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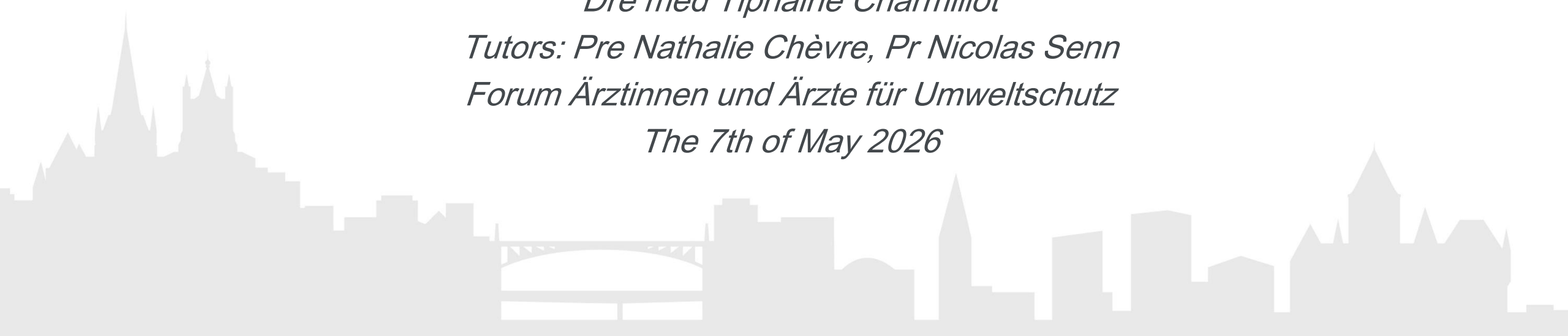
# Developing an ecotoxicological classification for frequently used drugs in primary care

*Dre med Tiphaine Charmillot*

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*Forum Ärztinnen und Ärzte für Umweltschutz*

*The 7th of May 2026*



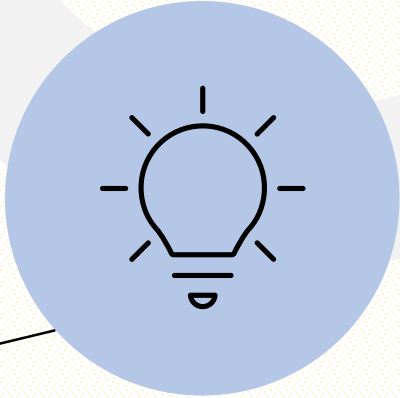
**Introduction**



**Methodology**



**Results**



**Message**

# Micropollutants' regulation in Switzerland

## Pesticides



**1997**

## Pharmaceuticals

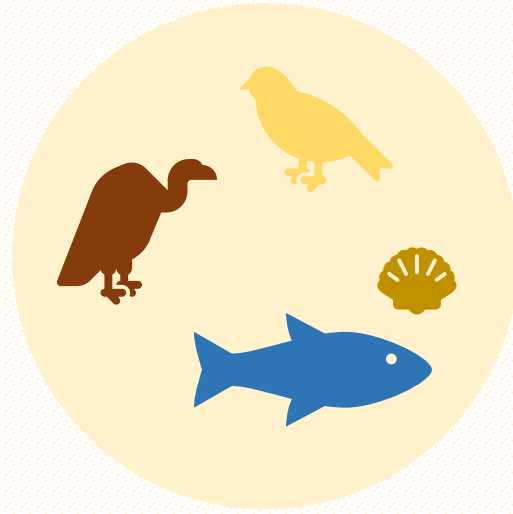


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# Drugs' direct impact on ecosystems



- Chloroplast development impairment
- Vegetable growth inhibition



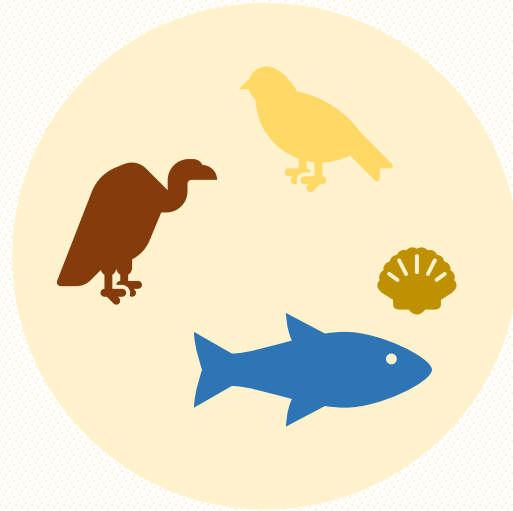
- Acute tubular necrosis
- mRNA modifications
- Embryotoxicity
- Morphological changes of reproductive organs



# Drugs' direct impact on ecosystems



- Chloroplast development impairment
- Vegetable growth inhibition



- Acute tubular necrosis
- mRNA modifications
- Embryotoxicity
- Morphological changes of reproductive organs



- Antibiotic resistance
- Immunosuppression
- Teratogenicity
- Fertility disregulation

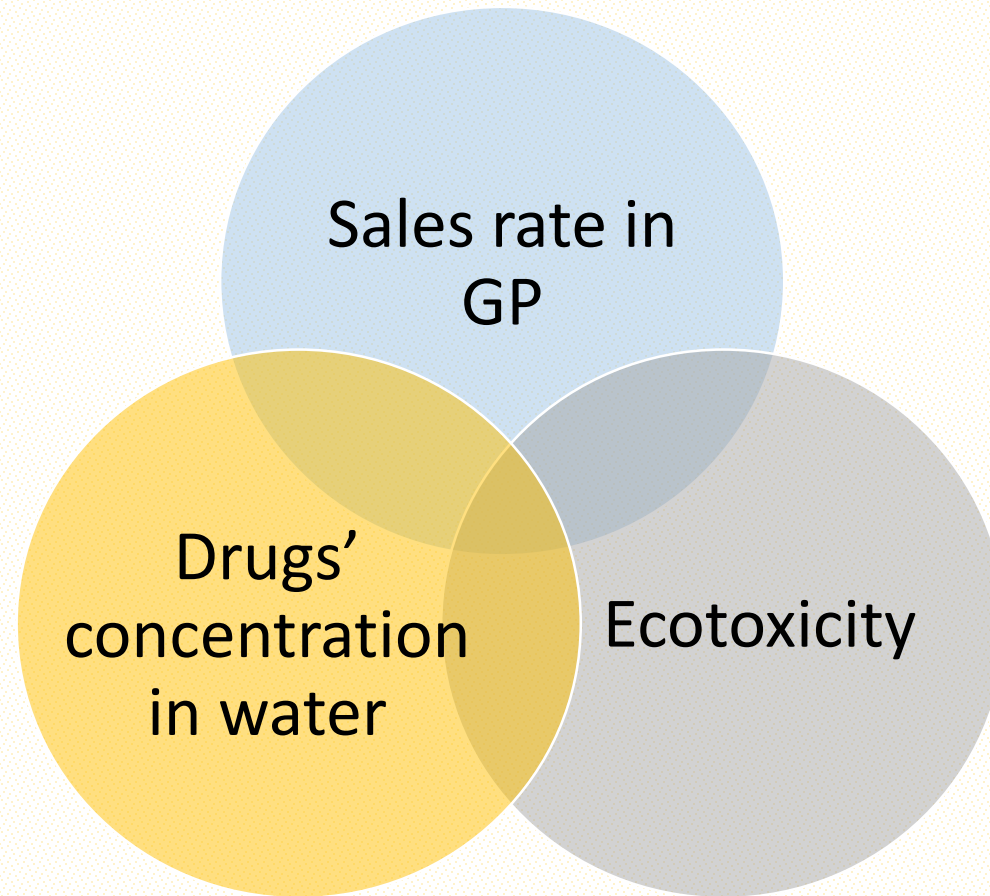
Zhang X, Yan S, Chen J, Tyagi RD, Li J. Physical, chemical, and biological impact (hazard) of hospital wastewater on environment: presence of pharmaceuticals, pathogens, and antibiotic-resistance genes. In: Current Developments in Biotechnology and Bioengineering Li WC. Occurrence, sources, and fate of pharmaceuticals in aquatic environment and soil. Environ Pollut. 2014;187:193-201.

Carter LJ, Williams M, Martin S, Kamaludeen SPB, Kookana RS. Sorption, plant uptake and metabolism of benzodiazepines. Science of The Total Environment. 2018;628-629:18-25.

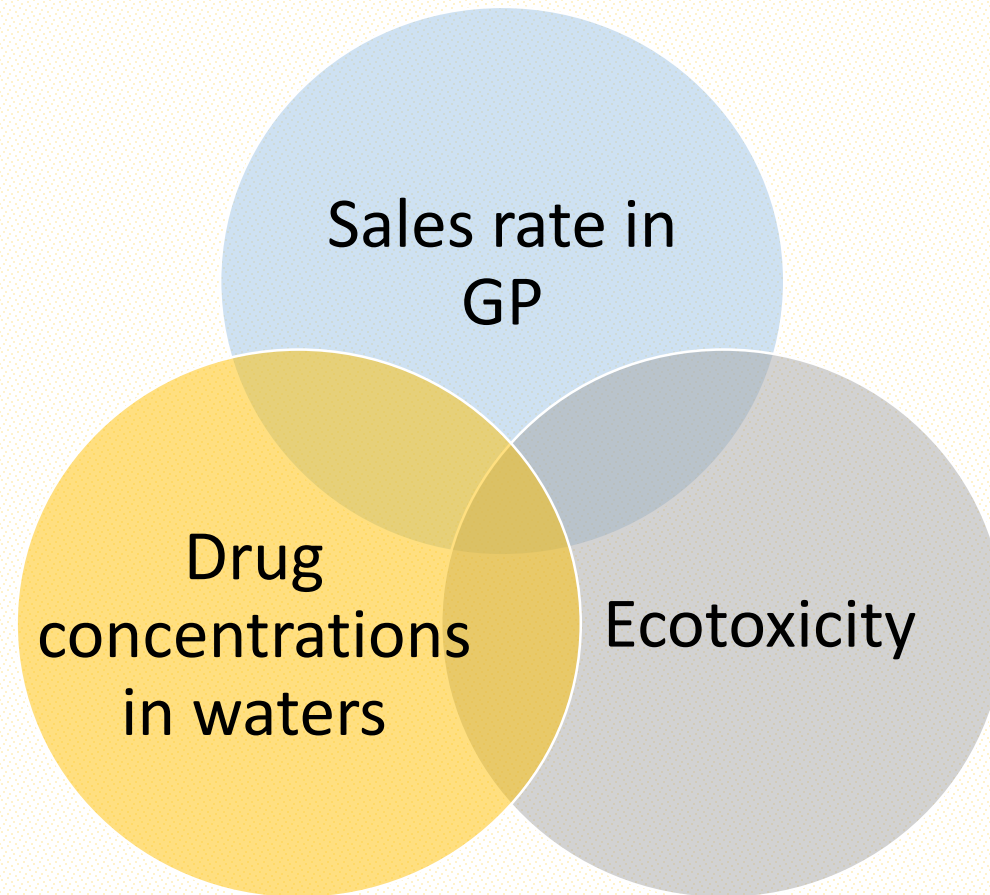
Katsikaros AG, Chrysikopoulos CV. Occurrence and distribution of pharmaceuticals and personal care products (PPCPs) detected in lakes around the world - A review. Environmental Advances. 2021;6:100131.

Mackulák T, Černanský S, Fehér M, Birošová L, Gál M. Pharmaceuticals, drugs, and resistant microorganisms — environmental impact on population health. Current Opinion in Environmental Science & Health. 2019;9:40-8.

# Methodology



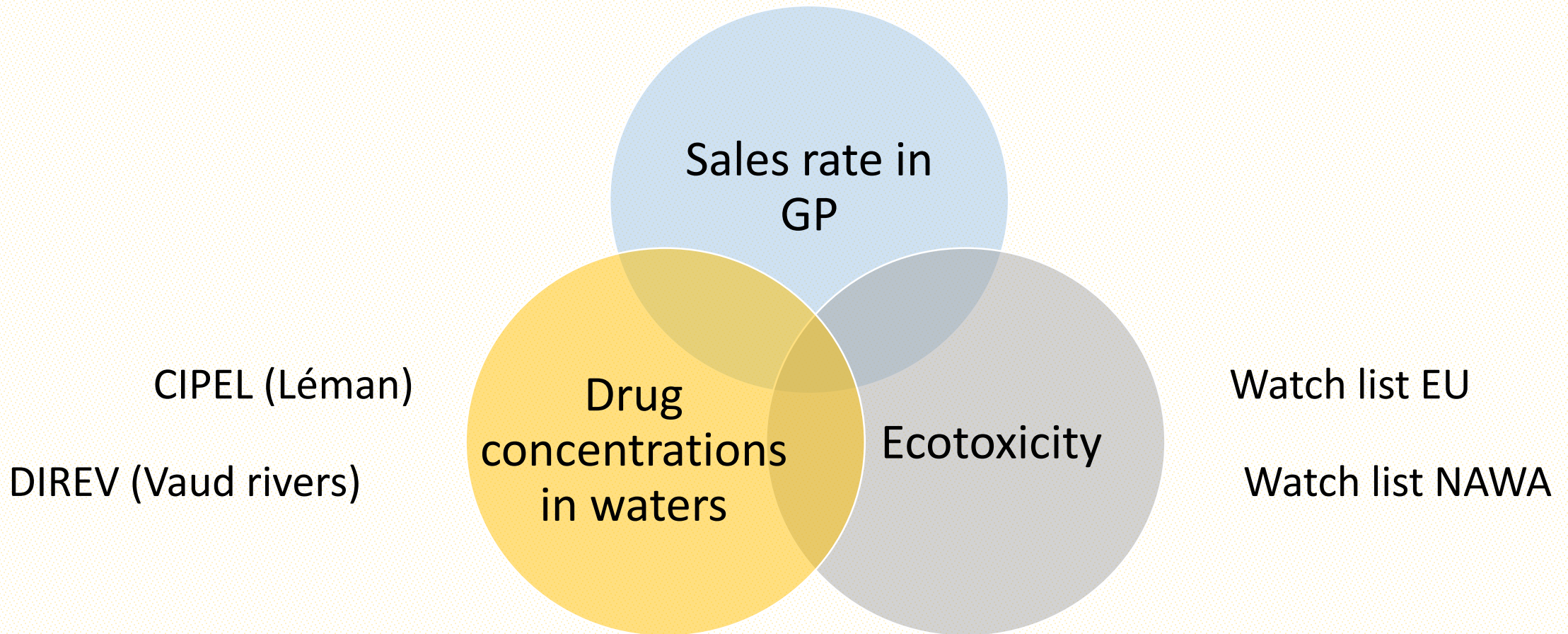
# Methodology



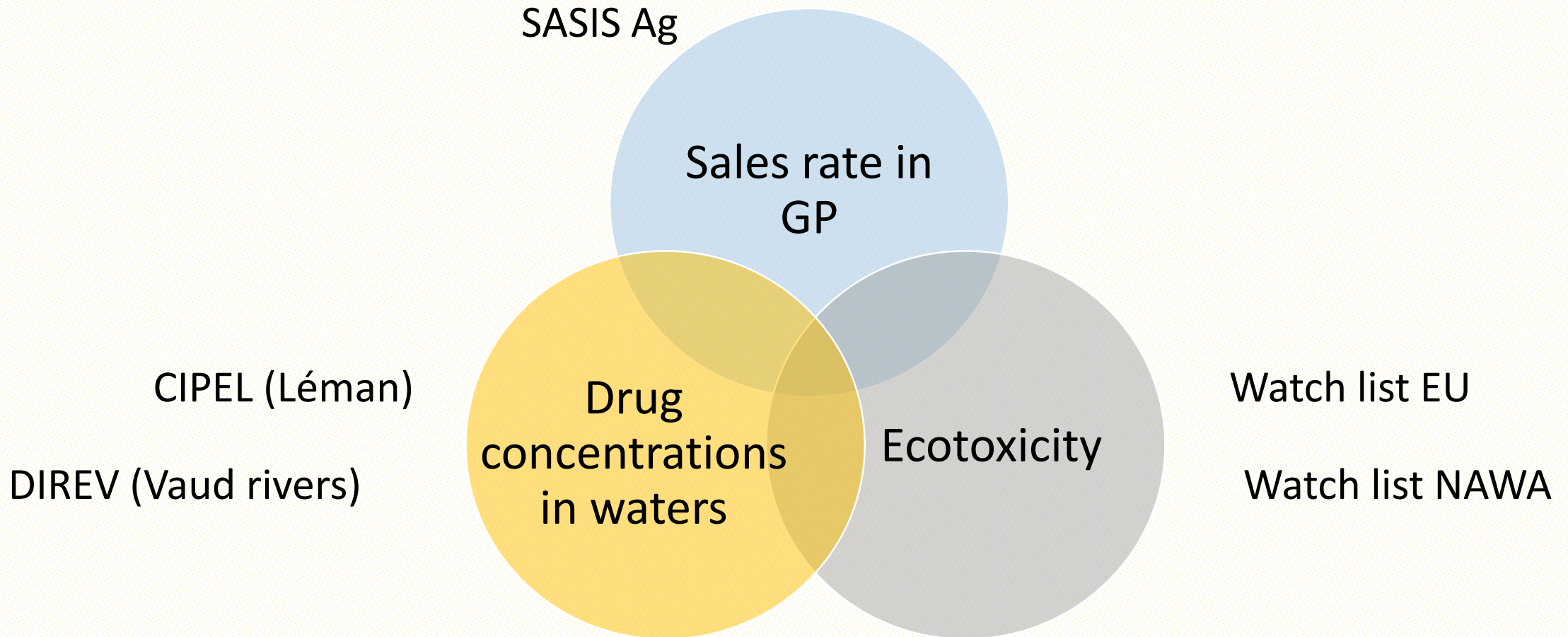
Watch list EU

Watch list NAWA

# Methodology



# Methodology

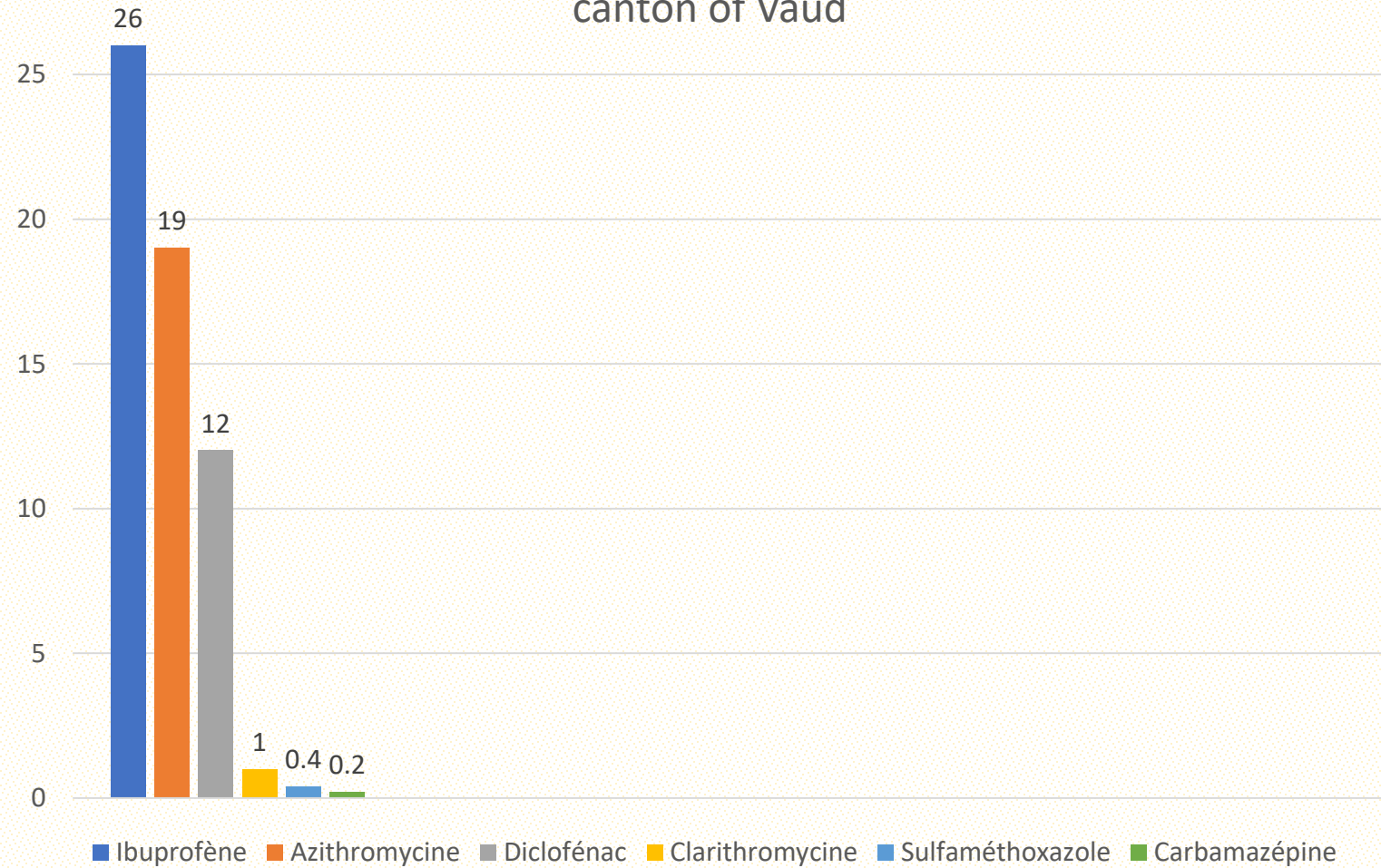


## Most sold drugs in primary care in Switzerland (SASIS AG)

1) Metformine	35'000 kg	7) Allopurinol	2'900 kg
2) Ibuprofène	21'500 kg	8) A. valproïque	2'900 kg
3) Paracétamol	20'900 kg	9) Lévétiracetam	2'800 kg
4) Métamizole	11'000 kg	10) Carbamazépine	2'400 kg
5) Aspirine	8'100 kg	11) Pantoprazole	2'200 kg
6) Méfénacid	3'200 kg	12) Métoprolol	2'100 kg

# Most concentrated drugs in surface waters

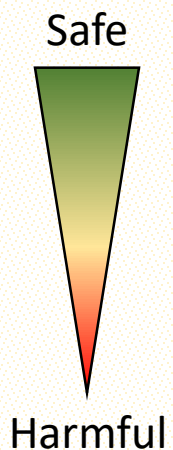
% of concentrations exceeding EQS in the rivers of the  
canton of Vaud



# Classification

31 drugs classified

6 levels of recommendation (from the safest to the most detrimental to the environment):



1. Drugs with concentrations in Lake Geneva and rivers of canton of Vaud  $< 10x$  their toxic potential ( $EQS \cdot 10^{-1}$ )
2. Drugs with concentrations  $> EQS \cdot 10^{-1}$  but  $< EQS$  ( $EQS \cdot 10^{-1} < C < EQS \cdot 10^{-1}$ )
3. Drugs with concentrations  $> EQS \cdot 10^{-1}$  but  $< EQS$  and that are listed in the NAWA or in the EU Watch list
4. Drugs with concentrations  $> EQS$
5. Drugs with concentrations  $> EQS$  and that are listed in the NAWA or in the EU Watch list
6. Drugs with incomplete data (measurement or EQS), but which are in the top 50 most sold drugs in primary care

**Table 3.** Ecotoxicological classification of most sold drugs in primary care in Switzerland (Author: T. Charmillot, 2025).

LOWER RISK							HIGHER RISK
	Category 1 $C < EQS \times 10^{-1}$	Category 2 $EQS > C > EQS \times 10^{-1}$	Category 3 $EQS > C > EQS \times 10^{-1}$ and listed by NAWA or the EU Watch list	Category 4 $C > EQS$	Category 5 $C > EQS$ and listed by NAWA or the EU Watch list	Category 6 Top 50 most sold drugs, incomplete data	
ANESTHETICS							Lidocaine
ANTACIDS							Esomeprazole Magaldrate Pantoprazole
ANTIARRHYTHMICS							Amiodarone
ANTIBIOTICS	Ofloxacin ** Sulfadiazine	Erythromycin Metronidazole	Clindamycin ** Trimethoprim **	Clarithromycin	Azithromycin * Ciprofloxacin * Sulfamethoxazole **		Amoxicillin
ANTIDEPRESSANTS	Amisulpride *** Citalopram *** Mirtazapine		Venlafaxine **				Sertraline * Trazodon Trimipramin
ANTIDIABETICS	Metformin **						Gliclazid
ANTIEPILEPTICS	Gabapentin *** Lamotrigin *** Primidone			Carbamazepine			Levetiracetam *** Oxcarbazepine Pregabalin Valproic acid
ANTIHYPERTENSIVES AND BETA-BLOCKERS	Atenolol Candesartan Irbesartan	Metoprolol Propranolol	Sotalol ***				Losartan Valsartan
NSAIDs and PAINKILLERS	Paracetamol Tramadol ***	Ketoprofen Mefenamic acid Naproxen			Diclofenac * Ibuprofen *		Acetylsalicylic acid Celecoxib Etodolac Mesalazin Metamizole

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ANTIPLATELETS						Clopidogrel
ANTIVIRALS						Valaciclovir
DIURETICS	Hydrochlorothiazide ***					
HYPOURICEMICS						Allopurinol
IODINATED CONTRAST AGENTS				Iomeprol	Iopromide ***	Iobitridol Iohexol
LIPID-LOWERING AGENTS						Atorvastatine Fenofibrat Rosuvastatine
NEUROLEPTICS						Lithium Quetiapine
SPASMOLYTICS						Mebeverin Tolperisone
VENOTONICS						Diosmine

\* NAWA; \*\* Watch List EU; \*\*\* potentially ecotoxic; EQS not validated but listed by NAWA; bold: top 50 most sold in primary care.

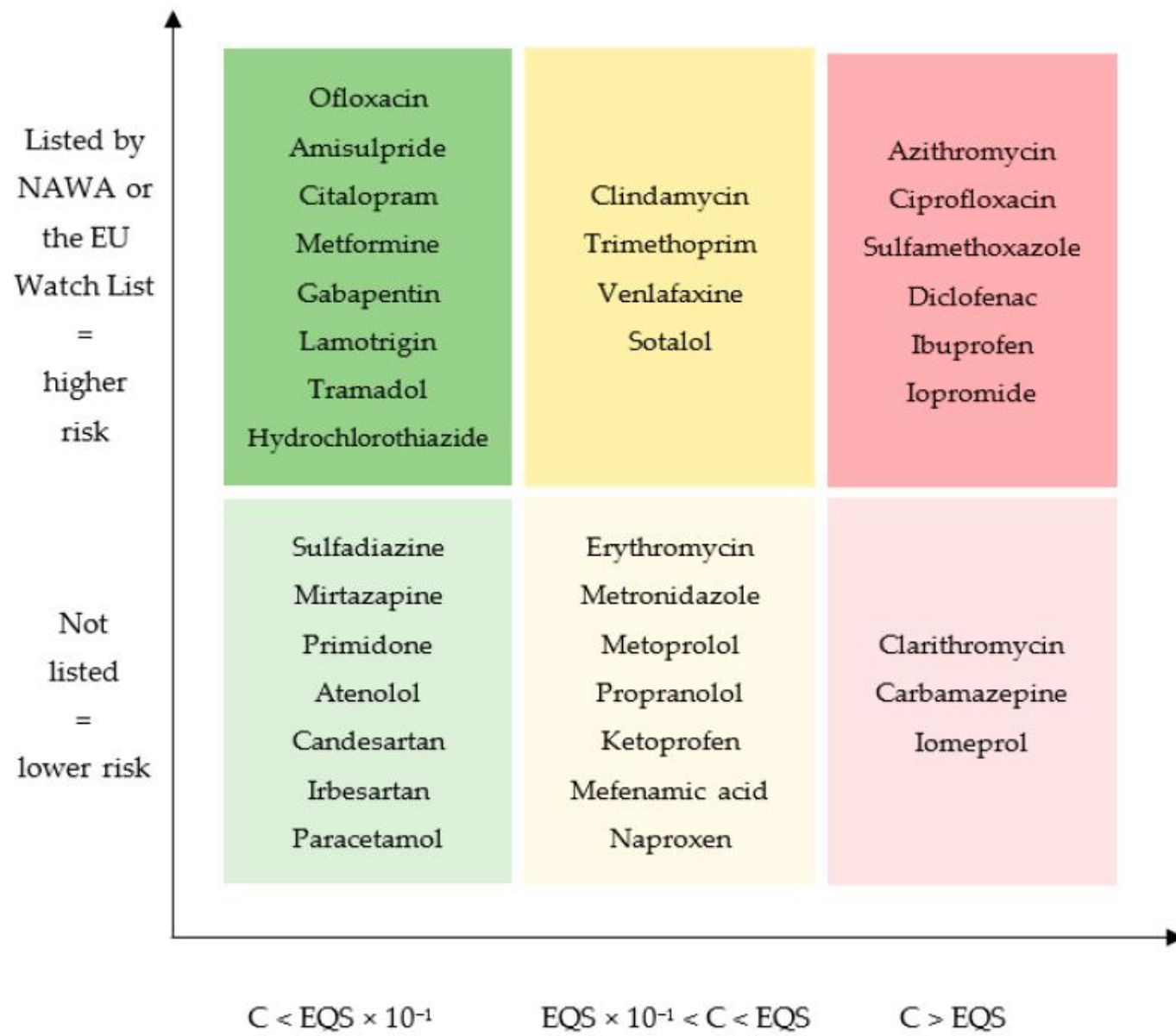


Figure 1. Ecotoxic classification of most sold drugs in primary care in Switzerland (Author: T. Charmillot, 2025). This classification is based on API concentrations effectively measured in

# But how can one integrate these information in the every-day clinical reality ?



Age  
Gender  
Comorbidities  
Drug interactions

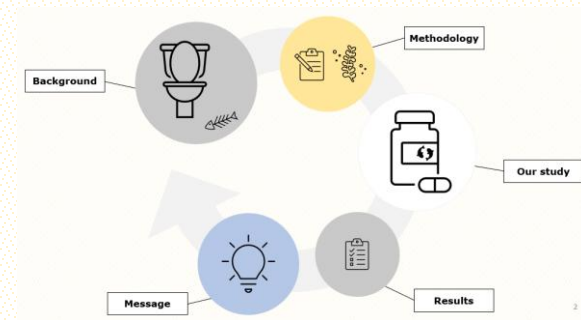
Patient wish  
Side effects  
Efficiency  
Cost-effectiveness  
Adhesion

Physical therapy  
Psychotherapy  
Social rehabilitation  
Phytotherapy  
RICE protocol

Is the molecule in this classification?  
How is it classified?  
Is there a safest molecule?

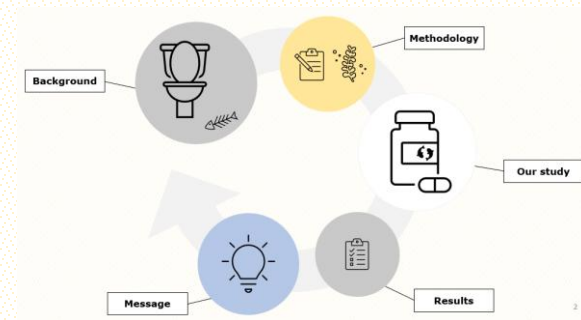
Minimum effective dose ?

# Take home messages



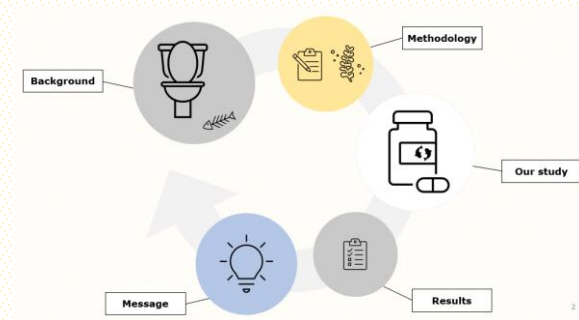
- ◆ Significant ecotoxicological **differences** exist between drugs of the same class

# Take home messages



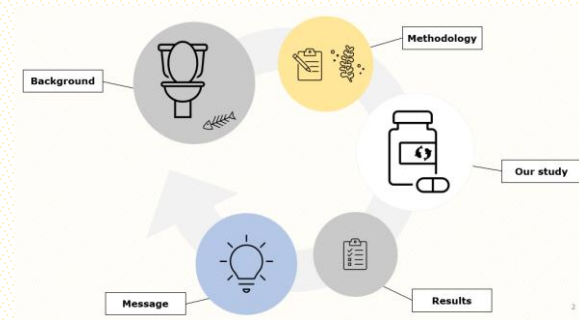
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# Take home messages



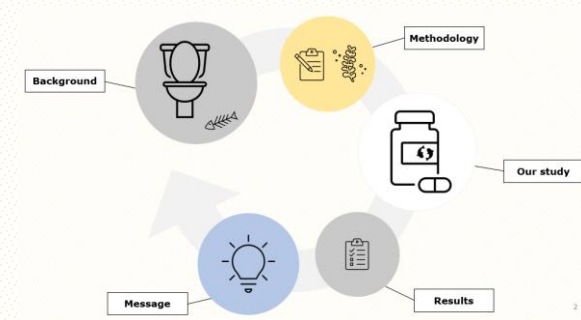
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- ◆ Most hazardous drugs (C > EQS): azithromycine, ciprofloxacin, clarithromycine, sulfamethoxazole, carbamazepine, diclofenac, ibuprofen, iopromid, iomeprol

# Take home messages



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- ◆ Safest drugs ( $C < 10x EQS$ ): ofloxacin, sulfadiazine, amisulpride, citalopram, mirtazapine, primidone, metformine, gabapentine, lamotrigine, candesartan, irbesartan, atenolol, hydrochlorothiazide, tramadol, paracetamol

# Take home messages



- ◆ Significant ecotoxicological **differences** exist between drugs of the same class
- ◆ Lack of **research** and **legislation** on pharmaceutical micropollution
- ◆ Most hazardous drugs ( $C > EQS$ ): azithromycine, ciprofloxacin, clarithromycine, sulfamethoxazole, carbamazepine, diclofenac, ibuprofene, iopromid, iomeprol
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- ◆ **Physicians and pharmacists**, play a key-role in ecotoxicity. They thus need tools to minimize environmental pollution

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# Merci

