

Message from the CPME President:



Welcome to the 10th edition of the CPME Newsletter. On 23 November, the CPME Board met in Bucharest and adopted several policies that express CPME's commitment to health in the 21st century: a policy on electronic ID systems for physicians, the revised version of the WMA Declaration of Helsinki, a statement on non-discrimination in healthcare based on sexual orientation and several positions reflecting current developments in health systems and EU health policy.

These policies represent the common vision of European doctors, a vision of respect for human rights, tolerance and solidarity.

I would like to thank the Romanian College of Physicians for being a wonderful and open host and express all my best wishes to European doctors and patients for the coming holidays.

Yours sincerely,

Dr Katrín Fjeldsted
CPME President

POLICY OUTCOMES CPME BOARD MEETING IN BUCHAREST 23 NOVEMBER 2013:

§ *The CPME Policy Agreement 'Ensuring the secure use of telemedicine and e-health applications in an integrated Europe – Towards a Common Policy Agreement on Electronic ID Systems for Physicians' ([CPME 2013/039](#)).*

§ *The 'CPME Commitments to the EU Platform for Diet, Physical Activity and Health 2013-2014' ([CPME 2013/135](#)).*

§ *The 'CPME Commitments to the European Alcohol and Health Forum 2013-2014' ([CPME 2013/132](#)).*

§ *The CPME Board endorsed the WMA Declaration of Helsinki on ethical principles for medical research involving human subjects, as adopted by the WMA General Assembly in Fortaleza - Brazil, October 2013 ([CPME 2013/120](#)).*

§ *The CPME Statement on Natural, Non-pathological Variations of Human Sexuality ([CPME 2013/136](#)).*

§ *A Memorandum of Understanding between CPME and the Council of European Dentists ([CPME 2013/138](#)).*

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Cross-border dimensions of healthcare: eID for physician



On 23 November 2013, the CPME Board adopted the CPME Policy Agreement on electronic ID (eID) Systems for Physicians. In Europe, healthcare is reaching a complex cross-border dimension. Patients and physicians are becoming highly mobile and technological progress is making telemedicine and eHealth applications an everyday tool for physicians. However, due to the variety of electronic systems used in the European countries, physicians often face interoperability issues. This can for example be the case when a physician wants to access a patient's record hosted in a system abroad which might not recognise the physician's professional identity. In this context, it is essential that European physicians have a common understanding of cross-border identification issues. The goal of this policy is for European physicians to find a common agreement on a set of standards for professional identification issues. This does not mean a harmonised system for the identification of physicians across Europe that would disregard national specificities. The policy rather identifies a minimum set of security and reliability requirements that should always apply, whatever identification system is used at national level.

The CPME Policy Agreement is based on the concept of conformity. The conformity of eIDs to this policy should enable physicians, hospitals, patients and eHealth services to be certain that they are dealing with an instrument and an infrastructure which they can trust.

The adopted CPME policy on electronic identification of physicians is accessible here ([CPME 2013/039 FINAL](#)).

For further information, please contact:
[Constance Colin](#).

Diet, Nutrition and Physical Activity - European Doctors inform on healthy Lifestyles



At its meeting on 23 November 2013, the CPME Board adopted the [CPME Commitments to the EU Platform on Diet, Physical Activity and Health 2013-2014](#). These commitments will provide the framework for CPME's contribution to the EU Platform on Diet, Physical Activity and Health (Diet Platform) in the coming year. A main focus of activities will be the consolidation and elaboration of the 'Health Village' toolbox which was compiled to support the implementation of a 'Health Village' in which doctors and other healthcare professionals bring information on healthy lifestyles to the general public in an informal environment. The 'Health Village' would be a mobile event, hosted in tents or even vans equipped with the necessary tools. Having drafted a toolbox in the scope of the 2011-2013 commitment, the next phase foresees the consolidation of the information collected as well as the exploration of dissemination and cooperation opportunities relating to the toolbox. CPME will aim to implement these activities in the coming year. The Diet Platform, which has been examined in the overall evaluation of the Strategy for Europe on Nutrition, Overweight and Obesity related health issues, will be continuing its activities in its current framework. The issue of diet, nutrition and physical activity will also be among the health policy priorities of the Greek Presidency of the Council of the EU which will take office on 1 January 2014.

For further information, please contact:
[Sarada Das](#).



CPME reaffirms commitment to tackling alcohol-related harm

Over the past months, the European Commission has been evaluating the 2006-2012 EU strategy to support Member States in reducing alcohol related-harm. The adoption of a follow-up EU-level framework policy was strongly supported by stakeholders to ensure the issue remains on the EU agenda, and to facilitate future action on tackling alcohol-related harm. In October 2013, the European Commission announced its plans to develop an Action Plan to promote the continued implementation of the objectives of the EU Alcohol Strategy. In this context the European Alcohol and Health Forum (EAHF) will carry its activities forward. CPME, being a founding member of the EAHF, has built on its past input to the Forum to renew its commitment to contribute to achieving the strategy's objectives. To this end the CPME Board at its meeting on 23 November 2013 adopted the [CPME Commitments to the European Alcohol and Health Forum 2013-2014](#). These foresee the continuation of the commitment to undertake lobbying activities to call for controls over the advertising of alcohol products with a specific emphasis on its effects on children and young people. In addition, CPME commits to promoting action to improve the early detection of patients' excessive drinking with a special focus on promoting the prevention of alcohol-related problems at the workplace. CPME looks forward to taking these activities ahead and will monitor the roll-out of the EU Action Plan.

For further information, please contact:
[Sarada Das](#).



CPME endorses the revised WMA Declaration of Helsinki

On 23 November 2013, the CPME Board formally endorsed the recently revised [World Medical Association's Declaration of Helsinki on Ethical Principles for Medical Research Involving Human Subjects](#). The Declaration is the backbone of the conduct of ethical medical research and is internationally recognised throughout the research community since 1964. It was recently amended at the last WMA General Assembly held in October 2013 in Fortaleza, Brazil.

The major changes proposed in the revised text introduce higher protection standards for vulnerable groups and compensation mechanisms in case an individual is harmed. The text also clarifies that participants shall be informed of the results of a trial and shall benefit from the resulting treatments. Furthermore, an important clarification is brought on the use of identifiable human or material data. Physicians willing to collect, store or reuse these data or material contained in bio-banks or similar repositories, must seek the informed consent of the data subject. *Continued on page 4*

CPME News

◆ On 10 December 2013, Prof. Dr Frank Ulrich Montgomery, CPME Treasurer, will speak at an event on 'Improving quality and safety of healthcare - the role of European service standards' hosted by the European Committee for Standardisation (CEN).

◆ On 11 December 2013, Dr Mads Koch Hansen, CPME Rapporteur on Antimicrobial Resistance, will speak at the 'Joint Conference on Antimicrobial Resistance: State of play of the 5 year action plan' hosted by the European Commission.

CPME Conference

April 2014

Friday

04

CPME Meetings

2014

SAVE THE DATES!

Brussels, Belgium

April 2014

Friday

Saturday

04 05

Budapest, Hungary

November 2014

Friday

Saturday

14 15



Dr Katrín Fjeldsted had already welcomed this revision shortly after its adoption by stating: *“The changes proposed in this new version will surely reinforce the protection of individuals undergoing research. The Declaration of Helsinki is a living document which the WMA progressively strengthened over the years. I am delighted that this document, which is an essential tool for physicians, provides today such a high level of protection.”* ([link to press release](#))

For further information, please contact: [Constance Colin](#).

Partners for better health: CPME co-signs a Memorandum of Understanding with the Council of European Dentists

Building on a long-standing history of collaboration, the Council of European Dentists (CED) and CPME have adopted a [Memorandum of Understanding \(MoU\)](#) reaffirming both organisations’ commitment to working in partnership and cooperation for high quality healthcare for every patient in Europe. The MoU addresses a broad range of topics. First, the importance of safeguarding patients’ rights is underlined, where the issues of patient safety and the confidentiality of patient information are mentioned in particular. The MoU also reaffirms the common objectives relating to professional practice, highlighting the importance of safeguarding the independence of the professions, promoting best possible education and training as well as ensuring professional mobility. In addition, CED and CPME call for safe and lawful working conditions for professionals. Looking to healthcare, the MoU identifies patient safety and quality of care, health literacy, oral health and antimicrobial resistance as priority areas

for cooperation. These priorities reflect also the focus past joint initiatives, the most recent example being the [Charter for Liberal Professions](#). CPME President, Dr Katrín Fjeldsted welcomed the adoption of the MoU, stating that *“CPME is delighted to reaffirm and enhance its fruitful cooperation with CED and looks forward to the successful continuation of this partnership”*.

For further information, please contact: [Sarada Das](#).

Improving quality of healthcare in Europe. CPME meeting with Commissioner Tonio Borg



On 1 October 2013, CPME President Dr Katrín Fjeldsted and CPME Secretary General, Ms Birgit Beger had a bilateral meeting with Mr Tonio Borg, EU Commissioner for Health. The meeting represented a good occasion to share ideas on main issues of interest in the field of health. The danger of market-oriented technically simplified standardisation of health care services represented one of the main points of discussion where CPME and Commissioner Borg found common ground. CPME also expressed its continued commitment and support towards public health and prevention. Discussions also addressed the current political agenda including tobacco policy and clinical trials. Commissioner Borg, the CPME President and Secretary General agreed that common goals and



close collaboration between the European institutions and the Standing Committee of European Doctors are necessary to achieve the best quality healthcare in Europe.

For further information, please contact:

[Miriam D'Ambrosio](#)

Doctors say no to discrimination in healthcare based on sexual orientation

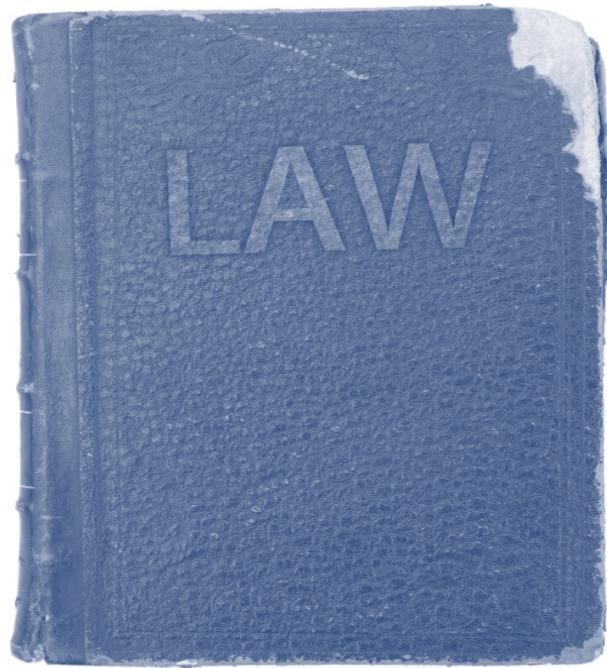


On 23 November, the CPME Board adopted a statement condemning discrimination in healthcare based on sexual orientation ([CPME 2013/136 FINAL](#)).

With this statement, CPME endorses the World Medical Association Statement on Natural Variations of Human Sexuality, adopted in Fortaleza, Brazil in October 2013.

The policy strongly asserts several principles. Homosexuality does not represent a disease; medical examination may not, under any circumstances determine an individual's sexual orientation. CPME and the World Medical Association condemn all forms of discrimination, stigmatisation and criminalisation based on sexual orientation.

Continued on 2nd column



In summary, the CPME Statement on Natural, Non-pathological Variations of Human Sexuality asserts the following principles:

- Asserts that it is unethical for physicians to participate in any kind of procedure aimed at determining an individual's sexual orientation against the will of that individual.
 - Condemns all forms of stigmatisation, criminalisation and discrimination of people based on their sexual orientation.
 - Demands the deletion of all disease classification codes which pathologise homosexuality or suggest the possibility of treatment or therapy as a viable option (F66.1 of ICD 10).
 - Asserts that psychiatric or psychotherapeutic approaches to treatment must not focus upon homosexuality itself, but rather upon conflicts which arise between homosexuality, and religious, social, cultural and internalised norms and prejudices.
 - Condemns so-called "conversion" or "reparative" procedures which claim to be able to convert homosexuality into asexual or heterosexual behaviour and give the impression that homosexuality is a disease.
- Physicians' organisations will actively promote these principles among their members and raise awareness in the wider society.

For further information, please contact:

[Anamaria Corca](#)



COMITÉ PERMANENT DES MÉDECINS EUROPÉENS
STANDING COMMITTEE OF EUROPEAN DOCTORS



COLEGIUL MEDICILOR DIN ROMÂNIA

JOINT PRESS CONFERENCE BETWEEN CPME AND THE ROMANIAN COLLEGE OF PHYSICIANS

On 23 November, the Romanian College of Physicians and CPME organised a joint press conference to underline the need for a more robust healthcare system and better working conditions for doctors in Romania. CPME President, Dr Katrín Fjeldsted declared that: *'Investing in health and education is something that will help us moving towards the future. 6% of GDP is a small figure for healthcare. If we do not find a common agreement, doctors will leave, nurses will leave and eventually patients will leave as well. Look after doctors in order to have a well-functioning health service'*. She emphasised that *'investments in health should not be seen as expenditures, but as a guarantee for quality healthcare.'* The President of the Romanian College of Physicians, Prof. Dr Vasile Astărăstoae, declared that Romania is the only CPME member that has below 6% of GDP allocated to health.

Dr Konstanty Radziwiłł, CPME Immediate Past-President and representative of the Polish Medical Chamber's delegation to CPME, joined the press conference in the same spirit of solidarity. He stated that Poland was in a similar situation some years ago, when doctors were leaving to other countries. Better working conditions were key in the retention of physicians in the country.

Several government officials were present to discuss the existing situation of physicians. Dr Vasile Cepoi, Health Advisor to the Prime Minister stated that *'presently central health authorities work on several normative acts in order to achieve a better control of expenditures and to improve the health indicators of the population.'*

Prof. Dr Stefan Ioan Groza, Director General to the Higher Education Directorate General at the Ministry of Education, also attended the joint press conference and explained the contribution of medical education on quality of healthcare.

The video of the press conference may be consulted [here](#).



From left to right: Ms Birgit Beger, CPME Secretary General; Dr Katrín Fjeldsted, CPME President; Prof. Dr Vasile Astărăstoae, President of the Romanian College of Physicians; Dr Vasile Cepoi, Health Advisor to the Prime Minister; Prof. Dr Stefan Ioan Groza, Director General to the Higher Education DG, Ministry of Education; Dr Konstanty Radziwiłł, CPME Immediate Past-President, Polish Medical Chamber.



Background note regarding the situation of physicians in Romania

- On 2 November healthcare professionals in Romania manifested their dissatisfaction through a March of Silence. A coalition of doctors, nurses, pharmacists, dentists, psychologists and biologists gathered in the streets of Bucharest. 4500 doctors joined the protests, of a total of 10000 healthcare professionals. 6 % of GDP expenditure for the healthcare system and better employment conditions are some of the main messages of the coalition marching between the Parliament and the Government in Bucharest.
The video of the protest may be consulted [here](#).

The health dimension of the EU - USTTIP



Current negotiations on the [EU-US Transatlantic Trade and Investment Partnership \(TTIP\)](#) aim at creating the world's biggest trade and investment agreement, forecasting a 0.5 % boost to the EU economy once fully implemented. On top of cutting tariffs, the EU and the US want to tackle differences in technical regulations, standards and approval procedures. In the context of the economic crisis and severe cuts across

all policy sectors, there are concerns as regards the impact of the new free trade agreement on healthcare systems across Europe.

The TTIP will introduce harmonisation across various sectors including food safety, tobacco policy and infectious diseases which could lead to restrictions of Member States' legislative activity in fields such as access to medicines or health workforce.

Because of different understandings of privacy standards, data protection has been excluded from the negotiations alongside intellectual property rights. This is a welcome development in the context of EU and US patients' rights to health, which could have been severely impeded, had data protection standards been harmonised by the TTIP.

Regarding medical devices, the negotiations touch upon unique device identification and audits. These aim to achieve the mutual recognition of both single audits and unique device identification.

A second round of negotiations was held in Brussels from 11 to 15 November 2013 and focused on services and investment, sectoral regulatory issues and negotiations on regulatory coherence and on energy and raw materials. The next round of talks is scheduled to take place in Washington DC in December 2013.

For further information, please contact:

[Daria Zygmunt](#).

CPME News

◆ On 18 October 2013, Dr Katrín Fjeldsted, CPME President and, and Ms Birgit Beger, CPME Secretary General, took part in the 64th World Medical Association's General Assembly in Fortaleza, Brazil. The main achievement of this General Assembly was the adoption of a revised version of the Declaration of Helsinki. The Declaration, first adopted in 1964, is the internationally recognised instrument which defines the ethical principles applying to medical research on human beings. The policy outcomes of the meeting may be consulted [here](#).

◆ On 8 and 9 November, Dr Katrín Fjeldsted, CPME President attended the European Junior Doctors' Autumn meeting in Heidelberg, Germany.

◆ On 8 and 9 April 2014, Dr Katrín Fjeldsted, CPME President will attend the 4th Global Health Transparency Forum in London.

◆ On 17 and 18 May 2014, Dr Katrín Fjeldsted, CPME President will attend the World Health Professions Regulation Congress in Geneva.





Inauguration of the Kosovo Chamber of Physicians

10 November 2013

Newly elected President of
the Kosovo Chamber of
Physicians, Prof. Dr Zylfije
Hundozi (*centre of photo*).

New Chamber of Physicians established in Kosovo

On 10 November 2013, 134 elected physicians met in Pristina to celebrate the establishment of the Chamber of Physicians of the Republic of Kosovo. In the presence of the Kosovar Minister of Health and international guests, the delegates of the chamber assembly were sworn in and a new President, Prof. Dr Zylfije Hundozi was elected. Up until this point there had been no representative organisation of physicians in this emerging state, which has so far been recognised by 23 out of 28 EU Member States since its declaration of independence in 2008. All matters concerning physicians and other healthcare professions had previously been regulated by the Ministry of Health. As is common practice in many states of Central and Eastern Europe, this chamber will not only be responsible for representing the interests of physicians, but will also take on regulatory and licensing tasks.

The foundation of the chamber represented the culmination of a process in which the German Medical Association (GMA) has been closely involved.

Within two years, a legal framework was established and elections to the chamber assembly took place on 17 October 2013, with the participation of 85% of the roughly 4,000 Kosovar physicians. Among the elected delegates are four Serbian physicians.

During the inaugural celebrations, elections were held for the chamber leadership. The only female candidate of the four presidential candidates, neuropsychologist Prof. Dr Zylfije Hundozi, was chosen to represent the physicians of Kosovo over the next four years.

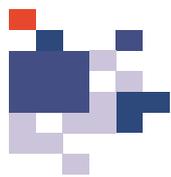
CPME was represented at the event by its Vice-President, Dr Istvan Éger, and Secretary General, Birgit Beger. Involvement at the international and European level is of great importance to the physicians of Kosovo.

Dr Otmar Kloiber, the Secretary General of the World Medical Association, encouraged the physicians of Kosovo to embrace their responsibilities and speak out on behalf of their patients, even if this may not be looked upon favourably by some politicians. Along with a delegation from the GMA, representatives of the medical associations of Croatia, Austria, Hungary, the Former Yugoslav Republic of Macedonia (FYROM), Montenegro, Albania and Bosnia-Herzegovina were guests of honour in Pristina.

With the legal framework already in place, the inaugural event on 10 November represented the beginning of the work of the chamber. It is now time to breathe life into the new chamber and welcome it into the European and international community of medical associations.

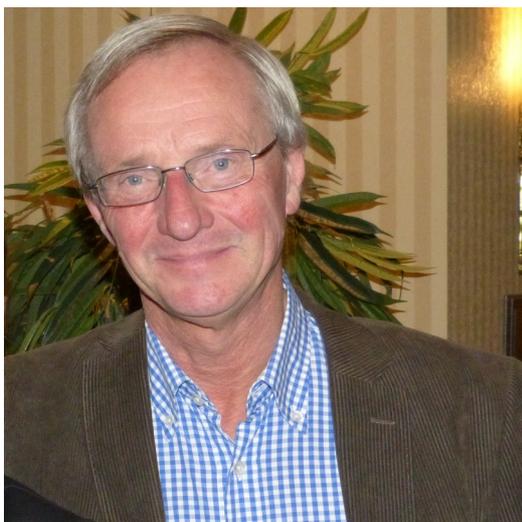
Domen Podnar

Policy Advisor/ Department for International Affairs
Bundesärztekammer / German Medical Association
Tel.: +49/(0)30/ 4004 56-363
Email: domen.podnar@baek.de



The CPME says good-bye Dr Jacques van der Vliet: 17 Years of Commitment to CPME

—Transcript of speech during the CPME Board meeting, 23 November 2013, Bucharest—



First of all I want to say that it has been a great honour and privilege to have served CPME for so many years. Not only it has been a rewarding period, but above all a pleasant, inspiring and stimulating experience. As you all know I am this positive, enthusiastic and optimistic guy who loves working in the company of many good and friendly colleagues who became close to my heart. Thank you for so many beautiful years.

Let me give you two messages for the future. First a transcription of a saying by Mahatma Gandhi called 'The Patient':

'The patient is the most important person on our premises or clinic. He/she is not dependent on us, we are dependent on him. He is not an interruption of our work, he is the purpose of it. He is not an outsider on our activities, he is a part of it.

We are not doing him a favour by serving him. He is doing us a favour by giving us the opportunity to do so.'

Let's keep the patient in the centre of everything we do.

The next message is from Goethe:

'You can try to make a name for yourself or reach a certain position with clever behaviour and all kinds of artificial means. If you however fail to have the "inner jewel", everything is in vain and will not last until the next day.'

I think CPME has the *inner jewel*, cherish this and keep up the right spirit.

Don't forget prevention as the most important part of our profession (next to treatment of course).

And finally, my work could not have been done without the outstanding and kind support of the secretariat. Thank you guys!

Thank you all for giving me the opportunity to contribute!

Jacques van der Vliet

◆ On 29 November 2013, Dr Erszébet Podmaniczky will take part in "The Annual European Medicines Agency Review of the Year and Outlook for 2014" organised by TOPRA and EMA in London, United Kingdom. During the session on pharmacovigilance, Dr Podmaniczky will deliver a speech on "How have Healthcare Professionals Addressed the New Pharmacovigilance Rules". For the agenda of the meeting and information on speakers please follow [this link](#).

◆ On 2 December 2013, Dr Bernard Mailet will attend the ETHEL Symposium in Brussels, Belgium. During a Round Table session on "User perspectives for the access to digital health records". Dr Mailet will present the view of healthcare professionals on the matter. The programme of the event can be found [here](#).

◆ On 3 December 2013 Dr Konstanty Radziwiłł will deliver a speech during a Consensus Meeting on Access and Equity for Patients organised by the Federation of Polish Patients in Warsaw, Poland. During the conference, representatives of the European Parliament, European Commission, Polish government as well as European stakeholders will discuss how to improve equity in patients' access to healthcare. The programme of the event and list of speakers can be consulted [here](#).



EU Institutional News

25 November 2013	European Innovation Partnership on Active & Healthy Ageing 2 nd Conference of Partners: "Scaling up for Healthy Growth" Further information on the speech of Commissioner Borg is available here . A report from the conference is also available here .
27 November 2013	The European Parliament Committee on Environment, Public Health and Food Safety (ENVI) voted on the eHealth Action Plan report. Please find here the report and the amendments .
27 November 2013	Médecins du Monde organises a roundtable in Brussels at the European Parliament about the "Impact of the crisis on children's & women health". For information about venue and registration, please click here .
16 January 2014	A training session for patients and healthcare professionals will take place in the context of the EUnetHTA Project. Doctors interested in Health Technology Assessment can register here .
28 - 29 January 2014	The first joint action conference stakeholder forum and plenary assembly of the EU Joint Action on Health Workforce Planning will take place in Bratislava. For further information, please click here .

Editor

Anamaria Corca
EU Policy Advisor

Editorial Board

Constance Colin
EU Policy Advisor

Sarada Das
Senior EU Policy Advisor

Miriam D'Ambrosio
Communication & Project
Officer

Daria Zygmunt
EU Policy Trainee

Michiel van Kernebeek
EMSA Trainee to CPME

CPME Mission Statement

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.

- We believe the best possible quality of health and access to healthcare should be a reality for everyone. To achieve this, CPME promotes the highest level of medical training and practice, the safe mobility of physicians and patients, lawful and supportive working conditions for physicians and the provision of evidence-based, ethical and equitable healthcare services. We offer support to those working towards these objectives whenever needed.*
- We see the patient-doctor relationship as fundamental in achieving these objectives and are committed to ensuring its trust and confidentiality are protected while the relationship evolves with healthcare systems. Patient safety and quality of care are central to our policies.*
- We strongly advocate a 'health in all policies' approach to encourage cross-sectoral awareness for and action on the determinants of health, to prevent disease and promote good health across society.*

CPME's policies are shaped through the expertise provided by our membership of national medical associations, representing physicians across all medical specialties all over Europe and creating a dialogue between the national and European dimensions of health and healthcare.



The CPME Twitter account is open to discuss relevant health policy topics. Please follow us on Twitter: [@CPME_Europa](#).

Guest commentary:

CPME values your feedback! Feel free to leave us a message by [clicking here](#).



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