

The Standing Committee of European Doctors (CPME) represents national medical associations across Europe. We are committed to contributing the medical profession's point of view to EU and European policy-making through pro-active cooperation on a wide range of health and healthcare related issues.

CPME on the EU Cardiovascular Health Plan

Cardiovascular diseases are the leading cause of death and disability in Europe and in the European Union. Most of them can be prevented by addressing controllable risk factors such as unhealthy diet, tobacco use, physical inactivity, air pollution, and harmful use of alcohol. It is crucial to act on these risk factors as there are also many beyond individual control such as age or genetics. In an aging European population, cardiovascular diseases are increasingly prevalent and frequently accompanied by other health conditions.

European doctors recommend policymakers to prioritise public health when making policies and ensure they make the healthy choice the easy choice. The European Commission's EU Cardiovascular Health Plan should build on the 2021 Europe's Beating Cancer Plan and deliver particularly its legislative proposals to reduce the risk factors. Therefore, CPME recommends that the EU Cardiovascular Health Plan will address:

Legislative initiatives:

- Making European food systems more sustainable in order to produce healthy food under decent conditions and provide people with affordable ways to change their dietary habits
- Establishing EU-wide nutrient profiles to restrict or forbid nutrition and health claims of foods high in salt, sugar and/or (saturated) fat, which are actually health harming
- Rolling out a harmonised EU-wide, mandatory front-of-pack nutrition labelling to empower consumers to make informed, healthy, and sustainable food choices
- Revising the EU school fruit, vegetables and milk scheme to make healthy products more available to children
- Making healthy products accessible through public procurement of food served in schools and public institutions

- Revising the EU-level regulatory instruments on tobacco control, i.e. Tobacco Taxation Directive, Tobacco Products Directive, Tobacco Advertising Directive, and the legal framework on cross-border purchases of tobacco, to adapt to new developments and market trends, e.g. strengthening the rules on novel tobacco and nicotine products, and to increase the effectiveness of these public health interventions
- Working towards better air quality and cutting air pollution at source, e.g. by implementing the Ambient Air Quality Directive and evaluating the National Emission Reduction Commitments Directive
- Revising the EU legislation on the taxation of alcohol and on cross-border purchases of alcohol towards effective public health interventions
- Introducing mandatory EU-wide indication of the list of ingredients and the nutrition declaration on alcoholic beverage labels and of health warnings on labels
- Limiting and regulating marketing and advertising particularly towards children and adolescents, and protect them from exposure to unhealthy products such as alcohol, tobacco and nicotine products, and food and drinks high in fat, salt and/or sugar
- Consider restrictions on sale of high-caffeine energy drinks to children
- Reviewing the EU agrifood promotion policy to use public funds to promote foods and drinks that contribute to health, and stop funding the promotion of products that do not contribute to health (e.g. promotion of alcohol)

Non-legislative initiatives:

- Developing reformulation measures to reduce salt, sugar and (saturated) fat levels of processed foods, and increase their content of fruits, vegetables, and nuts
- Considering subsidies on healthy foods, possibly in the form of tax reductions
- Investing in active mobility and green infrastructure projects, and introducing incentives for active travel to work
- Phasing out fossil fuel subsidies urgently and replacing them by incentives for non-polluting energy to mitigate the escalating risk of climate change, and its direct, indirect and cascading adverse health impacts, including those vulnerable groups with cardiovascular diseases
- Prioritising effective climate change adaptation across all sectors and supporting the Member States on preparedness and resilience planning

- Maintaining strict transparency and disclosure requirements for policymakers about their commercial interests and engagement with lobbyists towards avoiding conflicts of interest
- Strengthening family medicine to assure the ambitions of prevention, early detection and management
- Recognising cardiovascular diseases as a gender equality priority in health to roll back both under-diagnosis and under-treatment of women and under-representation in clinical trials