



Dear colleagues

This edition follows our online Board meeting on 17 April, during which we consolidated the revised priorities and Working Group Term of Reference following our General Assembly in March. We also took note of the start of the i2X project, which you can read more about in our feature article on page 8.

From 24–26 April, I attended the World Medical Association’s 229th Council session in Montevideo, Uruguay, where the WMA adopted a [resolution](#) on the role of physician associates and other non-physician providers in the UK and other countries, and a [resolution](#) calling for immediate cessation of riot control agent use in Türkiye and the protection of healthcare workers.

We welcome you to read all this and more in this month’s edition.

Dr Ole Johan Bakke
CPME President



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BOARD OF DIRECTORS MEETING – 17 APRIL 2025

Internal Affairs

Revised priorities

- ▶ The Board approved an amendment to the policy priorities on Pharmaceuticals and Healthcare Products.

Revised Working Group Terms of Reference

- ▶ The Board approved the revised Terms of Reference, processing amendments resulting from the changes to the priorities at the recent General Assembly.

Finances

Quarterly accounts

- ▶ The Board took note of the quarterly accounts and the collaboration with the new accountant.

Expenditure is progressing as expected, while the accounts for the General Assembly and other items are still being wrapped up.

BOARD OF DIRECTORS MEETING – 17 APRIL 2025

Policies

Request from Europeans for Safe Connections

- ▶ The Board decided to decline the invitation for the dialogue as it is out of scope of CPME activities.

The Board suggested to keep in touch with the developments, and publications on this issue.

Engagement with EMA in the new mandate 2025–2028

- ▶ The Board approved the engagement with EMA in the new mandate of the Healthcare Professionals Working Party for the period 2025–2028.

CPME has been a member of the working party since its creation in 2006.

Update of I2X – Intelligent Implementation of the EEHRxF Project

- ▶ The Board took note of the launch of the EU co-funded i2x project in April. CPME is contributing to tasks relating to needs assessments, ethics and data management, recommendations to policymakers and industry, dissemination and external communication; as well as stakeholders outreach and engagement over the four-year project duration. (See the feature on page 8)

Mental health support for doctors

- ▶ The Board agreed to conduct a CPME members' survey to map how European countries support mental health of doctors.

The Working Group on Public Health already discussed the survey proposal on 21 March. The survey will explore the data availability, screening programmes, and support systems available in different countries, including information on physician burnout, addiction, and suicide.

BOARD OF DIRECTORS MEETING – 17 APRIL 2025

NMA Safe Staffing survey

- ▶ The Board agreed to adopt the survey by written procedure to allow for amendments to be processed.

AHEAD Project on the security of healthcare and hospital infrastructure

- ▶ The Board decided to contact the Estonian, Finnish and Irish medical associations, as well as Prof. Dr Georgios Raptis, CPME Rapporteur on Interoperability, for their potential expertise on the security of healthcare and hospital infrastructure.

CPME was contacted by the Horizon Europe AHEAD project (2023–2026) which aims to develop a strategic foresight methodology for law enforcement agencies to support long-term policy solutions for civil security concerns. As part of their actions, they are assessing the security of healthcare and hospital infrastructure in the European Union. They are conducting online expert surveys to elicit possible scenarios and future trends in April 2025.

Joint statement on incentives

- ▶ The Board agreed to politely decline an invitation to endorse the European Cancer Leagues joint statement on incentives in the context of the revision of the general pharmaceutical legislation.

European healthcare professionals encourage citizens to check their vaccination status

On 28 April, the Coalition for Vaccination, co-chaired by CPME, published a [press release](#) to mark the annual WHO European Immunization Week (EIW), encouraging citizens to check their vaccination status.

This year's EIW campaign highlighted the urgent need to achieve high and equitable vaccination coverage in every community to prevent outbreaks of different vaccine-preventable diseases now and in the future under the theme "Immunization for all is Humanly Possible".

The Coalition emphasised particularly the recent in measles outbreaks in certain European countries. In March, the World Health Organization [reported](#) the highest number of measles cases in Europe in more than 25 years.

Also the European Centre for Disease Prevention and Control (ECDC) [highlighted](#) that measles cases in the European Union and European Economic Area during the past year have increased considerably and that eight out of ten people who were diagnosed with measles were not vaccinated.

Moreover, fourteen deaths attributable to measles were [reported](#) to the ECDC during the most recent 12-month period in Romania.

The Coalition for Vaccination members emphasise that immunisation with two doses of the measles, mumps and rubella (MMR) vaccine is proven to be the safest and most effective way to protect individuals and populations against these highly contagious diseases.

Healthcare professionals encourage adults and parents to check their and their children's vaccination status and to get vaccinated according to the national immunisation schedules.

Over 120 organisations back health ministers' urgent call to revise EU tobacco directives

CPME, as a partner in the Smoke Free Partnership (SFP) Coalition, has [joined forces](#) the European Respiratory Society (ERS), the European Cancer Organisation (ECO), and the European Network for Smoking and Tobacco Prevention (ENSP) to express full support for the 12 EU Member States urging the European Commission to revise the Tobacco Products Directive, the Tobacco Advertising Directive, and the Tobacco Taxation Directive without further delay.

As leading European voices in public and respiratory health, and cancer prevention, the aforementioned organisations strongly align with the urgent call to action by 12 national ministers to reinforce EU tobacco control measures and prevent a resurgence of tobacco-related harm. Without updated legislation, Europe risks reversing the progress made in reducing tobacco use and protecting citizens, especially young people, from addiction, preventable cancer and cardiovascular diseases.

Tobacco remains the leading cause of preventable death in the EU, claiming over 700,000 lives annually and accounting for 27% of cancer cases. While the 2014 revision of the Tobacco Products Directive led to some reduction in smoking rates, recent data show a concerning trend. According to the 2024 Eurobarometer, traditional cigarette use among 15- to 24-year-olds has risen from 20% to 22% between 2020 and 2023. E-cigarette use increased from 4% to 6%, and the popularity of heated tobacco products and nicotine pouches continues to grow among young people.

The SFP, ERS, ECO and ENSP stress that these alarming trends directly undermine the goal of Europe's Beating Cancer Plan, which aims to create a "Tobacco-Free Generation" by 2040. If the EU wants to meet its commitment to cancer prevention and health promotion, it must take swift and coordinated action to modernise tobacco control legislation. The continued delay in revising the core EU tobacco control directives is deeply alarming. This legislative stagnation has opened the door for the tobacco and nicotine industry to exploit regulatory gaps, and aggressively promote novel products, especially to young people. Without urgent updates, the EU undermines its own public health goals and reverses the significant progress achieved over the past decade.

FEATURE

i2x project kick-off meeting plans the "Intelligent" Implementation of the European Electronic Health Record Exchange Format (EEHRxF)



Sara Roda (CPME Senior Policy Adviser) presents the CPME policy

The kick-off meeting was held in Lisbon on 28–29 April, bringing participants together despite the blackout in the Iberian Peninsula. The €8 million EU co-funded project aims to implement the European Electronic Health Exchange Format (EEHRxF).

Senior Adviser Sara Roda presented the CPME policy on “Implementing a ‘user-friendly’ European Health Data Space” in a panel debate composed by the ULS Coimbra (healthcare provider unit), moderated by a representative from Uphill (industry implementer).

The use cases of the project are yet to be chosen. CPME proposed that the use cases relate to the exchange of health data between 1) private to private healthcare professional (HCP to HCP), 2) public to private and private to public, 3) patient summary automatic update from report.

Other partners requested 4) admission (first consultation and emergency room example); and 5) HCP to patient (synergy with MyHealth@MyHands).

FEATURE

The CPME policy adopted in March served as basis for the initial discussions, bringing to the table the main needs and challenges for doctors. It was clear for all in the consortium that this project has the objective of supporting HCPs. The intelligent tools that the consortium is considering, and proposed by CPME, are:

1. the speech to text and then to code (other members of the consortium added the need to provide products in open-source format)
2. automated coding for natural language processing, and other members of the consortium proposed transforming codes to other codes - a conversion tool;
3. auto-population features for the patient summary.

Other partners mentioned, and we also supported:

- summarising of the EHR,
- adding a search function, and
- the risk profiling of the patient.

Demonstrator sites will be located in the following countries:	
Belgium – WP4 (Patient summary and ePrescription) + WP5 (Lab, imaging and discharge reports)	
Cyprus – WP4 and WP5	Czech Republic – WP4 and WP5
Finland – WP4 and WP5	France – WP4 and WP5
Greece – WP4 and WP5	Portugal – WP4 and WP5
Spain – WP4 and WP5	Germany – WP5 only
Italy – WP5 only	
Netherlands and Ireland are part of the project but they are not demonstrator sites.	

The next step is for CPME to discuss the systematic assessment that is to be launched in the form of a questionnaire. Dr Iztok Štötl of the Slovenian Medical Chamber will participate in the project, supported by the following secretariat staff: Sara Roda, Sarada Das, Alessandra Foresti and Calum MacKichan.

Consortium members were also encouraged to participate at the IHE Vienna Connectathon from 23-27 June 2025 and the Plugathon that will take place on the EHDS during those days.

MONITORING

Political Outlook

Operating grants to health NGOs in doubt

Politico reported this month that European Commission officials have warned health NGOs not to expect any grants this year. Several of our partners rely on these grants, such as the Smoke Free Partnership, Eurocare, Mental Health Europe, the European Public Health Alliance, EuroHealthNet, and numerous others. A group of NGOs has written an open letter to President Ursula von der Leyen to urge to European Commission to adopt a 2025 Workplan for EU4Health and guarantee full-year operational funding for civil society.

Commission welcomes significant step towards Pandemic Agreement

On 16 April 2025, the [preliminary consensus](#) on the Pandemic Agreement was reached in Geneva by the Intergovernmental Negotiating Body reinforcing international cooperation and solidarity in health. This agreement will contribute to reinforcing capacities for pandemic prevention, preparedness and response using a One Health approach.

The World Medical Association (WMA) [welcomed](#) the progress and has continuously advocated for the medical profession throughout the negotiations. Moreover, the WMA will keep supporting the implementation phase through its global medical networks, technical expertise, and sustained advocacy. The Pandemic Agreement is set to be formally adopted in May.

MONITORING

Public Health

Europe not on track to reach 2030 Sustainable Development Goal targets on HIV, TB, viral hepatitis B and C and STIs

On 23 April, the ECDC [reported](#) that viral hepatitis, HIV, sexually transmitted infections (STI) and tuberculosis (TB) continue to be public health issues in the European Union and European Economic Area, causing substantial morbidity and nearly 57 000 deaths annually. Progress towards achieving the Sustainable Development Goal to end epidemics of the infections by 2030 is slower than expected. While new HIV infections have decreased by 35% since 2010, progress is not fast enough to meet the 2025 target. The incidence of TB has dropped by 35% since 2015, but treatment success rates are still below the 90% target. Available data indicates considerable gaps in meeting testing and treatment coverage targets for hepatitis B and C, with no indication of a decline in mortality rates. Cases of STIs like syphilis and gonorrhoea are rising, reaching the highest levels since ECDC started monitoring in 2009. To meet the targets, there is a need to scale up prevention measures, improve testing services, and enhance data collection to better track progress.

Increases in vaccine-preventable disease outbreaks threaten years of progress, warn WHO, UNICEF, Gavi

On 24 April, the WHO, UNICEF, and Gavi [highlighted](#) the importance of sustained investment and political commitment to immunisation. They warn that efforts are under increasing threat due to misinformation, funding cuts, population growth and crises. Globally, there is a rise in outbreaks of vaccine-preventable diseases, such as measles, meningitis, and yellow fever, while illnesses like diphtheria that were once largely controlled or nearly eradicated in many countries. According to the WHO, amid global funding cuts, nearly half of low- and middle-income countries are facing disruptions to vaccination campaigns and disease surveillance. At the same time, around 14.5 million children missed all routine vaccinations in 2023, mostly in conflict-affected areas. Despite challenges, vaccines still save over 4 million lives annually, with a key progress seen in HPV vaccination, meningitis prevention, and the introduction of malaria vaccines.

MONITORING

How to stop the next pandemic: ECDC publishes guidance to strengthen public health preparedness in the EU/EEA

On 2 April, the European Centre for Disease Prevention and Control has published a set of [recommendations](#) for preparedness planning for public health threats.

The document highlights the lessons learned primarily from the COVID-19 pandemic, with insights gathered through various activities involving EU Member States, the European Commission, WHO, and the WHO Regional Office for Europe.

These lessons have been used to develop concrete recommendations for public health planners. The recommendations are structured around the continuous cycle of preparedness: Anticipation, Response, and Recovery.

The goal is to provide practical, actionable guidance based on past experiences to strengthen preparedness for future health crises.

Air quality steadily improving but EU standards still not fully met, latest EEA data analysis shows

On 9 April, the European Environment Agency (EEA) [published](#) air quality data analysis for 2023 and 2024. The EEA's air quality status [report](#) 2025 provides the most recent official data on key air pollutants in Europe, covering the last two years. It compares these pollutant levels with both the current and 2030 EU air quality standards, as well as the World Health Organization's health-based air quality guideline levels.

This report highlights even though air quality is steadily improving across Europe additional measures to improve air quality, especially in cities, will be required to fully meet current EU standards as well as recently agreed future air quality standards by 2030.

Pharmaceuticals & Healthcare

Clinical Trials Information System designated as WHO primary registry

On 3 April, the EMA announced that the Clinical Trials Information System (CTIS) has been [designated](#) as a primary registry by the World Health Organization within the International Clinical Trials Registry Platform.

Being a primary registry means that CTIS meets certain standards for content, data quality, validity, accessibility, unique identification, technical capabilities, and management. This guarantees that healthcare decision-makers worldwide can access thorough research information.

Health Technology Assessment: First joint clinical assessments begin

On 16 April 2025, the first pair of joint clinical assessments for medical products began under the Health Technology Assessment Regulation (EU 2021/2282). One evaluates pediatric cancer therapy and the other examines an advanced therapy medicinal product for skin cancer. The joint clinical assessment reports produced for medicinal products and medical devices will be considered by Member States in their health technology assessment at national level, facilitating access pathways for patients to innovative health technologies. A factsheet is available [here](#) including the process of the joint clinical assessment.

MONITORING

Professional Practice

83% of people live within a 15-minute drive of a hospital

On 7 April, the Eurostat published an [article](#) reporting that, in 2023, 83.2% of the EU population lived within a 15-minute drive of a hospital. Collected data shows that at level 3 of the nomenclature of territorial units for statistics (NUTS 3), a total of 124 regions in the EU had 100% of their population within this range, with 96 of these regions located in Germany.

According to the analysis, 97 regions had less than 50% of their population within a 15-minute drive of a hospital. These included 21 regions in Romania, 15 in Greece, 9 in Croatia and Spain, 8 in Poland, and 6 each in Ireland, Portugal, and Slovenia. Among them, seven regions, mainly in Greece and Romania had especially limited access, with fewer than 10% of the population living within the 15-minute range.

FEMS conference at the European Parliament

On 23 April, CPME Secretary General Sarada Das attended the FEMS event in the European Parliament on the topic "Salaried doctors in Europe: challenges, rights and future policies – Dialogue on the [FEMS White Book](#) and beyond", hosted by MEP Dr Raffaele Topo.

The White Book aims to address the urgent challenges faced by the medical profession: the current crisis in the profession, marked by significant gender and generational shifts, a growing workforce shortage, and increasing public health demands, calls for a new vision and innovative solutions to overcome the critical issues affecting employed doctors.

The conference also discussed the working conditions of employed doctors across Europe, based on data presented in the White Book, to explore, from a union perspective, how to redesign these working conditions as a vital first step toward building resilient healthcare systems in Europe and to foster a dialogue that underscores that health is a fundamental right.

MONITORING

Digital Health

Commission seeks contributions to enhance cybersecurity for hospitals and healthcare providers

Several cybersecurity incidents impacting the healthcare sectors have occurred in the recent years. The Action Plan released last January addressing these specific threats requires an effective implementation. Consequentially, the European Commission invites stakeholders to contribute to this [consultation](#) until the 30 June 2025. The results will help contributing to the recommendations that the Commission plan to present by the end of the year. CPME is liaising with experts at the national level to provide input to a study supporting the process.

Commission presents a European internal security strategy

On 1 April 2025, The European Commission released a [Communication](#) on ProtectEU strategy highlighting the need for a comprehensive and coordinated approach to addressing current and future security challenges, including cyber threats, and hybrid threats. The strategy aims to improve the resilience of EU Member States, strengthen cooperation between them, and ensure the protection of citizens while respecting fundamental rights. The document also stresses the importance of investing in innovative technologies to respond more effectively to emerging risks.

WHO announces new collaborating centre on digital health in Germany

On 9 April, WHO/Europe [announced](#) the designation of the European Campus Rottal-Inn (DIT-ECRI) at Deggendorf Institute of Technology in Germany as a collaborating center on digital health. DIT-ECRI will support WHO in strengthening digital health systems through policy development, training, research, and evaluation of digital health interventions, with a collaboration period of four years and possible extension. The goal of the center is providing data, analyses, and evidence-based recommendations to enhance digital health policies and ethics frameworks.

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