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- **Brexit Update**
- **Health Priorities of the Romanian Presidency**
- **Developing a One Health Culture in Undergraduate Education**
- **Combatting Europe’s Anti-Vaxxers**
- **Regulating Transfats**
- **Revision of the EU Carcinogens and Mutagens Directive**

**Brexit Update**
Whilst the UK’s politicians are considering the [Draft agreement on the UK’s withdrawal from the EU](https://www.gov.uk/government/publications/draft-agreement-on-uk-s-withdrawal-from-eu) and the [Political declaration on the framework for the future relationship between the UK and EU](https://www.gov.uk/government/publications/political-declaration-on-the-framework-for-the-future-relationship-between-the-uk-and-eu), we continue to work with their European counterparts to help deliver an outcome which doesn’t threaten Europe’s health. Accordingly, and with the Romanian government assuming (from January/June 2019) the Presidency of the Council of the EU, Dr Chaand Nagpaul, Chair of Council, wrote to the Romanian Health Minister to advise of our support for the delivery of pragmatic solutions which permit the ongoing provision of high quality healthcare across the continent.

More particularly, Dr Nagpaul echoed the views of our European partners and counterparts in the European dental, medical, midwifery, nursing and veterinary professions; who recently wrote to (see November’s Eurobrief) Michel Barnier, the EU’s Chief Negotiator, to request that the EU facilitate the development of a system of MRPQ (mutual recognition of professional qualifications) to safeguard our members’ ongoing pan-European provision of essential services to Europe’s citizenry.

With much work to be done to finalise the exact terms of the UK’s future relationship with the EU, we will continue to work with our European partners, including our colleagues in the Colegiul Medicilor din România, to ensure that it doesn’t threaten the European medical profession nor the patients it serves.

In related news, and in the growing fear that a “no deal” outcome is a genuine possibility, the EC (European Commission) has begun to implement its [“no-deal” Contingency Action Plan](https://ec.europa.eu/info/business-and-administrative-policies/contingency-plan-no-deal_en). The plan, reflecting significant BMA lobbying, reiterates the EU’s commitment to the continued funding of cross-border health projects in Ireland via the INTERREG VA programme post-Brexit.

This commitment is echoed in the Irish government’s [Contingency Action Plan](https://ec.europa.eu/info/business-and-administrative-policies/contingency-plan-no-deal_en) along with details of its plans to legislate to mitigate “no deal’s” impact on healthcare arrangements, the provision of medicinal products and related materials, and the recognition of professional qualifications.

Further details about our extensive work on this key issue are available [here](#).

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**Health Priorities of the Romanian Presidency**

Romanian Presidency – health priorities

Ahead of assuming the Presidency of the Council of the EU, the Romanian government has outlined its health priorities for this period:

- access to medicines, including prevention, innovation, pricing and boosting availability of hepatitis C treatment
• digital health, including digitisation of health systems, e-prescriptions and electronic health insurance cards
• vaccination, including tackling the anti-vaxxer movement which led to a record high number of measles cases over the last year
• patient mobility

With these priorities in mind, we will be working with our European partners, including our colleagues in the Colegiul Medicilor din România, to ensure that any related legislative/policy developments reflect the BMA’s concerns. Further details about the Romanian Presidency are available here.

Developing a OneHealth Culture in Undergraduate Education
The professional – including our partners in the CPME - and student organisations representing medical doctors, the dentists and the veterinarians of Europe have called on academics and policymakers at national and European level to foster exchanges between medical, dental and veterinary schools under the One Health approach which aims to:

• expand interdisciplinary collaborations and communications in all aspects of health care for humans, animals and the environment
• advance health care for the 21st century and beyond by accelerating biomedical research discoveries, enhancing public health efficacy, expeditiously expanding the scientific knowledge base, and improving medical education and clinical care
• protect and save untold millions of lives in our present and future generations

These organisations recognise education as the cornerstone to build their common One Health competences and believe that a true understanding of One Health requires an interdisciplinary approach. To this end, they consider that the integrated education of all future health professionals is fundamental for tackling current and future health challenges for our society. With planning ongoing, we will be working with our European partners to consider how such aims are deliverable in a post-Brexit Europe.

Combatting Europe’s Anti-Vaxxers
Following reports that Italy’s Health Minster, from the vaccine-sceptic Five Star Movement, had sacked the entire board of the country’s most important committee of technical-scientific experts, Dr Peter English, Chair of the BMA’s Public Health Medicine Committee issued the following statement:

*We are deeply concerned to hear of the Italian health minister’s decision to sack the entire board of the Higher Health Council. We are currently witnessing an increase in vaccine-preventable diseases across Europe and the World – mainly due to people’s hesitancy to use safe and effective vaccines to prevent serious, sometimes life-changing or fatal diseases.*

*Independent scientific advice on vaccines to governments is of critical importance in providing credibility and transparency in decision making and monitoring of these important public health programmes.*

*This decision, and the message it sends, risk further harm to the health of Italians and their neighbours in Europe and further afield.*

*The UK Government should be mindful of the potential increased threat to its citizens and may [in due course] wish to strengthen advice to those travelling to Italy and elsewhere to be sure all their vaccinations are up to date.*
A joint statement (available upon request) by numerous pan-European medical organizations – including our partners in the CPME (Standing Committee of European Doctors), EJD (European Junior Doctors’ Association), UEMO (European Union of GPs) and UEMS (European Union of Medical Specialists) – followed as the European medical profession united to:

- reaffirm that the prevention of communicable diseases through vaccination is safe and very effective
- advise that immunisation through vaccination is the best protection we have against serious, even deadly diseases
- call on governments and legislators to assure that vaccination programmes are supported in the best interest of European citizens

With vaccination programmes also under threat in other European countries - a recent draft Polish law, prepared against medical advice, seeking to amend the legislation on communicable diseases was only just defeated – we will continue to work with our European partners to tackle such threats to public health and support the EU’s efforts to tackle growing rates of vaccine hesitancy around the bloc.

Regulating Transfats
Following significant lobbying by the BMA and our European partners, the EC published, back in October of this year, a draft proposal to limit IPTFAs (industrially produced trans-fats) to 2 percent of food’s total fat content and launched a public consultation to which the BMA responded - see November’s European Brief. Earlier this month, the EC’s Standing Committee on Plants, Animals, Food and Feed, comprised of member state representatives, voted to implement the proposed limit as an amendment to existing rules on the addition of substances to food and giving companies until April 2021 to adapt the formulations of their products.

The EP (European Parliament) and the EU Council of Ministers now have 3 months, under the comitology procedure, to deliberate and decide if they wish to block the new rules coming into force. With the proposal giving companies until April 2021 to adapt, the BMA will be working with our European partners to ensure implementation of the proposals and to shorten the proposed transition period.

Revision of the EU Carcinogens and Mutagens Directive
Following significant engagement with the BMA and our European partners, the EC published its third proposal for the revision of the CMD (Carcinogens and Mutagens Directive), which included new proposed limit values for formaldehyde.

The proposed revision would result in an OEL (Occupational Exposure Limit) of 0.37 mg/m3 with a corresponding STEL (Short-Term Exposure Limit) of 0.738 mg/m3, since sensory irritation is a concentration rather than a cumulative dose-driven effect; which is based on the EC’s Impact Assessment.

Earlier this months, the EU Council of Ministers adopted its position proposing higher limits for Formaldehyde - 0.37 mg/m3 for 8-hour exposure and 0.74 mg/m3 for a short-term exposure.

The EP, in its draft report - scheduled for vote in plenary (full session) in early 2019, noted that in some member states, Formaldehyde is routinely used for the purposes of embalming deceased persons as part of their cultural or religious practices. They added, that the funeral sector is likely to find a limit value of 0.3ppm to be difficult to comply with without significant short-term effects on capacity. MEPs call for a three-year transitional period for the sector during which the limit-value of 0.5ppm should apply.

The three institutions will now be entering the Trilogue negotiations and aiming to reach agreement on the final text before the European elections in May 2019.

The BMA will be monitoring these negotiations and working with our European partners to ensure that the proposed Directive reflects the views of the medical profession.