

Rationale and inputs values for Best-case and Worst-case setting

Factor	Base-case	Best-case	Worst-case
<i>Vial sharing</i>	Not in use, according to routine clinical practice	As base-case	In use, meaning no drug waste and less difference in the number of vials per administration
<i>Emissions for active substance production</i>	Not considered, because of a gap of information at the moment of this analysis	As base-case	3,000 KgCO ₂ eq/Kg, assumed to account for the difference in milligrams of active substance needed per each administration
<i>Emissions saved by use of recycled packaging materials</i>	0.83 gCO ₂ eq/g of glass, 0.45 gCO ₂ eq/g of cardboard/paper, meaning that these materials are completely recycled	No savings, meaning that these materials couldn't be recycled	As base case
<i>Transport</i>	Round trip: vans return empty to the production site	As base-case	One way: vans are subsequently loaded with other goods, which is outside the scope of our analysis
<i>Shipping reduction</i>	43% to Italy and 34% within Italy, according to the internal data	66.7% as directly proportional to the reduced number of packs needed	As base case
<i>Emissions for medical supplies and drugs used in the hospital setting</i>	0.31 and 0.37 KgCO ₂ eq/€ spent, according to data from a Canadian Hospital [Cimprich 2023]	As base-case	0.24 KgCO ₂ eq/€ spent, according to data from a German Hospital [Keil 2023]
<i>Computation of overhead emissions (full costing)</i>	6,65 KgCO ₂ eq saved per administration SC vs IV, due to reduced working intensity	17,7 KgCO ₂ eq saved per administration SC vs IV, due to reduced length of hospital stay	As base case