Making the right choice in health information

A large alliance of European health stakeholders welcome Health Ministers' critical conclusions on the proposed Directive “Information to the general public on medicinal products subject to medical prescription”

Last Thursday in Brussels, a wide range of organisations representing key healthcare stakeholders – patient groups, family and consumer bodies, social security systems, and health professionals – met to discuss the European Commission’s proposed Directive “Information to the general public on medicinal products subject to medical prescription”. The participants highlighted the need for relevant health information, as a fundamental part of healthcare, centred on patient and consumer needs as well as public health priorities, and provided by reliable independent sources (1).

The participants welcomed the results of the Employment, Social Policy, Health and Consumer Affairs (EPSCO) Council meeting (8-9 June 2009) where Health Ministers denounced the misguided approach contained in the European Commission proposals (2). Under the guise of patient “information”, these proposals would, in reality, lead to the relaxation of the ban on direct-to-consumer advertising (DTCA) of prescription medicines in Europe, risking citizens’ safety and the sustainability of national healthcare systems.

Anne-Sophie Parent from AGE-the European Older People’s Platform (AGE) said:

“According to evidence gathered from the US [where DTCA is allowed] and from direct-to-doctors advertising in Europe, the pharmaceutical industry, due to unavoidable conflicts of interest, should not be allowed to communicate directly with the public about the medicines it produces beyond the boundaries that are currently set in the law.”

Meeting participants called upon the European Commission to work on a new and more ambitious strategy, truly recognising the legitimacy of patients and their family circle, patients' organisations, consumers, users, and their organisations as real partners on the process.

They propose key elements to be addressed, such as:
- to improve the readability of the packaging and the patient information leaflet (better enforcement of article 59 of Directive 2001/83/EC modified by Directive 2004/27/CE);
- to optimize communication between patients and health professionals;
- to encourage national health authorities to become proactive and more transparent providers of information on the efficacy and safety of medicines;
- to develop and sustain existing sources of comparative information that helps patients to weigh up the pros and cons of all existing treatments in order to participate in informed treatment choices (1).

Teresa Alves from Health Action International (HAI) Europe added:

"Rather than weakening the legislation by introducing changes to articles 86 and 88 of Directive 2001/83/EC, the Commission should be striving to fully implement and strengthen the European regulation on pharmaceutical promotion.”

To ensure that EU medicines’ policy upholds public health, the alliance also stressed the need for a transfer of competence on pharmaceuticals from the European Commission Directorate General Enterprise and Industry to a Directorate General whose focus is Health.

1- Joint Declaration "Relevant health information for empowered citizens" (Dec. 2006); www.prescrire.org/docs/declarationInfoPatientEN0610.pdf
Signatories

AGE. The European Older People's Platform (AGE) is a European network of organisations of people aged 50+ and directly represents over 25 million older people in Europe. AGE aims to voice and promote the interests of the 150 million inhabitants aged 50+ in the European Union and to raise awareness of the issues that concern them most. More info: www.age-platform.org. Contact: annesophie.parent@age-platform.org.

AIM. The Association Internationale de la Mutualité (AIM) is a grouping of autonomous health insurance and social protection bodies operating according to the principles of solidarity and non-profit-making orientation. Currently, AIM’s membership consists of 41 national federations representing 29 countries. In Europe, they provide social coverage against sickness and other risks to more than 150 million people. AIM strives via its network to make an active contribution to the preservation and improvement of access to health care for everyone. More info: www.aim-mutual.org. Contact: rita.kessler@aim-mutual.org.

AFA. The Association François Aupetit (AFA) aims to support patients who suffer from Ulcerative Colitis or Crohn's Disease, their families and the health professionals involved in their care. Since 1982, AFA has been dedicated to improving patients’ life, creating a wider understanding of Inflammatory Bowel Disease (IBD), and raising funds for research and better treatments for IBD. AFA gathers around 6000 members and 17000 supporters. More info: afa.asso.fr. Contact: developpement@afa.asso.fr.

BEUC. BEUC's membership includes 41 well respected, independent national consumer organisations from some thirty European countries (EU, EEA and applicant countries). BEUC, the European Consumer’s organisation, acts as a sort of “embassy” for these organisations in Brussels and its main task is to represent its members and defend the interests of all Europe’s consumers. More info: www.beuc.org. Contact: Ilaria.Passarani@beuc.eu.

COFACE. The Confederation of Family Organisations in the EU (COFACE) is a pluralistic organisation, at the heart of civil society, which aims at promoting family policy, solidarity between generations and the interests of children within the European Union. It defines family policy in Europe as being the family dimension of policies, programmes and initiatives developed at European Union level (“family mainstreaming”). COFACE links together general and single-issue national family organizations. It currently has 54 member organizations across 20 Member States. As such, it gives a voice to many millions of parents and children. More information: www.coface-eu.org. Contact: mschmalzried@coface-eu.org

EATG. The European AIDS Treatment Group (EATG) is a non profit patient organisation. EATG members come from 31 European countries. One guiding principle of EATG is to reflect the diversity of people living with HIV and their advocates. More information: www.eatg.org. Contact: wim@eatg.org.

EPHA. The European Public Health Alliance (EPHA) is the largest European Platform, representing approximately 100 not-for-profit organisations across the public health community: representations of patient groups, healthcare professionals, public sector bodies, disease-specific organisations, treatment groups, and representatives of the social society. Their memberships include representatives at international, European, national, regional and local level. EPHA’s missions are to protect and promote public health in Europe and to ensure health is at the heart of European policy and legislation. More information: www.epha.org. Contact: epha@epha.org.

ESIP. The European Social Insurance Platform (ESIP) represents a strategic alliance of over 40 statutory social security organisations in 16 EU Member States and Switzerland. ESIP’s mission is to preserve high profile social security for Europe, to reinforce solidarity, to improve social insurance systems, and to maintain European social protection quality. More info: www.esip.org. Contact: esip@esip.org.

Note: ESIP members support this position in so far as the subject matter lies within their field of competence.

EUSP. The European Union of the Social Pharmacies (EUSP) is the professional Association of the Social Economy Companies aiming to make, services, medicines and health products accessible to the patients, at affordable conditions, trough a network of 2.000 city-pharmacies in Belgium, France, Italy, The Netherlands, Poland, Portugal, United-kingdom and Switzerland. More information: www.EuroSocialPharma.org. Contact: mh_cornely@multipharma.be.

HOPE. The European Hospital and Healthcare Federation (HOPE), is an international non-profit organisation, created in 1966. HOPE represents national and private hospital associations and hospital owners, either federations of local and regional authorities or national health services. Today, HOPE is made up of 32 organisations coming from 26 Member States of the European Union, plus Switzerland. More info: www.hope.be. Contact: sg@hope.be.

HAI Europe. Health Action International (HAI) is an independent global network of health, consumer and development organisations working to increase access to essential medicines and improve rational use. More info: www.haiweb.org. Contact: teresa@haiweb.org.

ISDB. International Society of Drug Bulletins (ISDB), founded in 1986, is a world wide Network of bulletins and journals on drugs and therapeutics that are financially and intellectually independent of pharmaceutical industry. Currently, ISDB has 79 members in 40 countries around the world. More info: www.isdbweb.org. Contact: press@isdbweb.org.

MIEF. Medicines in Europe Forum (MIEF), launched in March 2002, covers 12 European Member States. It includes more than 70 member organizations representing the four key players on the health field, i.e. patients groups, family and consumer bodies, social security systems, and health professionals. Such a grouping is unique in the history of the EU, and it certainly reflects the important stakes and expectations regarding European medicines policy. Admittedly, medicines are no simple consumer goods, and the Union represents an opportunity for European citizens when it comes to guarantees of efficacy, safety and pricing. Contact: europedemedicament@free.fr.