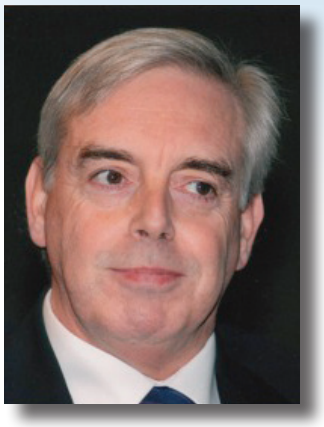
The European Council of Medical Orders (CEOM) Stresses the Importance of the Ongoing EU Legislations to Enhance Patient Safety and the Information to Patients by Fully Qualified Doctors



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Since 1971, the CEOM brings together the EU and EFTA medical councils and independent medical regulatory authorities and aims to promote the practice of high quality medicine, respectful of patients' needs. To this end, the CEOM develops cooperation between its participating organizations and lends support to their action by developing quality standards and common positions relating to medical ethics and professional conduct, free movement of healthcare professionals, medical demography, medical regulation, professional training of physicians and public health issues related to these subjects.

Together with other European Medical Associations (2010 Joint Motion AEMH, CEOM, EJD, FEMS and UEMS), the CEOM has been engaged in the debate defending a good quality and a personalized information on medical products.

If the CEOM welcomes the European Commission Internal Directorate DG Sanco for having rewritten the proposal[1], adding important safeguards and stressing the European Parliament ENVI committee's implication, this is not enough to guarantee the protection of the patient.

It is of foremost importance that information must be provided by a physician or another health care professional. The information provided by pharmaceutical companies has no therapeutic objective as such and therefore cannot justify skipping the health care professional as the main interlocutor for the patient.

The CEOM stresses the importance of medical deontology in order to guarantee that patients have access to appropriate information: transparent, independent, critically reviewed, objective and that allows comparison. If pharmaceutical companies however provide this information themselves, a conflict of interests occurs, since the industry cannot be objective in the information it provides about its own drugs in an area where it is difficult to establish the boundary between information and advertising, and when commercial interests interfere.

Furthermore, the direct publicity or non appropriate information for the patient could risk an increase of national expenses at a moment we need to reduce it. As an Association bringing together national regulators, whose principal aim is the safety of patients, we consider that the risk of non appropriate information to the patient is too dangerous and the CEOM fully supports the EU health Ministers' cautious position.

The CEOM highlights the need of being focused on the improvement of the EU legislation regarding the recognition of medical qualifications (revision of Directive 2005/36/CE[2]), which aims to guarantee the competence of Doctors practicing in the EU and also stresses the importance of the ongoing revision of medical devices[3] and clinical trials[4] legislations.

The CEOM also remains attentive to ethical concerns related to the safe use of drugs in healthcare, such as freedom to prescribe, continuous training of health care professionals regarding their pharmaceutical knowledge at a high level and risks of drug addiction.

1. On 28 June 2012, the Commission adopted a corrigendum to the amended Commission proposal for a Regulation as regards information to the general public on medicinal products subject to medical prescription: http://ec.europa.eu/health/files/patients/com_2012_49_cor/com_2012_49_cor_en.pdf

2. COM(2011) 883 final du 19 December 2011: http://ec.europa.eu/internal_market/qualifications/docs/policy_developments/modernising/COM2011_883_en.pdf

3. COM(2012) 542 final du 26 September 2012 (medical devices) : http://ec.europa.eu/health/medical-devices/files/revision_docs/proposal_2012_542_en.pdf

4. COM(2012) 369 final du 17 July 2012 : http://ec.europa.eu/health/files/clinicaltrials/2012_07/proposal/2012_07_proposal_en.pdf