

Meeting with the Pharmaceutical Group of the European Union – 10.10.17

Participants:

- EC: Xavier Prats Monné, [REDACTED], [REDACTED]
- PGEU: [REDACTED]

Main points discussed per topic:

- **Vaccination**
 - XPM explained the commitment of the EC to work on vaccination in cooperation with MSs in particular on the problem of vaccination hesitancy and the different schedules used across Europe.
 - [REDACTED] argued that vaccination was a primary health practice that could be done by pharmacists. The problem is that most pharmacies get paid for the margins and not for the services they provide and also that normative regarding what pharmacists are allowed to do are different in different MSs.
 - XPM asked PGEU to provide ideas / initiatives that the EC could do in the context of a Council recommendation without being normative (such as the 2009 Council recommendation on seasonal influenza coverage which was recommended to be 75% of at risk populations).
 - [REDACTED] invited XPM to the PGEU General Assembly to discuss further on the topic and praised the work done by the EC on position papers, policy papers which they use with their members (e.g. Council recommendation).
 - [REDACTED] also conveyed the problem of involvement of professional associations in Joint Actions. According to her JA are now at the mercy of MSs but the policy packages proposed are not designed with the professionals in view. For a JA to work you need buying off if professionals which is not the case now.
 - XPM recommended that they contact [REDACTED] for the JA on vaccination to discuss involvement in partnership.
- **AMR**
 - XPM presented the main lines of the action plan and asked whether more could be done on a qualitative scale.
 - [REDACTED] conveyed the problem of fragmented actions for GPs, pharmacists and the public. Coordinated actions would result in a lower use of antimicrobials. MS should also have the 'appetite' to release funds to implement some actions.
- **Homeopathy**
 - XPM talked about the 'creeping phenomenon' of homeopathy and what could be done at pharmacy level as pharmacies sell homeopathy.
 - [REDACTED] replied that the problem is that homeopathy is in the syllabus in some MSs, so part of education, but education is a national competence so there is little they can do. And it is necessary to differentiate when homeopathy is replacing necessary treatments for serious diseases, so harming the patients and when homeopathy is used as placebo for mild issues.
- **Other**
 - XPM reminded that the Juncker Commission has a strong focus on EU-added value in policies so every proposal should start with thinking 'what could Europe do' rather than 'what could SANTE do'. A good example is the cross-border health threats.
 - XPM will participate to PGEU GA on 16 November at 13.30. He will address the audience on future priorities on health and current work to drive the conversation.

[REDACTED]