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Doctors' medicines to carry bar codes

The Asahi Shimbun

Concerned about medical blunders, the health ministry will insist that prescription medicines eventually carry bar codes, with the first phase likely to start in the summer of 2005.

Officials explained that the use of bar codes should sharply reduce the number of wrong dosages, a simple human error that can have catastrophic effects.

Coded labels will contain the name, composition and other data about the medicine. Hospitals and clinics can read the data on special machines.

The Ministry of Health, Labor and Welfare will form a panel of medical experts and pharmaceutical firms in fiscal 2004 to discuss specifics before introducing the new system.

Officials acknowledged the system will require heavy financial outlays on the part of hospitals and clinics.

The United States is already moving to introduce a bar code system around 2007.

Combined with bar-coded identification bracelets for patients, the data on intravenous drip bags and injection ampuls will help medical workers confirm they are using the right medication at the correct dosage, officials said.

This should reduce the risk of error, they said.

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NYT Headline

Doctors' prescriptions must be stored in computers. Before medicines are administered to patients, the bracelet and package codes will both be scanned to ensure they match.

Such checks are currently done visually and by reading aloud the data on packages.

A string of accidents in which wrong drugs were used or the dosage was 10 times greater than the prescribed level led to the proposed changes. Some of the accidents resulted in patient deaths.

On the business side, the Federation of Pharmaceutical Manufacturers' Association of Japan is studying bar code use after the revised Pharmaceutical Affairs Law required sales records be kept on blood and other products.

It plans to introduce bar code labels on injection solutions in the summer of 2005.

"Giving the wrong injection can cause a serious problem," said an official of the federation. "We hope to start with injection solutions and then expand (bar code use) to all medicines."

One hurdle is cost. Introducing bar code scanners and coded ID bracelets as well as a computer system for prescription management could total 5 million yen per hospital ward, officials said.

In the United States, the Food and Drug Administration proposed bar code regulation in March 2003.

It said its use will result in 413,000 fewer accidents over the next 20 years, saving \$41 billion (4.4 trillion yen) in additional medical costs. (IHT/Asahi: January 7,2004) (01/07)

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