

Feature Stories



[Transparency: Should the EMA be allowed to censor independent analysis of side effect data?](#)



[Handicap: Offering greater Autonomy to Disabled thanks to Technology](#)



[Council of Europe: Maintaining universal access to health care](#)



[ILO Report: Social Security, an unfulfilled fundamental Human Right](#)

Contents:

European Institutions

European Commission

European Parliament

Pharmaceuticals and Medical Devices

Health and Long-term care

Social Protection

Insurance

2
2
3
3
5
6
8

What's next?

5 September

Prevention WG

6 October

European Affairs
WG

8 October

Fraud WG




17 October

Presidium
Meeting

12-14.11

General
Assembly

Top Tweets

-  AIM @AIM_Healthcare · 12 août
#MentalHealthMatters Today is international #YouthDay with, as theme, "#youth and #mentalhealth". @UN bit.ly/XDaatr
-  AIM @AIM_Healthcare · 6 août
Benenden Health publishes National Health Report. @benendenhealth bit.ly/1AUm8OT
-  AIM @AIM_Healthcare · 5 août
ILO Report: #socialsecurity, an unfulfilled fundamental #humanright. @ilo bit.ly/1o8tFoP

➤ *European Commission*

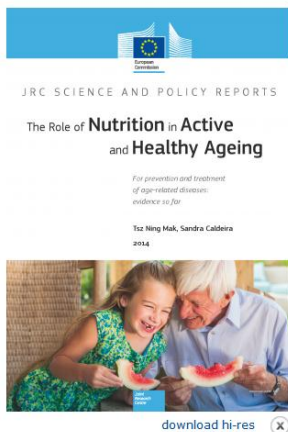
Handicap: Offering greater Autonomy to Disabled thanks to Technology

13 August – EU funded project TOBI (Tools for Brain-Computer Interaction) is designed to give people with disabilities greater independence and allow a better integration within society.

The experiment uses non-invasive technology to help patients recover the control of paralyzed limbs, take “virtual” walks or surf on the Internet. TOBI is based on three kinds of brain-to-computer dialogue: brain signals sent to a computer through electrodes placed on the patients’ head which allow them to write emails or surf the web; brain signals to control a robot with audio, video and obstacle-detection; and the third type enabled some patients to move paralyzed limbs. With training and rehabilitation, this regain movement was preserved even after removing the electrodes.

As the Vice-President of the European Commission responsible for the Digital Agenda Neelie Kroes puts it, “the EU is helping new innovations be an opportunity, not a barrier, for people with disabilities”.

For more information on the topic, please read the European Commission’s [Press Release](#).



EU Commission: Healthy Diet reduces Risks of Age-related Diseases

4 August – The European Commission Joint Research Centre (JRC) publishes the report “The role of Nutrition in Active and Healthy Ageing”, a contribution to the European Innovation Partnership on Active and Healthy Ageing, whose aim is to increase the average healthy lifespan by two years by 2020.

JCR scientists analyzed evidence on treatment and prevention of age related diseases and found out that the micronutrient supplements’ effect seems to be currently limited. On the other hand, a proper diet, which contains essential minerals, vitamins and bioactive compounds, increases longevity and reduces the risks of developing age-related diseases.

For more information, please visit the Commission’s [website](#).

ICT: a Tool to support Diabetic Patients

Ten percent of the World’s population is affected by diabetes, a disease which can lead to early death and poor quality of life and which represents a financial burden for healthcare services.

The REACTION (Remote Accessibility to Diabetes Management and Therapy in Operational healthcare Networks) project started in February 2014 with as main aim the development of information and communication technologies (ICT) to support patients and healthcare professionals in the management of diabetes. The project resulted in a platform which enables remote monitoring and therapy management and facilitates continuous and tight control of blood glucose levels and other indicators which are crucial to the treatment of the disease. Both patients and healthcare professionals were involved in order to make the system intuitive and effective. The social, economic and legal implications of the technology were taken into account to make it more socially and professionally acceptable. Member States’ legal frameworks regarding privacy and liability were also studied.

REACTION is a huge step forward towards the management of diabetes through technology.

For more information on the topic, read the [Article](#).

Patient Safety: Public consultation on the preliminary opinion on Future EU Agenda on quality of health care with a special emphasis on patient safety

The European Commission and the Expert Panel on Effective Ways of Investing in Health (EXPH) have launched a public consultation on the [Preliminary Opinion](#) on the ‘Future EU Agenda on quality of health care with a special emphasis on patient safety’.

The opinion seeks to outline an EU agenda on patient safety and quality of care. It identifies a subset of commonly accepted dimensions of quality/safety applicable to all health services, which should be prioritized at EU level. Indeed, regardless of the level of health care provided, all services have to be effective, safe, appropriate, patient-centred, efficient and equitable. With regard to the information needed to assess quality and safety of health care in the EU, the EXPH highlights a subset of indicators potentially suitable to quantify these quality/safety core dimensions. The Expert Panel is now seeking feedback from the scientific community and stakeholders on its opinion on Future EU Agenda on quality of health care with a special emphasis on patient safety.

You can answer the consultation [Here](#) by 21 September 2014.

➤ **European Parliament**



European Parliament publishes report on “Prevention and Healthy Life”

6 August – The report published in June summarizes the discussions and presentations of a workshop on “Prevention and Healthy Life” held on 4 March at the European Parliament.

The workshop’s main aim was to discuss the challenges and future perspective in the field of health promotion and disease prevention from a European perspective. Several speakers participated in the debate by making fruitful contributions to the topic.

Mr. Hübel, Head of the Programme Management and Disease Unit of DG Health, spoke about the 2nd Community Action Programme in the field of Health 2008-2013 and the 3rd which will cover the period 2014-2020. The main differences between both programmes lay in the fact that the latter covers not only health issues but also health policies in a wider sense. It is aimed to support Member States to address health inequalities by focusing on four priorities: health promotion, disease prevention and the fostering of supportive environments for healthy lifestyles; the protection of citizens

from serious cross-border health threats; the contribution to innovative, efficient and sustainable health systems; and the facilitation of access to better and safer healthcare for Union citizens.

Prof. Rohrmann, Head of the Department of Epidemiology and Prevention of Cancer, then identified the main risk factors for different diseases and measures for preventing them. Mr. Marhan Vidensek, naturopath and founder of Zavod Preporod, shared his experience in the organisation of programmes in healthy lifestyles in schools and underlined the importance of fasting as a mean of detoxification. Finally, Dr. Kuhn, Chair of the European Network for Workplace Health Promotion reminded the audience of the importance of improving workplaces health and well-being and of reducing the impact of work-related illnesses on the European workforce.

MEP Alojz Peterle, who chaired his last workshop, ended by expressing his hope that the next mandate will give prevention the place it deserves in EU political agenda.

For more information on the topic, read the [Report](#).

➤ **Pharmaceuticals and Medical Devices**

Europe boosting Cooperation on Generics

7 August – The International Generic Drug Regulators Pilot (IGDRP) was launched in April 2012 in order to tackle the challenges raised by workloads and globalization, and foster collaboration in generic medicines regulatory programmes.

The project should contribute to facilitating and strengthening the scientific assessment process for medicines and enable them to be authorized in different Member States at the same time.

For further information, please read EMA’s [article](#).

Transparency: Should the EMA be allowed to censor independent analysis of side effect data?

4 August - The EMA has just published a [proposal](#) to give researchers access to the EudraVigilance database where reports of side effects from approved drugs in Europe are recorded.

In the proposal the EMA says that it “has the right to view any publication resulting from EudraVigilance data before submission [...]. Any issues raised by the Agency concerning incorrect analyses, unsupported inferences, misleading statements or the protection of personal data must be addressed to the satisfaction of the Agency before submission for publication.” According to Alltrials, an initiative which calls for all past and present clinical trials to be registered and their results reported, this could lead the EMA to censor independent analysis reporting if it doesn't agree with the analysis. Read the whole article [Here](#).

The [Public Consultation](#) on access to EudraVigilance is ongoing until 15.09.14.

➤ **National Health Policies**

The German health system: challenges for new government

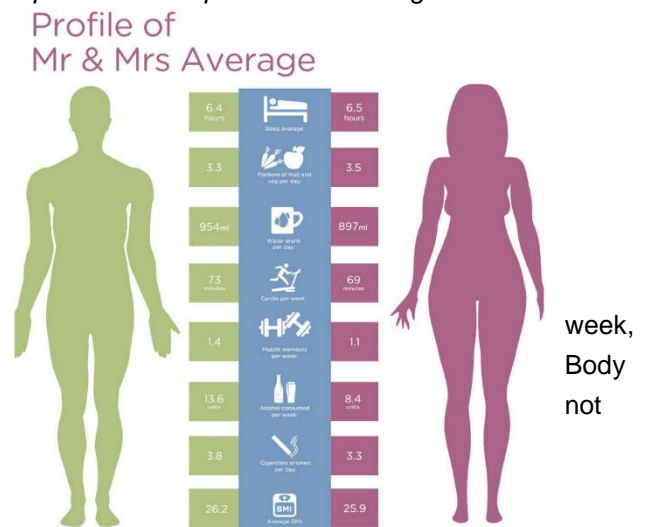
12 August - Since reunification various governments have implemented a number of important reforms in the German health sector, including changes in self-governing structures, financing the statutory health insurance system, paying providers and assessing and reimbursing pharmaceuticals.

Today the German health care system has a generous benefit basket, one of the highest levels of capacity as well as modest cost-sharing. Expenditure per capita is high and access is good. However, the system also shows areas in need of improvement when compared to other countries and has low satisfaction figures with the health system in general and issues around quality of care, if the outcomes of individual illnesses are analysed. This new health system review (HiT) on Germany examines changes and reforms that have taken place and discusses challenges for the new government that came to power at the end of 2013. You can the report which provides a description of the German health system and of policy initiatives in progress or under development [Here](#).

Benenden publishes National Health Report

6 August – Benenden Health, the British member of the AIM, has published a report on the average health of British citizens.

The report compares the health of “Mr & Mrs Average” to the established national health guidelines and comes out with results which reflect that most of the nation is neglecting its health. To support such a statement, the 4,000 adults’ responses were categorized according to eight health indicators: sleep, portions of fruit and vegetables eaten, water consumption, cardio exercise per week, muscle workouts per alcohol consumed per week, cigarettes smoked per day and Mass Index. What came out is that both men and women do not get enough sleep, and neither do they drink enough water or consume enough fruit and vegetables. They do not exercise sufficiently, drink too much alcohol and smoke too much. The average British BMI is also higher than the established healthy standard. The report highlights the general skepticism around national guidelines and particularly on the latter, with younger generations being the most skeptical. The study also describes regional differences as far as those indicators are concerned and offers a ranking of the healthiest regions.



But not only is physical wellbeing under scrutiny. The National Health Report also analyses emotional well-being and shows for example that stress, depression and anxiety are more registered in women and that surprisingly, loneliness is suffered by 11% of people over the age 65.

Benenden Health plans to carry out this research every year in order to follow the changes in the nation's health demographic, measure the impact of national health campaigns and continue having an overview of British people's health and wellbeing.

For more information on the topic, read the [Report](#) or visit Benenden Health's [Webpage](#).

➤ *Trends in health system*

World Humanitarian Day: WHO calls for protection of health workers in conflicts, disasters

18 August - *WHO is calling for an end to the targeting of health workers in conflicts and other humanitarian crises, which represent a breach of the fundamental right to health.*

On the World Humanitarian Day (19th of August), WHO pointed out the frequent attacks on health-care workers, hospitals, clinics and ambulances in Syria, Gaza, Central African Republic, Iraq, South Sudan and other areas. Threats and harassment of health workers in West African countries have also been a worrying element of the Ebola virus disease outbreak. Dr Richard Brennan, Director of WHO's Department of Emergency Risk Management and Humanitarian Response, affirms: "Assaults on health workers and facilities seriously affect access to health care, depriving patients of treatment and interrupting measures to prevent and control contagious diseases. WHO has a specific mandate to protect the human right to health, especially for people affected by humanitarian emergencies." While the adverse impacts of attacks on health care have been well documented in conflicts such as Syria and South Sudan, Gaza, health workers are also being prevented from carrying out their essential work outside of war-zones. In Pakistan and Nigeria, polio vaccinators, most of them female, have been specifically targeted.

WHO reminds that protecting those who are taking personal risks to provide critical medical care is one of the most pressing responsibilities of the international community.

More information [Here](#).

Youth Day: Mental Health Matters

12 August – *The United Nations celebrated International Youth Day, with a special focus on Mental Health.*

As Secretary General Ban Ki-Moon explained, through this event, the UN wants to "lift the veil that keeps young people locked in a chamber of isolation and silence". Youth should be empowered to achieve their goals and aspirations, an empowerment which can only be reached by fostering social inclusion, tackling stigma and ensuring access to mental services to all.

During the meeting, Member States, civil society and other stakeholders were also encouraged to consider youth participation as essential for the implementation of the post-2015 development agenda.

On the occasion of the event, the UN Department of Economic and Social Affairs' report "Mental Health Matters: the Social Inclusion of youth with mental health conditions" was published. According to it, twenty percent of the young people around the globe experience a mental health condition.

For more information on the topic, read the [Article](#).

Research: One step closer to understanding cancer

7 August - *The EU-funded GlycoBioM project has brought together leading European scientists to study cancer. Coming from Croatia, Denmark, Germany, Ireland and the UK, the team's work is contributing to identify new biomarkers and tools for detection and diagnostic screening.*

Three years into the project, the team has already come up with a method to reduce false-positive cancer diagnoses. When the Irish and Croatian teams found that certain glycans (biological molecules) can predict the speed at which colon cancer will progress, the Danish team was able to develop a new glycoprofiling method to reduce false-positive cancer diagnoses, particularly among women suspected of having ovarian cancer. In the same time, the team has made progress in unravelling the complexities of breast cancer which could lead to the improvement of therapy for patients. And the project is expected to generate more new tools for analysing glycobiomarkers in the clinic, including enhanced diagnostic imaging. This will be useful for monitoring the effects and safety of cancer therapies, bringing medical science a step closer to fighting some of the most complex and troublesome disease families.

More information [Here](#).

Council of Europe¹: Maintaining universal access to health care

7 August - The Commissioner for Human Rights of the Council of Europe, Nils Muižnieks, rings the alarm bell in an article arguing that cuts in health services and difficult economic and social conditions have dramatic impacts on the health of the population in many countries.

Health care spending in Europe began to decrease in 2010, reversing a long-term trend as documented by the [OECD](#). The crisis had resulted in massive cuts in medical staff and funding of public health centres, the closure of many emergency services and the introduction of co-payment schemes.

Many vulnerable groups face specific barriers in access to health care. Children's health was a particular concern because of rapidly rising poverty, homelessness and malnutrition among them. In Greece, Infant mortality increased by 43% from 2008 to 2010. The [WHO](#) has warned of possible life-long effects of extreme poverty on children's health which may include deficits in cognitive, emotional and physical development.

For the Commissioner, it's high time to start viewing health inequalities through a human rights perspective by putting the person at the center of health service delivery. It is also important to address wasteful practices and corruption in health care. However, such reforms should not simply amount to cost-cutting exercises. They should always aim to deliver quality care to the entire population without excessive user charges. Governments have a duty to maintain health and social protection floors which are available to everybody at all times.

Find the whole declaration [Here](#).

Latin-America: Mobile Technology to fight Poverty and Inequities

31 July - In many Latin-American countries, more than one mobile device is registered per inhabitant, a reality which must be taken advantage of in order to foster innovation and face the social challenges present in the region.

According to a study carried out in 2013 by the GSMA Intelligence, which gathers nearly 800 of the world's mobile operators and which is the reference in mobile data analysis in the world, more than half of the Latin-American population has a mobile phone. The "developing world" is indeed more mobile than the developed world. In 2012, mobile telephony represented 3.7% of the Latin-American GDP and the number of devices is estimated to double by 2017.

In such a context, it is no wonder that researchers are working on developing this technology as a tool to tackle issues such as fraud, or access to education and to information on health. In Colombia for instance, the application "Mami" helps pregnant women to look after their health by sending them messages.

The challenge, however, remains being able to fully enjoy the benefits of these apps. To do so, educational institutions and study plans are called to work hand in hand with the industry in order to teach a proper use of technology and thus increase users' benefits.

To learn more on the topic, read the [article](#) on "El País" website. (ES)

Malnutrition in Wealthy Nations: a Serious Problem

28 July – In wealthy Europe, three out of four people suffer from "hidden hunger", a form of malnutrition, a problem not to be underestimated as not only does it have consequences for the population's health and increases healthcare costs but it also reduces productivity and slows down economic growth.

In wealthy nations, hunger is less common and yet, many consume enough calories but do not get the necessary vitamins and nutrients to function properly, fight diseases and remain healthy. In the developed world, income determines access to nutritious food. "Healthy eating costs an average of €1.10 more per person per day", and stays thus out of reach for low income families. As a consequence, poorer people are more inclined to diseases like diabetes or obesity. In order to tackle this urgent issue, Member States should prioritize nutrition and enact strong policies to ensure wellbeing, good health and success to future generations.

For more information, read the [Article](#).

¹ The **Council of Europe** is an international organisation promoting co-operation between all countries of Europe in the areas of legal standards, human rights, democratic development, the rule of law and cultural co-operation. This is not part of the European Union.

Social Protection

ISSA: Guidelines on Return to Work and Reintegration

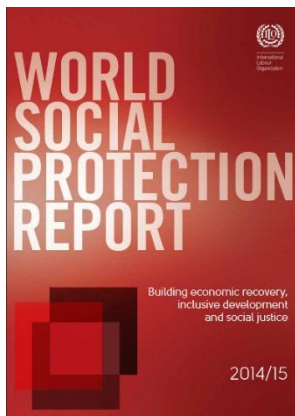
7 August – The International Social Security Association published Guidelines on Return to Work and Reintegration designed to help social security institutions and other stakeholders support people who are on sick leave and who are still attached to a specific employer.

The guidelines are meant to outline strategic options for social security institutions, foster discussion around good practice return to work programmes, identify critical success design elements and provide practical implementation tools. According to ISSA, the approach they offer intends to “reduce the incidence of disabling conditions, maintain the employment relationship for disabled employees, and reduce inflow into or reliance on the social security system by people who have acquired or developed a disabling health condition with subsequent employment loss”. Modern social security institutions are called to make a paradigmatic shift from “payers” to “players” and commit themselves in maintaining workforce attachment for disabled or ill people at risk of losing their employment.

For more information on the topic, read the [Article](#).

ILO Report: Social Security, an unfulfilled fundamental Human Right

While Social Protection is widely recognized as a key element of national strategies to promote political stability, inclusive growth, and human, economic and social development the effectiveness of social security systems still remains insufficient in many countries with only 27% of the world’s population being covered (the remaining 73% only enjoying partial coverage or no coverage at all).



ILO’s “World Social Protection Report” highlights the necessity to strengthen existing social protection policies when it comes to covering children in low and middle income countries. The crisis and the consequent adjustments which were made to match high-income economies standards have had a negative impact on the security of children and families. ILO stresses the importance of social security in ensuring the right to go to school and protecting children from exploitation.

As far as the working age is concerned, the International Labour Organisation stresses the necessary universalisation of unemployment, employment injury and maternity protection, as well as disability benefits. Only 28% of workers worldwide would currently enjoy unemployment benefits if they were to lose their job, 80% of which are European. Coverage

of employment injury compensation, maternity cash benefits, affective access to quality maternal healthcare are some of the rights which social protection has to guarantee.

Though many countries are making efforts to ensure basic income security in old age, there is still a lot of progress to be done in this area too, as 48% of people over pensionable age do not receive a pension and for those who do, pension levels are not adequate.

Social security systems are successfully reducing poverty, inequality and exclusion but greater joint efforts are necessary to reach universal health coverage, which constitutes a key to crisis recovery and inclusive development.

For more information on the topic, read ILO’s [Report](#).

ISSA publishes Workplace Health Promotion Guidelines

The International Social Security Association has published Workplace Health Promotion guidelines, meant as a framework to develop promotion programmes.

As ISSA puts it, “national economies and public and private enterprises with better occupational safety and health standards tend to be more successful”. Such is the reason why the Association has developed a workplace health programme which includes, amongst others, health education classes, employee insurance coverage for preventive screenings, access to local fitness facilities and the creation of a healthy work environment. In order to reach its full potential, the programme must be based on strong senior management commitment and count on the engagement of all workers at all levels of an organization. Social security institutions also have to play their part and encourage and

support employers who set up such programmes in their companies by investing time and resources in their development.

For more information on the topic, visit ISSA's [Webpage](#).

Insurance

Insurance: European insurance figures show growth and stability

6 August - The European insurance industry has maintained a path of stability and growth, even during times of crisis, according to figures released by Insurance Europe.

The figures, which included data collected from 32 national insurance associations across Europe, looked at various aspects of the European insurance industry between 2003 and 2012. The total amount of life insurance benefits paid out by European insurers increased by 64%, from €389 381 million in 2003 to €639 400 million in 2012. The volume of non-life claims paid increased by 41%, from €236 189 million in 2003 to €332 236 million in 2012, according to the figures. European insurance premiums increased in nominal terms by a quarter during that period, with non-life premiums growing at a faster rate than life premiums, with cumulative increases of 30% and 22% respectively, the figures showed.

More information [Here](#).

The monthly AIM Flash is compiled by Romain Chave and Jessica Carreño Louro.

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For more information on one of the topics mentioned above, please contact the AIM Secretariat.

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