ramec@inter.NL.net