



PRESS RELEASE – 23 March 2021

OUTCOMES OF THE CPME GENERAL ASSEMBLY AND BOARD VIRTUAL MEETINGS, 20 MARCH 2021

On 20 March 2021, European doctors from 38 National Medical Associations met online for the biannual General Assembly and Board meetings of the Standing Committee of European Doctors (CPME).

“I would like to thank all CPME members for their fruitful exchanges on recent health policy developments. The new policies tackle key questions: how to better manage this pandemic and prepare for the next, and how to ensure the digital transformation really improves patient care. The outcomes show that we, the European doctors, take the best decisions to defend public health, human rights and high-quality healthcare, even in difficult times, when working together”, said CPME President Prof. Dr Frank Ulrich Montgomery.

The CPME Board adopted the following policies:

European Health Union Package

CPME welcomes the EU’s aim to create a stronger legal framework allowing the EU to be better prepared for and react to future pandemics. In the **CPME position on the Commission’s proposal for a regulation on serious cross-border health threats**, the **CPME position on the draft regulation on the mandate of ECDC**, and the **CPME position on the legislative proposal for extending the EMA mandate**, CPME highlights the need for the preparedness and response plan to also focus on prevention as well as strengthening the collection, analysis and follow-up of data on national system’s public health capacities, including workforce, facilities and technologies. The processing of patient data should be for ‘epidemiological surveillance purposes’ and the precise health data that ECDC will have access to should be listed in a separate Annex. CPME further affirms the importance to respect dignity and fundamental rights and freedoms of persons in health surveillance measures as well as the need for human oversight. Lastly, CPME welcomes the One-Health approach guiding future action.



CPME supports reinforcing the European Medicines Agency's (EMA) structure including to monitor and advise on the supply of medical devices in the context of health emergencies, but wishes to see a closer involvement of healthcare professionals in the proposed framework to improve communication. CPME also calls for the imposition of sanctions for non-compliance with reporting obligations by the marketing authorisation holders, and the inclusion of additional transparency provisions.

Pharmaceutical Strategy for Europe

In the Position Paper on the Pharmaceutical Strategy, CPME argues how the strategy can lead to restoring balance in the pharmaceutical sector. European doctors propose measures to achieve the European Commission's objectives across the four work strands, and emphasise the role of healthcare professional organisations in implementing reforms in the public interest. CPME confirms its readiness to contribute to this process. The Position will be published shortly.

Telemedicine

The **CPME policy on telemedicine** acknowledges the benefits of this additional tool, which can be used as a supplement where efficient to improve the quality of care. However, face-to-face consultations should remain the gold standard. Telemedicine should not be influenced by commercial factors nor used as a cost-saving measure and be fully compliant with data protection laws. Its implementation should follow evidence-based medicine and ensure both patient confidentiality and equitable access.

European Health Data Space (EHDS)

The **CPME policy on the EHDS** with a focus on health research and policy-making welcomes its objective to improve disease prevention, patient-oriented health care and better treatment options. European doctors observe that the EHDS should have a clear legal framework, independent oversight, and transparent policies concerning the processing of patient data available for business and government. In particular this is needed when working with medical confidentiality (**Declarations of Helsinki** and **Taipei** apply), data access, secondary use of data, and information. Moreover, the EHDS should be used for the public good i.a. by starting where data sharing is urgently needed, e.g. cancer, COVID-19 and antibiotic treatments. A Code of Conduct should be developed and applied to both public or private entities using or contributing to the Space.



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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 institutions and European policy-making through pro-active cooperation on a wide range of health and healthcare related issues.