



Vice President Ole Johan Bakke attended a hearing of the Turkish Medical Association in Ankara (see page 8)

## Dear colleagues

This edition follows the Board meeting held on 15 June, which marked the current Board of Directors' mid-term meeting and provided the chance to reflect on our association's priorities.

The first half of our mandate has seen our association continue to grow from strength to strength, defending the medical profession's point of view on topics such as the European Health Data Space and the revision of the EU's general pharmaceutical legislation. We also had the chance to look forward by considering our campaign messages for next year's European Parliament elections.

It has been a privilege to lead our association for the past year and a half, and together with my fellow Board members, I look forward to continuing this work in partnership with our members and the secretariat.

**Dr Christiaan Keijzer**

CPME President



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## BOARD OF DIRECTORS MEETING – 15 JUNE 2023

## Internal Affairs

### Priorities and Rapporteurs

- ▶ The Board reviewed the associations' priorities, deciding on which dossiers to prioritise for the second-half of the Board's term and noting where new rapporteurs are required.

In the area of **Public Health and Disease Prevention**, the ranking between the active and the monitoring dossiers was not changed but it was noted that the end of the IMMUNION vaccination project and the potential follow-up actions on the European Commission's recent communication on mental health may change the balance in the near future. The Board also decided to search for a new Chair of the WG on Climate Change.

In the area of **Professional Practice and Health Systems**, the Board decided to search for a new rapporteur on refugee health, noting the increased interest given the refugee inflow resulting i.a. from the war in Ukraine.

In the area of **Digital Health**, the Board added e-IDAS as a monitoring file.

In the area of **Pharmaceuticals and Healthcare**, the Board decided to upgrade medical devices to active dossiers and to search for a new co-rapporteur on medical devices.

In the area of **Principles, Patients and Ethics**, the Board agreed to consult the membership for co-rapporteurs on the work on the independence of the medical profession. It was also agreed to move the engagement with the Patient Access Partnership (PACT) to this policy cluster.

### Health priorities for European elections 2024

- ▶ The Board discussed and revised a first draft of key campaign messages for the European elections 2024.

The document will be shared to the members for feedback until 4 September, and discussed at the Board meeting on 14 September. The messages will be voted for adoption during the General Assembly on 11 November.

**BOARD OF DIRECTORS MEETING – 15 JUNE 2023****Event calendar**

- ▶ The Board discussed the CPME conference and event planning 2023, adding the option for a joint event with the Pharmaceutical Group of the European Union.

**Review of rebranding and communication**

- ▶ The Board took note of the analysis of our communication tools and agreed recommendations to advance our communication efforts during the second half of the Board mandate.

The recommendations include engaging the members' communication network during European election campaign.

**Rules of Procedure**

- ▶ Following the decision of the Board on 26 May 2023 regarding communication to non-members, the Board agreed that future requests to join CPME WG are to be assessed by the Board of Directors.

**General Assembly preparations**

- ▶ The Board decided to hold the Tallinn GA as an in-person only meeting with a view to making CPME meetings more economically sustainable.

## BOARD OF DIRECTORS MEETING – 15 JUNE 2023

## Policies

### Quality of basic medical education

- ▶ The Board reviewed the situation described by the Polish Medical Chamber in its request for support and decided to arrange a webinar to address the concerns and facilitate a constructive dialogue on the quality of Basic Medical Education.

### WHO/Europe novel medicines platform

- ▶ The Board decided to participate in the WHO/Europe Novel Medicines Platform.

Prof. Ludwig, Chair of the Working Group on Pharmaceuticals will be nominated as the CPME representative, with technical support from the EU Policy Adviser. Following a recommendation from the WG on Pharmaceuticals, CPME will apply for the working groups – WG1 (transparency) and WG 3 (sustainability and pricing).

### Clinical Trials Information System (CTIS)

- ▶ The Board decided to submit a response to the public consultation on the transparency rules for the operation of CTIS in consultation with WG Chair and Rapporteur on clinical trials Prof. Ludwig.

### European Health Data Space

- ▶ The Board decided to approve a draft joint statement on the European Health Data Space (EHDS).

The statement was being prepared together with other healthcare professions and providers, in particular CED (dentists), PGEU (pharmacists) and HOPE (hospitals and healthcare services). EFN (nurses) will also be invited to co-sign

## BOARD OF DIRECTORS MEETING – 15 JUNE 2023

## Policy on the health effects of cannabis

- ▶ The Board decided to divide the draft CPME policy on the health effects of cannabis in two: policy recommendations and a compilation of scientific evidence on the health effects of cannabis consumption.

The Working Group on Healthy Living had discussed the draft policy on 8 June, and the German Medical Association had suggested splitting the document. The drafts will be circulated for further consultation.

## Doctors as parents

- ▶ The Board took note of a concept note, and decided to prepare a policy on doctors' wellbeing for adoption at the General Assembly in November.

The policy will be drafted to explore the concept of doctors as parents and highlights the importance of implementing family-friendly measures in their work life as a key focus under the general framework of promoting work-life balance and enhance overall well-being and job satisfaction. The scope of the policy and specific messages are being elaborated in cooperation with Rapporteur for Health Workforce Dr Jacques de Haller.

## Turkish Medical Association

- ▶ The Board took note that the Executive Council of the Turkish Medical Association would be on trial on 22 June in Ankara and may be dismissed from their duty.

CPME Vice President Dr Ole Johan Bakke would travel to Ankara to observe the hearing. CPME has written a joint letter to Turkish authorities with the WMA and is preparing follow up action.

## Healthcare professions call for trustworthy European Health Data Space that reduces administrative and financial burden

Doctors, dentists, community pharmacists, nurses and hospitals call upon the co-legislators to ensure the draft EHDS regulation brings trust into the system and is workable for healthcare professions.

The [joint statement](#) calls upon the co-legislators to:

- Respect ethical principles of patient confidentiality and professional secrecy
- Exclude healthcare professionals from providing data again for secondary use
- Bring clarity and certainty for liability of healthcare professionals in the electronic health record (EHR)
- Provide financial compensation for digitisation costs

## European Commission publishes new comprehensive approach to mental health

A new comprehensive approach to mental health was [published](#) by the Commission. The goal of this approach is to bring mental health on par with physical health and ensure a new, cross-sectoral approach to mental health. Putting people and their mental health first, the Commission will support Member States with 20 flagship initiatives and €1.23 billion in EU funding. Three principles will guide the EU's action on mental health: (i) adequate and effective prevention; (ii) access to high-quality and affordable mental healthcare and treatment; and (iii) reintegration into society after recovery.

Several months ago, CPME, together with Mental Health Europe (MHE), published the [Joint Statement](#) "A Mental Health in all policies approach as key component of any comprehensive initiative on mental health". Endorsed by 78 organisations and 25 individuals (including 9 MEPs), the Joint Statement provides recommendations to the EU and to European countries.

## Continuous threat of legal action challenges Turkish Medical Association's autonomy and independence

The threat of dismissal of the 11 members of the Turkish Medical Association's (TMA) Central Council remains after a trial scheduled for 22 June was further delayed until 10 November. The entire Central Council is threatened with dismissal on arbitrary charges. The trial was previously delayed following the earthquake in Türkiye and Syria on 6 February, during which time the TMA helped to provide and coordinate health services in the affected areas.

CPME Vice President Dr Ole Johan Bakke, travelled to Türkiye to observe the planned trial in Ankara. Dr Bakke said "European doctors will continue to follow the legal action against the Turkish Medical Association closely. We call on the Turkish authorities to safeguard the TMA's autonomy and independence, and treat it as a constructive partner in addressing public health priorities in the interests of patients."

Earlier in June, CPME and the World Medical Association issued a Joint [letter](#) to the Turkish authorities.

## MEPs push for tougher air quality rules

On 27 June, the European Parliament's ENVI Committee [adopted](#) its position to improve air quality in the EU. The report sets stricter 2030 limit and target values for several pollutants including particulate matter (PM2.5, PM10), nitrogen dioxide (NO2), sulphur dioxide (SO2) and ozone (O3). MEPs also say that upcoming reviews of this directive shall ensure full and continuous alignment with the most recent WHO guidelines.

CPME has been calling for this for years and is pleased to see that the advocacy efforts of health organisations are bearing fruit. The Parliament is scheduled to adopt its mandate during the July 2023 plenary session. Once the Council of the EU has adopted its position, a trilogue between the three EU institutions can start.



## Cross-border access to electronic evidence: e-Evidence Regulation finale

On 13 June, the e-Evidence Regulation was formally adopted by the European Parliament. The regulation allows an authority of one Member State to request directly from a service provider established or represented in another Member State to produce or preserve electronic data needed for the investigation and prosecution of crimes, regardless of the location of this data. To this end, the text introduces two new investigative measures: the European production order and the European preservation order. The latter would be used with a view to a subsequent request for the production of data. CPME collaborated on this file with the European Digital Rights (EDRI) association and 13 other organisations preparing [a Joint Compendium: Demonstrating Gaps in the e-Evidence Regulation](#) (October 2021).

CPME co-signed a [joint letter](#) in November 2022 and, more recently, in June 2023, a [final joint letter](#) ahead of the concluding vote, reiterating the concerns on the safeguards to protect medical secrecy and confidentiality. The latter point reflected CPME policy from 2021 (see [statement](#)). It would have been preferable that 'cutting corner' practices from law enforcement authorities do not take place in the EU. However, considering that criminal investigations increasingly rely on electronic evidence, covering both 'content data' (such as e-mails and photographs), and 'non-content data', such as subscriber and traffic data, and given that many service providers are located or store data outside the country of investigation, the approved Regulation does include minimal acceptable safeguards for professional secrecy.

## CPME reaction to Ireland's alcohol labelling law reported

Our policy on alcohol labelling was [featured](#) in the prominent EU publication Euractiv, in reaction to Ireland's new policy to display preventive health messages on alcohol. Our call for the EU to adopt legislation obliging alcohol producers to indicate ingredients and nutritional values on the label was reported in a quote by Assoc Clin. Prof. Dr Ray Walley.

## Call for rapporteurs

CPME is looking for new rapporteurs and chairs of the working groups:

- Rapporteur on Medical Devices
- Rapporteur on Refugee Health
- Chair of the Working Group on Healthy Living
- Chair for the Working Group on Climate Change
- Co-rapporteur on the independence of the medical profession

CPME members are welcome to propose experts, including those beyond their delegations to CPME if they can assist them in fulfilling their role (see Rules of Procedure).

### Rapporteur on Medical devices

We are looking for a co-rapporteur to provide expertise and support our policy work on medical devices, including through participation in meetings of the Medical Devices Coordination Group (MDCG).

CPME's focus on this dossier is to provide medical profession's perspective to the implementation process of the new Medical Devices Regulation, as well as ensuring continuous availability of medical devices. In the years to come, it will be important that high safety standards remain present in the EU regulatory framework. The European Commission launched several projects such as a survey on the implementation progress, a joint action on market surveillance, orphan devices support programme, focussed on paediatrics, and study on innovation and governance. The preparations for a revision of the updated framework have started.

A new co-rapporteur would join Dr Katrin Fjeldsted in supporting CPME secretariat.

## CPME NEWS

## Rapporteur on Refugee Health

CPME is seeking for a new rapporteur on refugee health, noting the increased interest in the topic in light of the rising numbers of refugees resulting i.a. from the war in Ukraine.

In the CPME statement on the medical treatment of refugees, CPME emphasises doctors' ethical responsibility for equitable care to all patients, irrespective of status. CPME also implements its policy on refugee doctors.

By joining CPME as a rapporteur, you will work alongside CPME secretariat to contribute to the development and implementation of effective policies in the field of refugee health.

## Chair for the Working Group on Healthy Living

This WG is dealing mainly with alcohol, nutrition, and tobacco policies but it has also discussed other topics such as physical activity. Currently, it is drafting a policy on the health effects of cannabis. In the near future, it aims to contribute to the following EU's legislative processes: the introduction of European alcohol and front-of-pack nutrition labelling rules, the revision of the directives on tobacco products, taxation, and advertising. Moreover, CPME and a number of other organisations are developing a campaign on unhealthy food marketing.

## Chair for the Working Group on Climate Change

This WG recently completed a policy on climate change and health. CPME keeps promoting this policy as it tackles various aspects of climate change, including the emissions of healthcare sector. CPME is also very active in the revision process of the EU air quality directives. The EU institutions are currently forming their position in order to start the trilogue negotiations. Finally, the annual Lancet Countdown process on climate change and health is expected to start soon. Since 2018, CPME has been co-publishing briefings and recommendations for EU policymakers.

## Co-rapporteur on the independence of the medical profession

Following discussions at the CPME meetings in March, a survey will be carried out to map challenges to the independence of the medical profession in Europe. The co-rapporteur will cooperate with the responsible VP and secretariat to design and evaluate the survey for presentation at a forthcoming meeting. Members' requests for support in this matter will also be consulted with the rapporteurs.

## MONITORING

The Secretariat monitors the news and uploads [weekly monitoring reports](#) the members' section of the website. In the following pages we include a selection of the most relevant news items.

## EU Political Outlook

### Employment, Social Policy, Health and Consumer Affairs Council, 12–13 June 2023

- **Antimicrobial Resistance:** The Council has adopted a recommendation on AMR, taking a 'One Health' approach and aiming to encourage the prudent use of antibiotics in human and animal health through voluntary measures.
- **European Health Data Space:** The ministers reviewed the progress made so far on the EHDS. By establishing a health-specific data-sharing framework, the proposed regulation aims to facilitate the safe exchange of patients' data, as well as give EU citizens control over their health data. The progress report of the Swedish Presidency can be found [here](#).
- **European Medicines Agency:** The health ministers agreed on the Council's general approach to modernising and simplifying the structure of fees payable to the European Medicines Agency (EMA). EMA's proposed regulation aims to ensure that its fees are cost-based, as well as simplify the current legal framework.
- **Substances of human origin:** Following a progress report prepared by the Swedish presidency, the Council assessed the state of play of the proposal for a regulation on standards of quality and safety for substances of human origin (SoHO) intended for human use. With a view to establishing high standards of quality and safety for SoHOs, the proposed regulation would update and expand existing EU legislation on blood, tissues, and cells.
- **Pharmaceutical innovation:** A needs-driven approach to pharmaceutical innovation was discussed by delegations from Austria, Belgium, Ireland, Luxembourg and the Netherlands. In a patient-centred healthcare system, research and development should be driven by the needs of patients and society rather than maximising return on investment.
- **Other business:** Other topics of discussion were the international agreement on pandemic prevention, preparedness and response, the International Health Regulation, the Commissions communication on mental health, a European Day in memory of the victims of the Covid-19 pandemic, and information of the Spanish presidency on its work programme (health).

## MONITORING

## EU-UK relations: EU takes further steps to implement the Windsor Framework

The EU is continuing to implement the [Windsor Framework](#), which was politically agreed between the Commission and the UK government on 27 February 2023. The Council has adopted three regulations to implement joint solutions with the UK on public health, animal health, plant health, medicines, and steel products. With the new rules, moving goods from Great Britain to Northern Ireland will be considerably easier if they are destined for final consumption there. Meanwhile, safeguards will be implemented to prevent such goods from entering the EU's single market and ensure the protection of public, animal, and plant health and consumer interests.

## 11 smallest countries in WHO European Region adopt landmark statement committing to key actions to improve people's health

Ministers and high-level officials from the 11 smallest countries in WHO/Europe have adopted the [Luxembourg Statement](#), committing to improve healthcare in their respective countries. The statement focuses on access to medicines, mental health, digital tools, the health workforce, and noncommunicable disease prevention.

## Monitoring report on progress towards the Sustainable Development Goals in a European context

The European Commission launched a [publication](#) presents an analysis that builds upon the EU Sustainable Development Goals indicator set, developed in collaboration with multiple stakeholders. It offers insights into progress made in climate action, including measures taken to adapt to the challenges of climate change. Furthermore, this 2023 edition delves into the impacts of Russia's invasion of Ukraine and the ongoing COVID-19 pandemic. Drawing from Eurostat's official statistics, it sheds light on the repercussions observed during 2022 and the early months of 2023.

## Professional Practice and Health Systems

### WHO records more than 1000 attacks on health care in Ukraine over the past 15 months of full-scale war

WHO has [recorded](#) over 1,000 attacks on healthcare in Ukraine since the Russian invasion last year, the highest number in any humanitarian emergency. These attacks have hindered access to healthcare for thousands, resulting in increased risks of illness and death. At least 101 lives, including health workers and patients, have been lost, and many more have been injured. The attacks have severely impacted health providers, supplies, facilities, and transportation. Urgent support and protection for healthcare facilities and personnel are needed.

### New WHO report outlines concrete steps to make health care more accessible for people in Ukraine

A recent WHO/Europe [report](#) reveals that financial hardship in Ukraine's healthcare system is primarily caused by out-of-pocket payments for medicines and inpatient care. To improve financial protection, the report suggests prioritising comprehensive primary care, reducing informal payments for inpatient services, and enhancing the capacity of the National Health Service of Ukraine.

## MONITORING

## Pharmaceuticals and Healthcare

### EU leaders want the Commission to propose Critical Medicines Act

The European Council addressed the issue of shortages of the most critical medicines and components in Europe. Following the written statement of 19 Member States, the European Council discussed the issue and included a clear call in its [Conclusions](#). The document reads: *The European Council invites the Commission to propose an initiative for urgent measures to ensure sufficient production and availability of the most critical medicines and components in Europe and to diversify international supply chains, while inviting the co-legislators to continue and accelerate work on the proposed reform of the pharmaceutical legislation, including as regards access to medicines and an innovative and competitive pharmaceutical sector.*

### Ombudsman asks European Medicines Agency how it ensures proactive transparency of clinical trial data

The European Ombudsman has [inquired](#) about EMA's proactive transparency policy regarding clinical trial data for medicines under evaluation for potential EU market authorisation. The Ombudsman emphasises the importance of transparent clinical trial data for accountability, patient benefit, scientific innovation, and avoiding unnecessary testing of pharmaceutical products. EMA suspended its proactive transparency policy since 2018 due to relocation and pandemic-related priorities, but intends to relaunch it in September 2023 for products with new active substances. CPME signed a [joint letter](#) to EMA calling for clinical trials transparency in October 2022.

### WHO outlines 40 research priorities on antimicrobial resistance

WHO) has [unveiled](#) a global research agenda comprising 40 priorities to combat antimicrobial resistance (AMR) by 2030. Covering drug-resistant bacteria and fungi, the agenda aims to drive innovation and implementation research, focusing on various aspects including epidemiology, prevention strategies, diagnostics, treatment, data collection, and policy translation.



## MONITORING

## EMA and ECDC statement on updating COVID-19 vaccines to target new SARS-CoV-2 virus variants

The European Centre for Disease Prevention and Control (ECDC) and the European Medicines Agency (EMA) in a [joint statement](#) recommended updated vaccines to target dominant XBB strains of COVID-19 worldwide. Existing vaccines still protect against severe disease, but their effectiveness declines over time due to new variants. Monovalent vaccines are advised for both dominant and emerging strains. Priority for future vaccinations should be given to vulnerable groups. They suggest a minimum interval of 3–4 months between revaccination doses, with the specific rollout determined by national authorities.

## How can the EU support sustainable innovation and access to effective antibiotics?: Policy options for existing and new medicines

A [policy brief](#) by the European Observatory on Health Systems and Policies highlights the urgent need to address antimicrobial resistance (AMR) due to its significant public health and economic impacts. It calls for addressing barriers to antibiotic development, implementing a holistic package of incentives, ensuring timely access to antibiotics, improving access through short- and long-term measures, and emphasising the EU's role in combating AMR and contributing to global solutions.

## MONITORING

## Public Health and Disease Prevention

### Cannabis laws in Europe: questions and answers for policymaking

A number of frequently asked questions regarding cannabis legislation are answered in this [publication](#). Despite focusing primarily on recreational cannabis, relevant legislation for other uses, such as medical and commercial cannabis-derived products such as cosmetics, wellness products and foods, is included in order to provide the necessary context for various policy initiatives.

### Hearing on Non-communicable diseases & mental health (SANT)

The SANT Subcommittee [hearing](#) focused on the prevention of non-communicable diseases (NCDs). The invited experts highlighted the need for tackling NCDs, as they are the first cause of death in the EU. They stressed that the incidence of NCDs is rising, that NCDs have a substantial impact on the economy and that NCDs are preventable. One expert highlighted that diabetes is one of the major root causes of many other NCDs and implications. Members of SANT also held their first debate on their upcoming own-initiative report on mental health. MEPs noted the importance of addressing mental health comprehensively, and promoting good mental health should be a priority. MEP Maria Angela Danzík stressed the link between cannabis consumption and mental health issues in youth.

### Council gives final green light to creation of EU drugs agency

The Council [adopted](#) a legislative act which will replace the existing European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) with a European Union Drugs Agency. The agency will play a key role in the EU's response to new health and security challenges posed by illicit drugs. The seat of the agency will continue to be in Lisbon, Portugal. It will focus on data collection, monitoring, analysis, early warning, risk assessment, and evidence-based recommendations. The regulation also enhances the agency's role in international cooperation, actively seeking partnerships with international organisations and involving third countries in its work.

## MONITORING

## New WHO AI tool invites people to counter online promotion of unhealthy products

WHO/Europe is [calling](#) on consumers to contribute to the training of an AI tool that will aid in monitoring and regulating the promotion of harmful products targeting children, such as tobacco, alcohol, and unhealthy foods. By sharing screenshots and pictures of such advertisements using the provided web tool, individuals over 18, parents, health professionals, and those passionate about a healthier environment can actively participate in creating a healthier society. You can participate from the [link](#).

## Deal on better protecting EU workers from the risks of asbestos

New asbestos [rules](#) in the EU aim to protect workers and detect asbestos early. Negotiators from Parliament and Council reached an agreement on the Asbestos at Work directive. After a transition period of up to six years, member states must use electron microscopy to detect asbestos fibres, reducing the level to 0.002 or 0.01 fibres per cm<sup>3</sup>. The rules also provide guidelines for avoiding exposure, including the use of protective equipment, proper cleaning of clothing, decontamination procedures, and worker training.

## European Drug Report 2023: illicit drugs remain highly accessible

According to the [annual report](#) released by the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA), illicit drugs remain highly accessible throughout Europe, with an increase in drug production and availability. The report reveals that many substances have become stronger, with alarming levels of purity, while public awareness of health risks remains limited. Cocaine, the second most widely consumed drug in Europe after cannabis, has seen a 43% increase in purity over the past decade, contributing to a rise in overdose cases. The report also highlights the emergence of alternative cocaine import routes and a secondary production industry within Europe. Cannabis remains the most prevalent illegal drug in Europe, with concerns raised about derivatives such as hexahydrocannabinol (HHC) posing health risks.

## MONITORING

## Increasing risk of mosquito-borne diseases in EU/EEA following spread of Aedes species

According to the [latest data](#) from the European Centre for Disease Prevention and Control (ECDC), the mosquito species *Aedes albopictus*, known for transmitting chikungunya and dengue viruses, is expanding its range further northwards and westwards in Europe. Additionally, *Aedes aegypti*, which transmits dengue, yellow fever, chikungunya, zika, and West Nile viruses, has become established in Cyprus since 2022 and may continue spreading to other European countries. The warming trend in Europe, with more frequent heatwaves, flooding, and longer, warmer summers, creates favourable conditions for these invasive mosquito species. Efforts are needed to control mosquito populations, enhance surveillance, enforce personal protective measures, and raise awareness.

## Commission publishes Expert Group report on health promotion and disease prevention indicators

An EU Expert Group on Health Systems Performance Assessment (HSPA) [report](#) titled "Mapping metrics of health promotion and disease prevention for health system performance assessment" has been released by the Commission. Data collection indicators used by EU Member States to collect data about disease prevention and health promotion are examined in the report. According to the report, cancer screening and vaccination coverage are the most commonly used indicators to measure prevention activities, but some countries also consider lifestyles and risk factors, as well as socio-economic factors beyond the health system, such as education.

## Integrating Care to Prevent and Manage Chronic Diseases

As people live longer, their health needs become more complex, but they often receive fragmented care. Consequently, countries are supporting patient-centred, integrated care models. To prevent and manage chronic diseases by integrating care, this [report](#) outlines policy recommendations as part of the OECD's work on best practices in public health. An analysis of key integrated care models implemented in OECD and EU27 countries led to policy recommendations.

## MONITORING

## Canada to become first country in the world to require health warnings on individual cigarettes

On World No Tobacco Day, the Canadian Minister for Mental Health and Addictions and Associate Minister of Health [announced](#) that Canada will soon require health warnings to be printed directly on individual cigarettes, becoming the first country in the world to do so. Tobacco Products Appearance, Packaging, and Labelling Regulations are part of the Government of Canada's ongoing efforts to help adults quit smoking, protect youth from nicotine addiction, and to further reduce the appeal of tobacco products. Tobacco products, little cigars, tubes, and cigarettes will have to be labelled with a health warning on their tipping papers. Furthermore, the regulations support Canada's Tobacco Strategy and its goal of reaching less than 5% tobacco use by 2035.

## WHO issues urgent call for global climate action to create resilient and sustainable health systems

At the World Health Organization (WHO) [Strategic Roundtable](#) on the Role of the Health Communities in Climate Action: taking stock and moving forward at the World Health Assembly, urgent climate action was emphasised as a crucial response to the health crisis caused by climate change. The impacts of climate change on health are already being felt, including outbreaks of diseases and a rise in noncommunicable diseases. The WHO Director-General stressed that climate change is a health crisis, posing a threat to health infrastructure and the well-being of communities. The health community was urged to confront three key challenges: addressing health repercussions of climate change, building resilient health systems, and transitioning to a low carbon society. The inclusion of a 'Health Day' at the upcoming COP28 conference was announced, highlighting the recognition of health as a central pillar in climate discussions.

## MONITORING

## WHO/Europe launches its transition plan for COVID-19

As part of its COVID-19 management approach, WHO/Europe is making 13 strategic shifts. [Preparedness 2.0](#), the region's five-year action plan for health emergency preparedness, will incorporate lessons learned from the pandemic and other emergencies. As part of WHO's proposed global health architecture, the plan outlines five core components for managing COVID-19 activities, including collaborative surveillance, community protection, clinical care, countermeasures like vaccination, and coordination. While ensuring the resilience of essential health services and remaining vigilant against new health threats, member states are urged to strategically invest in pandemic preparedness.

## New WHO guideline on food marketing

On 3 July, the WHO released a new [guideline](#) on policies to protect children from the harmful impact of food marketing. It recommends countries implement comprehensive mandatory policies to protect children up to 18 years from the marketing of foods and non-alcoholic beverages that are high in saturated fatty acids, trans-fatty acids, free sugars and/or salt. The publication is part of a suite of forthcoming guidelines on food environment policies.

## EEA Report: Cutting pollution would significantly reduce heart attacks and strokes in Europe

A new [analysis](#) by the European Environment Agency reveals that environmental risks contribute significantly to cardiovascular disease, the leading cause of death in Europe. Addressing issues such as pollution, extreme temperatures, and other environmental hazards is deemed cost-effective in reducing the burden of the disease, including heart attacks and strokes. It is estimated that environmental risks account for more than 18% of cardiovascular disease-related deaths in Europe, with key factors including air pollution, heat and cold, noise, second-hand smoke, and chemicals like lead. To effectively prevent cardiovascular disease, interventions must not only focus on clinical and behavioural risk factors but also target environmental risks and their socioeconomic determinants.

## MONITORING

## WHO/Europe statement on Long COVID, Heatwaves and Mpox

Dr. Hans Kluge, WHO Regional Director for Europe, [highlighted](#) the ongoing impact of COVID-19, the need to address long COVID, the increasing threat of extreme heat, and the resurgence of mpox infections. Nearly 36 million people in the WHO European Region may have experienced long COVID in the first three years of the pandemic, according to estimates from the Institute for Health Metrics and Evaluation. He stressed the importance of comprehensive diagnostics, treatment for long COVID, vaccination to prevent COVID-19 and long-term complications, and precautions against extreme heat to protect vulnerable individuals. Dr. Kluge also urged vaccination and safe practices among at-risk populations for mpox infections.

## WHO Declaration of the Ministerial Conference on Environment and Health

On 7 July, the ministers of the WHO European Region convened in Budapest at the Ministerial Conference on Environment and Health and adopted a declaration with a specific set of actions to better prepare health systems to tackle the impact of climate change, reduce the health effects of pollution, and integrate nature and biodiversity considerations into environment and health policies, which means taking a holistic approach to human, animal and planetary health.

## MONITORING

## Digital Health

### Towards a global digital health certificate: Council adopts recommendations

Council has [adopted](#) a recommendation to ensure the smooth transition of COVID-19 certification system to a WHO global digital health certification network. The recommendation encourages member states to join, follow and participate in the [further development](#) of the WHO global digital health certification network. Until member states are connected to it, and during the period until the end of the year, they are encouraged to remain connected to the EU Gateway (the EU's existing digital infrastructure for the verification of certificates).

### Council and Parliament strike a deal on a European digital identity (eID)

To enable secure access to cross-border services in the EU, the Council presidency and European Parliament reached a [provisional agreement](#) on a new framework for a European digital identity (eID). The revised regulation aims to provide universal access to secure and trustworthy electronic identification and authentication through a personal digital wallet on mobile phones, representing a significant change in Europe's approach to digital identity.

### WHO/Europe explores collaborations to improve quality of health information online

The WHO Office on Quality of Care and Patient Safety in Athens has [partnered](#) with YouTube Health to enhance the reliability of health information available online. This collaboration aims to improve health literacy and ensure access to accurate and trustworthy health content.



## MONITORING

## Clarification on the Right to Obtain a Copy of personal Data

The Advocate General of the European Court of Justice Emiliou [interpreted](#) Article 15 (3) GDPR's right to a complete and free copy of one's data on April 20. To pursue a claim for improper dental treatment, a patient requested copies of all dental treatment documents. The dentist provided copies for a cost. The patient asserted that their initial copy should be free of charge, depending on Articles 12 and 15 (3) GDPR. The Court ruled that Article 12(5) and 15(3) of the GDPR require a data controller (the dentist) to give a data subject (the patient) a copy of his medical records, even for non-data protection purposes. Doctors can request expense compensation under Article 23(1) of the GDPR, however national courts must verify the actual costs. In a doctor-patient relationship, the wording "copy of the personal data undergoing processing" in Article 15(3) of the GDPR does not give the patient a general right to a full copy of all medical file papers.

## Consumers uneasy with sharing their health data, survey shows

It has been found in a [survey](#) across eight European countries that consumers are less willing to share their health data than is proposed in current EU legislation. These findings demonstrate that EU legislators must better reflect people's preferences in the European Health Data Space Regulation, which is already being discussed by EU institutions. To improve healthcare provision and make public health data available, people must feel confident sharing their health data.

## Pilot project to test European digital identity wallet for e-prescriptions

The European Commission is allocating €46 million from the Digital Europe Programme for 4 pilot projects on [the European digital identity \(EUDI\) wallet](#). One of the pilot projects, [POTENTIAL](#) – Pilots for European Digital Identity Wallet Consortium, will apply the EUDI wallet to 6 use-cases including e-prescriptions. It has the objective of enabling paperless and convenient medical prescriptions, empowering citizens by giving them secure data control, allowing access to health information and providing the ability to determine when and with whom to share their health data across Europe.

## Patients, Principles and Ethics

### Commission proposes to better guarantee the rights of adults in need of protection or support in cross-border situations

The Commission proposed new rules to ensure that the protection of adults is maintained in cross-border cases and that their right to individual autonomy is respected when they move within the EU, including their freedom to choose their own future arrangements and person. Adults who cannot protect their own interests due to an impairment or insufficiency of their faculties are covered by the proposals. It may be associated with an age-related disease, such as Alzheimer's disease, or resulting from a health condition. As part of the proposed Regulation, a streamlined set of rules will apply within the EU, including which court has jurisdiction, which law applies, under what conditions foreign measures or foreign powers of representation should take effect, and how authorities can cooperate. The proposed package will include a [regulation](#) that will govern cross-border cases for adult protection among EU countries and a [Council Decision](#) that will oblige EU countries to become or remain parties to the Hague 2000 Protection of Adults Convention.

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