



## Dear colleagues

This edition follows the Board meeting held on 12 December, the final meeting of the mandate from 2022–2024.

There are many people to thank for the past three years. Firstly, the fellow members of the Board of Directors who have dedicated their time and expertise. Secondly, our secretariat in Brussels, led so capably by our Secretary General, Sarada Das. Finally, all of you, our members. The challenges of the medical profession in Europe requires a strong and united voice of doctors more than ever, and your committed support to CPME is vital and valued.

It was a real honour to serve this great organisation and I am pleased to pass the baton to the highly capable incoming Board led by Dr Ole Johan Bakke, and I will continue to support as Past President for the next three years.

**Dr Christiaan Keijzer**

Immediate Past President 2022–2024



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## BOARD OF DIRECTORS MEETING – 12 DECEMBER 2024

## Finances

### End of year activities

- ▶ The Treasurer reported that the wrap-up of the 2024 accounts is in preparation, which includes the finalisation of the accounts for the general assembly in Amsterdam, with thanks to the Royal Dutch Medical Association for their generosity.

With a view to 2025, invoices for membership fees and the cost reimbursement for meeting participation are being prepared.

## Internal Affairs

### Rules of Procedure

- ▶ The Board adopted the Rules of Procedure as approved by the General Assembly on 9 November 2024.

### New College of European Commissioners

- ▶ The Board took note the of the incoming second European Commission of Ursula von der Leyen, which took office on 1 December, noting that CPME priorities are spread amongst several Commissioners

Letters have been prepared to each relevant Commissioner, highlighting our relevant policies and requesting in person meetings.

## Policies

### European Alcohol Health Alliance

- ▶ The Board decided to postpone the decision to join a new European Alcohol Health Alliance until more information is available.

### Online pharmacies

- ▶ The Board decided to decline an invitation to join an alliance of online pharmacies.

### EUHPP Joint Statement on Advancing Precision Medicine for Europe's Cancer Patients with AI-powered Imaging

- ▶ The Board decided not to endorse the joint statement.

### Medical confidentiality in data retention and data access laws

- ▶ The Board accepted the invitation to collaborate with EDRI and co-sign the letter (see page 9).

The Board further agreed that CPME Secretariat prepares a draft letter to send to the Standing Committee on Operational Cooperation on International Security (COSI) advocating to reinforce the exclusive use of secure processing environments for electronic health data at national level and that the secure networks designed for the exchange of patient information between health professionals, patients, national health systems and/or health insurance funds should be treated differently in the EU digital security agenda, that is for data retention and access.

## BOARD OF DIRECTORS MEETING – 12 DECEMBER 2024

## Xt-EHR Joint action questionnaire on Cross-border telemedicine

- ▶ The Board adopted the draft response, deleting some parts which went beyond the CPME policy on telemedicine and on the European Health Data Space.

## MDCG New Technologies (NET) Working Group

- ▶ The Board adopted the Secretariat recommendation to participate in the sub-group meetings when the meeting agenda points are relevant for CPME policy priorities.

## EMO's Joint Policy on the Health Workforce Crisis

- ▶ The Board decided to adopt the paper as presented at the EMOs' presidents meeting on 23 November 2024, without further amendments.

## Request for interview on gender inequality in the medical profession

- ▶ The Board decided to contact Dr Kitty Mohan proposing her participation in the interview. It was also decided to put Professor Johnston in contact with EJD as they have a long-standing policy on Gender Imbalance in Medicine.

## Health Security consultation

- ▶ The Board took note of CPME's response to the Commission consultation on the Evaluation of the Regulation on Serious Cross Border Threats to Health.

## BOARD OF DIRECTORS MEETING – 12 DECEMBER 2024

## Developments in Slovakia

- ▶ The Board discussed developments in Slovakia where the government has approved an amendment to the civil protection law which limits doctors' ability to strike. The amendment empowered Slovakian authorities to declare a state of emergency in healthcare, where a doctor's resignation notices can be suspended and those who refuse to work can face criminal charges.

Since the meeting, there has been an agreement between the Medical Trade Union Association and the Ministry of Health of the Slovak Republic

## Closing of the meeting and Board mandate 2022–2024

- ▶ President Dr Christiaan Keijzer thanked for the entire Board for their dedication during the past three years.

## European Medical Organisations urge immediate and coordinated action to address the health workforce crisis

Eight European Medical Organisations, including CPME, have [joined forces](#) to adopt a joint policy advocating for measures to tackle the health workforce crisis including adequate management of staffing and workload, better working conditions to support well-being, and investment in education and training.

The eight organisations jointly recommend that robust retention strategies are implemented alongside recruitment efforts. It is crucial to address staffing and poor working conditions to prevent migration and attrition. Finally high standards for medical education must be upheld and accompanied with investment in high quality undergraduate and postgraduate programmes to foster skilled and competent doctors.

However, the ongoing health workforce crisis should not be seen solely as a consequence of increased retirements among health professionals outpacing recruitment efforts; rather, it is a complex issue influenced by multiple challenges. These challenges include rising demands for healthcare services due to demographic shifts, the enduring impact of the COVID-19 pandemic, and evolving consumer expectations regarding healthcare delivery.

## European doctors support enhanced transparency in relations with healthcare industry

European Doctors [support](#) the set up and maintenance of national registers of transfers of value between doctors and healthcare industry.

We welcome the debate at the European level to enhance transparency and set minimum standards of reporting on transfers of value between doctors and the healthcare industry. This has most recently been addressed in the European Parliament's proposals in the revision of the EU general pharmaceutical legislation.

The relationship established between a patient and their doctor is based on mutual trust. The doctors' decision relating to medicines, and other health technologies in the course of a treatment should in no way be induced by commercial factors. However, the collaboration between the medical profession and commercial companies involved in the healthcare sector is essential to patients and society as a whole.

CPME President Dr Christiaan Keijzer said "In order to ensure that trust is maintained and that patients' rights are respected, we need to ensure transparency and avoid conflicts of interests. We support that transparency registers should be accessible for the public in a consistent and regular manner. European doctors are committed to ensuring transparency in relations with the healthcare industry and we call on policymakers to match our commitment."

At our recent General Assembly, we updated our guidelines on the transparency of relationships between doctors and healthcare industry to futureproof our position.



## Call to uphold medical confidentiality in data retention and access laws by law enforcement authorities

CPME [co-signed](#) a letter with professional associations, media and human rights organisations, trade unions and technology companies, urging ministers to ensure the EU digital security agenda safeguards justice, accountability, respects fundamental rights, supporting the development of a safe digital ecosystem.

The High-Level Group (HLG) on access to data for effective law enforcement has proposed several recommendations which if followed would grant law enforcement maximal access possible to personal data, impacting also electronic health data systems.

CPME reaffirms the fundamental importance of the principle of medical confidentiality and the need to safeguard the use of secure processing environments for electronic health data at national level. Medical confidentiality is the cornerstone of trust between patients and doctors, a fundamental principle of medical ethics, and constitutes a patient right. The fear of disclosure of medical data inhibits patients from seeking care.

Ahead of the development of EU priorities in this policy area, the stakeholders call upon the ministers to consider the following common recommendations:

- respect fundamental rights and ensure the security and confidentiality of digital spaces
- uphold the right to privacy and inviolability of protected information
- support a safe, trustworthy and diversified digital ecosystem

## The year in review: European doctors' highlights from 2024

On our website, we have [shared](#) some of European doctors' selected highlights from 2024.

## CPME joint event in the European Parliament on clean air measures

On 28 January, CPME and the other EU Healthy Air Coalition (EUHAC) members are organising a high-level event in the European Parliament, co-hosted by MEP Javi Lopez. This event will bring together Brussels-based organisations representing diverse constituencies of the health sector. CPME will be represented by Dr Ina Kelly, Chair of WG on Environmental Health. If you have a chance to travel to Brussels, please register [here](#) to learn about the latest air pollution science and to discuss ways forward for clean air policies.

## WHO/Europe's survey on mental health of healthcare professionals deadline extended until 28 February

CPME is supporting WHO/Europe in a project funded by the European Commission, to launch a first-of-its-kind survey on the mental health and well-being of **healthcare professionals across the 27 EU countries, Iceland and Norway.**

We would appreciate NMAs' support in making sure it reaches as many doctors as possible. The survey takes about 8 minutes to complete and the deadline is extended until 28 February 2024. It is anonymous and available in 25 languages. Please access it here: <https://healthworkers-survey.ccomsuam.org/>

This survey, the largest of its kind ever undertaken in Europe, aims to gather crucial data to better understand the challenges doctors and nurses face in their work environments.

## FEATURE

## Meet our incoming Board of Directors 2025-2027

Our new [Board of Directors](#) took office on 1 January, discover more about them below.

### Dr Ole Johan Bakke, Norwegian Medical Association (President)

Dr Ole Johan Bakke graduated from University of Oslo, Faculty of Medicine in 1988. He holds two specialties; one in Public Health and one in General Medicine. He has worked as a general practitioner and a public health officer since 1990.

Dr Bakke was elected member of the board of the Norwegian Medical Association in 2015. He chairs the committee for the Norwegian Medical Association's fund for specialist education and is member of the board of the Norwegian Association of Public Health Officers. Furthermore, he has extensive experiences as a board member of various hospitals and other health organisations. Dr Bakke is married and has three children. He lives on a farm 70 kilometres south-west of Oslo. He spends his time off either outdoors in the countryside or at a very quiet spot in the Telemark mountains.

### Dr Andreas Botzlar, German Medical Association (Vice President)

Dr Andreas Botzlar, a specialist in surgery, has been a member of the Executive Board of the German Medical Association (GMA) since May 2023. He is Co-Chair of the GMA's Committee for International Affairs and a member of the GMA's Standing Committees on Specialty Training and Continuing Medical Education. Furthermore, he holds the position of Vice-Chair of the Marburger Bund – the German trade union which represents the professional and political interests of physicians employed in Germany and medical students.

Closer to home, he serves as 1st Vice-President of the Executive Board of the Bavarian State Chamber of Physicians and as Chair of the Bavarian branch of the Marburger Bund. He participates in meetings of the World Medical Association and the Symposium of the Central and Eastern European Chambers of Physicians (ZEVA). He was also heavily involved in the European Junior Doctors (EJD), serving as Secretary General of the permanent working group from 2009 to 2011.

## FEATURE

**Dr Jacqueline Rossant–Lumbroso, French Medical Council (Vice President)**

Dr Jacqueline Rossant–Lumbroso is a French general practitioner as well as a sports and aviation doctor. Her medical training was coupled with a course in computer science, statistics and epidemiology. She is actively involved in the continuing education of physicians and has written several popular medical publications and is co–author of two medical encyclopedias. Dr Rossant–Lumbroso is serving her second term as CPME Vice President, having served on the Board since 2022. She also serves as Vice President of the French Medical Council.

**Dr Péter Álmos, Hungarian Medical Chamber (Vice President)**

Dr Péter Álmos graduated from the Faculty of Medicine at the University of Szeged in 2005 and obtained his board certification in psychiatry in 2010, later adding a specialisation in rehabilitation. Currently, he serves as an Associate Professor, where he teaches resident doctors, medical and dental students and actively mentors future researchers. His current research focuses on the neurocognitive aspects of addiction and suicide, with a particular focus on self–harm, burnout, and moral injury among physicians. Since 2015, Dr Álmos has been actively involved in healthcare advocacy. Initially, he co–founded a civil group to combat corruption in the healthcare system. He has held leadership roles within the Hungarian Medical Chamber, serving as Vice President since 2019 and President since 2023.

**Dr Kitty Mohan, British Medical Association (Vice President)**

Dr Kitty Mohan is a Consultant in Communicable Disease Control based in London and Oxford. She qualified from Guy's King's and St Thomas' School of Medicine in 2004, completed Public Health training in London in March 2018 and was awarded a PhD in Epidemiology from King's College London in 2016. She is the Chair of the International Committee at the British Medical Association (BMA). From 2018 to 2020, Kitty was President of the European Junior Doctor Association (EJD). She is a member of the BMA UK Council, has previously been Director of the BMA, and was joint lead negotiator for junior doctor contract negotiations whilst Co–chair of the BMA UK Junior Doctors Committee between 2013 and 2015. Kitty was made a Fellow of the BMA in 2017.

## FEATURE

**Prof. Dr Ray Walley, Irish Medical Organisation (Treasurer)**

Professor Dr Raymond Walley is a full-time General Practitioner and GP Trainer based in Dublin. He is a Clinical Professor of General Practice in the Dept. of Medicine at University College Dublin.

He is a former President of the Irish Medical Organisation (IMO) (2015–2016) and Chair of the IMO GP Committee (2012–2015). He is Chairman of the International Affairs Committee of the IMO. He is a member of the IMO GP sub-committee. Prof. Walley has been Head of the IMO Delegation to CPME since 2016 and served as CPME First Vice President from 2019 to 2024. Professor Walley is also head of delegation and a member of the Irish Delegation to UEMO (European Union of General Practitioners).

Dr Walley graduated in medicine at University College Dublin in 1987 and trained as a GP at the NHS East Sussex Vocational Training Scheme in the UK. Dr Walley worked as a fund holding General Practitioner in a multi-partner purpose built Primary Care Centre in East Sussex, NHS. He is a member of the Medisec GP Professional Medical indemnity insurance advisory panel.

**Dr Christiaan Keijzer, Royal Dutch Medical Association (Past President)**

Dr Christiaan Keijzer graduated from the Radboud University Faculty of Medicine (Nijmegen, The Netherlands) in 1997. He completed his specialisation in anesthesiology at the VU University Medical Center in Amsterdam in 2004. He received his PhD degree in 2007 with a thesis on “Interaction of inhalational anesthetics and carbon dioxide absorbents” from the VU University in Amsterdam. He currently works as consultant anesthesiologist and resident training director for anesthesiology at the Radboud University Medical Center in Nijmegen.

In 2024, the Royal Dutch Medical Association (RDMA) awarded Dr Keijzer with the silver medal of great merit for his exceptional services to Dutch medicine and the medical federation. Dr Keijzer served as RDMA financial director and vice-chairman from June 2014, completing his last board term in 2023. He also served as first Vice President of the European Federation of Salaried Doctors (FEMS).

## MONITORING

## Political Outlook

### The Polish Presidency's priorities

The Polish presidency of the council of Europe will begin on 1 January 2025, for six months. In the [official programme](#) of the Polish presidency, the following three areas are mentioned as priorities: the digital transformation of healthcare, the mental health of children and young people, and health promotion and disease prevention.

On mental health, the Polish presidency will conduct a debate on the risks of the rapid development of digital technologies, the intensive use of the internet and social media on children and adolescent mental health. The programme additionally mentions the need for an in-depth analysis of the effects of health promotion and disease prevention programmes and tools, implemented in the Member States. The conclusions will feed into a catalogue of good practices and solutions to propose actions at the EU and national level.

Regarding the digital transformation in health, the presidency will focus on cross-border services in e-health in the context of the EHDS, as well as the regulation of medical device cybersecurity in EU legislation. The programme mentions discussions on the announced action plan on cybersecurity for hospitals and healthcare providers. As part of the future of work in digital Europe priority, the Polish presidency will discuss legislative initiatives relating to the use of AI in the workplace, teleworking and the right to disconnect.

The programme also mentions that the Polish presidency will continue the work on the revision of the pharmaceutical legislation, aiming to increase the security of supply and to ensure the availability and affordability of medicines. The programme also states there will be "space for a debate on critical medicines". Finally, the presidency will support measures to stimulate the acquisition of new qualifications and retraining, in the context of the Action Plan on labour and skills shortages.

## MONITORING

## Parliament confirms Standing Committee for Public Health

The Parliament has [approved](#) changes put forward by its Conference of Presidents, establishing two new standing committees, and two special committees: the standing committee for Security and Defence, the [standing committee for Public Health](#), the special committee for Democracy, and the special committee for Housing.

The new SANT committee will be comprised of 43 members, and the membership will be determined by each political group and non-attached MEPs. The exact composition will be announced during the 20–23 January 2025 plenary session and the first meeting will take place on 29 January.

## Teresa Anjinho elected as new European Ombudsman

On 17 December, Teresa Anjinho (Portugal) was [elected](#) as the European Ombudsman for a five-year mandate, taking over from [Emily O'Reilly](#) (Ireland). Anjinho is an independent human rights expert and academic researcher, serving as a member of the Supervisory Committee of the European Anti-Fraud Office (OLAF). She also served previously as Deputy Ombudsman of Portugal. During her [public hearing](#), she pledged to strengthen trust between the EU and its citizens, by upholding the highest standards of integrity, accountability, and responsiveness. Anjinho, once endorsed by the EP, will take office after taking an oath during the official ceremony on 27 February 2025 at the EU Court of Justice. Past Ombudsman investigations have addressed i.a. the European institutions' interactions with the tobacco industry, as well as the European Commission's negotiations of the vaccine contracts during the pandemic.

## MONITORING

## Public Health

### Health and environment impacts of air pollution exposure remain high across Europe

According to European Environment Agency (EEA) [exposure](#) to fine particulate matter (PM2.5) continues to cause nearly 240,000 deaths annually in the EU. According to the EEA briefing '[Harm to human health from air pollution in Europe: burden of disease status 2024](#)', Europeans remain exposed to air pollutant and nearly three quarters of Europe's ecosystems are exposed to damaging levels of air pollution. However, the data also indicates an improving trend in the health impact of a long-term exposure to three major air pollutants: fine particle matter, nitrogen dioxide and ozone. Between 2005 and 2022, deaths attributable to fine particulate matter or PM2.5 fell by 45%. That indicates steady progress towards the EU Zero Pollution Action Plan's targets a 55% reduction by 2030.

### The first six EU reference laboratories for public health are now operational

On 1 January 2025, the [first six EU reference laboratories \(EURLs\) for public health](#) became operational. They aim to bring together scientific expertise from across the EU to strengthen the EU's defences in the face of serious cross-border health threats. The laboratories will also support national public health laboratories in enhancing data comparability and capacity strengthening on laboratory methods at the EU level. The six EURLs are covering the following areas: Antimicrobial resistance (AMR) in bacteria; Vector-borne viral pathogens; Emerging, rodent-borne and zoonotic viral pathogens; High-risk, emerging and zoonotic bacterial pathogens; Legionella; Diphtheria and pertussis.



## MONITORING

## Digital Health

### EDPB issues an opinion on the use of personal data in AI models

The European Data Protection Board (EDPB) has published an [opinion](#) paper on the use of personal data for the development and deployment of AI models. This was requested by the Irish Data protection Authority with the aim to have Europe-wide regulatory harmonisation. Several key issues are addressed: how AI models can be considered anonymous, the use of legitimate interest as a legal basis for processing personal data in AI, and the implications of using unlawfully processed personal data to develop.

According to the opinion, AI models can only be considered anonymous if it is highly unlikely that individuals can be identified or personal data extracted from the model. This must be assessed case by case using suggested methods to ensure compliance. Legitimate interest can justify the use of personal data for AI if it meets a three-step test: the purpose is strictly necessary, the data processing is proportional, and individuals' rights are respected. Factors like transparency and reasonable expectations of data use are critical in this evaluation.

Finally, if AI models are developed using unlawfully processed data, their deployment may be deemed unlawful unless the data has been properly anonymized. This ensures compliance with GDPR principles.

## MONITORING

## Patients & Ethics

### Combating sexual abuse and sexual exploitation of children

On 13 December, the Council reached a [proposal](#) to update the 2011 Directive, to strengthen criminal law on child sexual abuse and sexual exploitation. Various [amendments](#) were introduced in the proposal, including on the reporting obligations of professionals working in close contact with children.

Below are some of the amendments made:

- Article 17(3) of the proposal has been deleted which foresaw the obligation for healthcare workers to report “(...) to the competent authorities if they have reasonable grounds for believing that an offence punishable under this Directive has been committed or is likely to be committed”.
- Recital 34a explains that “(...) Where professionals report such instances of abuse or exploitation, Member States should ensure that they are not held liable for breach of confidentiality.”

In addition, pursuant to Article 18, the reporting activity should be done through accessible, easy to use, safe and readily available channels. Furthermore, member states shall have to take the necessary measures to ensure that the rules on professional secrecy imposed by national law do not constitute an obstacle for reporting.

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