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On the 15th January 2015, the CPME Executive Committee adopted the 'CPME Statement on Self-Care' (CPME 2015/005 FINAL)

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## CPME Statement on Self-Care

*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.*

### Preliminary statement

Medical responsibility is regulated by law in every single EU member state. It is the responsibility of doctors in every EU member state to offer an appropriate diagnosis to the patient, based on qualifications and skills which in all cases include a degree in medicine. Medicine is among the most difficult sciences because of the knowledge required as well as the complexity of its practice. CPME is against any attempts to change the role of the doctor to the detriment of patient safety. The medical profession must be involved in the development of the EU policy on self-care.

### Self-Care

Self-care represents the ability of patients to take measures to manage, establish and maintain their own health. CPME acknowledges that self-care exists as a fact, and agrees to the following definition of self-care:

Self-care is *"the actions people take for themselves, their children and their families to prevent and care for minor ailments and long-term conditions and maintain health and well-being after an acute illness or discharge from hospital"* (UK Department of Health (2005<sup>1</sup>)).

Self-care policy also refers to self-medication, in accordance to EU MS laws and regulations, but self-medication is no longer at its core – patient empowerment and health literacy are nowadays considered as the key aspects that determine self-care. The needs of the population and of patients are a central point.

The health education of society should always be based on evidence, and the promotion of self-care should not duplicate but rather support mechanisms that promote a healthy lifestyle; policy-making recommendations should take this approach. A starting point towards effective self-care strategies should include children and young adults.

It must also be said clearly that self-care should not become, e.g., may not be the field of commercial advertising and product promotion.

CPME adopts the present position with a view to the future of self-care policy in the European Union. EU self-care policy should include a strategy on health literacy for the patient as well as concrete recommendations for health professionals on patient empowerment ([CPME joint statement: Making Health Literacy a Priority](#), April 2013). These two supporting components of self-care should be



deployed in full cooperation with member states and national competent authorities to ensure legitimacy.

Therefore, CPME recommends the following on the future of EU self-care policy:

1. Self-care is an area of health and social care and it refers to the capacity of people/patients to take care of themselves. CPME therefore believes that people/patients are at the core of self-care actions and must not be defined as consumers.
2. Patient empowerment and health literacy are two areas where the EU is lagging behind in terms of data and action so they need to be a priority of self-care policy ([CPME joint statement: Making Health Literacy a Priority](#), April 2013). CPME encourages doctors to support patient empowerment and health literacy as well as enhance collaboration between health and social care. The patient-doctor relation is one way of effective promotion of self-care. Empowered patients should be able to rely on the fact that physicians provide assistance, advice and information about self-care, including self-medication<sup>1</sup>.
3. The principle that treatment requires prior diagnosis is central in medicine, and a reliable diagnosis should be the prerequisite of any treatment, also in the field of self-medication.
4. Self-medication should not result in inappropriate medication since it may result in delayed diagnosis and/or severe complications. All necessary measures need to be taken to avoid such situations. Great attention must be given to avoid situations of a risky self-diagnosis which may become an issue of patient safety.
5. In the frame of self-care as in any therapeutic situation, circumstances where non-medical healthcare professionals can take therapeutic decisions without consulting a doctor must be strictly defined and limited. For reasons of patient safety, these situations must be defined together with the medical profession.
6. Self-medication with non-prescription drugs is primarily suited for minor ailments, diseases of short duration that are easy to recognise by patients, pharmacists and/or a non-specialist/healthcare professional. Patients should be made aware of the need to consult a physician in situations where self-care needs to be complemented by medical treatment.
7. CPME believes that in order to identify the areas where self-care can and should be promoted, necessary evidence needs to be collected from member states and other scientific reliable data sources, to provide a common understanding of which minor or acute ailments or long-term conditions are manageable through self-care.
8. It is required that the safety and efficiency of self-medication drugs be sufficiently documented and that the use of these medicines is evidence based. Public authorities should closely monitor the development in sale and use of non-prescription drugs - also the sale of pharmaceuticals outside the pharmacies. When buying non-prescription drugs, it must be ensured that the patient receives sufficient information on its efficacy and on the correct use of the medicinal product, the risks and possible side effects, and the possible misuse of the product.

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<sup>1</sup> [CPME Statement on Non-Prescription Medicines](#), November 2012  
[Common Position of the CP, UEMO, UEMS, PGEU, AESGP](#), February 1997  
[CPME Position Concerning Self-Medication](#), November 1993



9. Public authorities must provide objective information on medicinal products and their use. Competent authorities, experts that are independent and transparent and the representatives of professional associations are to define the future EU policy through just and unbiased evidence.
  
10. Self-care should not become the field of commercial advertising and product promotion. Measures must be implemented to avoid this, as well as any type of conflict of interest and the damaging consequences which can result from the proximity of commercial actors to patients.

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<sup>i</sup> Department of Health (2005) *Self Care - A Real Choice, Self Care Support - A Real Option*. London: Department of Health.