

L'essentiel est sans cesse menacé par l'insignifiant.  
*René Char ; À une sérénité crispée – 1955*

Enclosed the list of EM (essential medicines) proposed by the SNFMI<sup>1</sup> in its first state. Since hundred of members of the society reshaped it through a process of validation. It is thus necessary to consider the list enclosed as a work paper. It would be very premature to enter a discussion about the composition of the list today.

An article is in the course of publication for this second version.

Members of the National School of the General Practitioner Teachers work in parallel on another list.

When this second list will be mature, a link between both lists will be begun to reach a fusion.

Step by step the circle of the participants in the elaboration of a RESTRICTED list will be widened to admit specialists there who will also have to contribute to the editorial staff of the additional list. To admit pharmacists and pharmacologists there by maintaining a priority reference: the best profit/risk for the patients.

The list will indefatigably be resumed and put in the daytime.

Its economic consequences will not be neglected, but they will have to remain secondary in face of the interest of the patients.

The list will evolve in the course of the works bringing the proofs of the optimal efficiency for every indication.

All the collaborations will be welcome on the condition of independence and of competence in the field of the medicinal prescriptions.

Naturally the rigour of the economic step will gain the whole practice: prescriptions of additional exams, non medicinal therapeutic indications As it will gain win the developed countries and the poor countries. Not without meeting of obstacles

*Jean-Claude Salomon*  
*December 2014*

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<sup>1</sup> Such a list was established by a workgroup of the French National Society of Internal Medicine and by a group established within the National College of the General Practitioners Teachers. This new list in France is intended to be regularly updated by a progressive implication of an increasing number of participants. **To preserve her meaning it will have to remain restricted and escape the influence of all the pressure groups.** Thanks to what it will keep the priority objective which is the preservation of the interest of patients.

Les 100 médicaments essentiels. Une approche de médecine interne, 100 essential drugs. An internal medicine approach, M. Thomas, P. Arlet, O. Aumaitre, J. Cosserat, B. Grosbois, L. Guillevin,, A. Kettaneh, C. Le Jeune, C. Massot, P. Morlat, La Revue de médecine interne 34 (2013) 460–464

## List of EM 1st publication

*M.Thomas et al*

*This list is the result of a first working stage. After validation, a new version will be published. Everything will be made so that numerous independent prescribers participate in the improvement of this restricted list and in its adaptation to such or such speciality. If you consult this list, take into account the existence of a complementary(additional), much less restricted list.*

Abacavir	Glibenclamide	Rifampicine
Acide Folique	Héparine	Ritonavir
Adrénaline	Hydrochlorothiazide	Rituxima
Allopurinol	Hydrocortisone	Salbutamol
Alprazolam	Hydroxychloroquine	Sertraline
Amiodarone	Hydroxyurée	Simvastatine
Amitriptyline	Insuline Lente	Spiro lactone
Amlodipine	Insuline Rapide	Sumatriptan
Amoxicilline	Isoniazide	Tamoxifène
Amoxicilline + Acide	Lactulose	Ténofovir
Clavulanique	Lamivudine	Tramadol
Aspirine	Levodopa	Trinitrine
Bromazépam	Levonorgestrel +	Valacyclovir
Calcium	Ethinylœstradiol	Valproate De Na
Carbimazole	Levothyroxine	Vérapamil
Carboplatine	Lidocaïne	Vincristine
Ceftriaxone	Lopéramide	Vitamine B12
Chlorambucil	Losartan	Vitamine D3
Chloroquine	Melphalan	Warfarine
Clarithromycine	Metformine	
Clopidrogel	Métoprolol	
Colchicine	Métronidazole	
Cotrimoxazole	Midazolam	
Cyclophosphamide	Morphine	
Danuravir	Nicardipine	
Décapeptyl	Nomégestrel	
Diclofénac	Oestradiol 17-Béta	
Digoxine	Ofloxacin	
Diltiazem	Oméprazole	
Dodétaxel	Ondansétron	
Doxorubicine	Ortézomib	
Doxycycline	Paracétamol	
Efavirenz	Peg Interféron-Alpha 2a	
Enoxaparine	Prednisone	
Erythropoïétine	Pristinamycine	
Ethambutol	Progestérone	
Fluconazole	Proguanil + Atovaquone	
Fluorouracile	Propranolol	
Furosémide	Pyrazinamide	
GCSF	Quinine	
Gentamycine	Ramipril	
	Ribavirine	