



REGULATION OF THE EUROPEAN PARLIAMENT AND OF THE COUNCIL
on
establishing a Health for Growth Programme, the third multi-annual Programme of EU
action in the field of health for the period 2014-2020

Comments from the European Coalition on Homeopathic and Anthroposophic Medicine Products

1 Introduction

The European Coalition on Homeopathic and Anthroposophic Medicine Products (ECHAMP) represents the vast majority of the industry for homeopathic and anthroposophic medicinal products in Europe. Our main aim is to advocate for the development and implementation of an appropriate legal and regulatory framework in order to achieve free and easy availability of these medicinal products in the European Union.

Homeopathic and anthroposophic medicinal products have been safely on the market in Europe for decades; they are used today by more than 150 million Europeans. The industry for these products represents 1% of the European pharmaceutical market and 7% of the European non-prescription market. Given the fact that some 150 million Europeans currently use homeopathic and anthroposophic products, it is clear that this 1% of the total pharmaceutical market has a large spread. Not only are more and more citizens actively choosing to make use of these therapies; these products are also sustainable from an environmental, economic and public health point of view.

This document contains some general comments on the Commission proposal for a 'Health for Growth' Programme as well as some specific amendments to the proposed text of the legislative Regulation.

2 General comments

We welcome the Commission proposal for a third dedicated EU-level health Programme, as this will ensure continuity of the Commission's practical support for projects in the field as well as help keep health on the EU political agenda.

Moreover, this 'Health for Growth' Programme – as reflected by its title - is closely linked to the EU's overarching Europe2020 strategy, and this puts health and its importance firmly at the core of European policy development.

ECHAMP agrees that health is a value in itself as well as a driver for growth, as only a healthy population and workforce can support economic stability and sustainable societies. A healthy population will also help Member States in reaching a balance between cost-effectiveness of health systems and budgetary constraints on the one hand side and supporting universal access to high-quality health services on the other.

We also welcome the Commission's comprehensive view on technology, which targets technology and new products as well as healthcare organisation, structure and financing.



In this context reference is made to the potential of health innovation to help reduce healthcare costs and improve the quality of care. ECHAMP believes that homeopathy and anthroposophic medicine can play an important role in this respect - especially against the backdrop of an ageing society - in the following ways:

- It can help to find alternatives for the strong prescription remedies and medicines which have many negative side effects and are often taken in combination as a result of co-morbidity.
- Conventional medicines prescribed to older people have usually not been tested for their use and effect in this specific age group. Adverse drug reactions are common amongst older people and any measure that could be taken to improve this situation and improve patient safety should be stimulated.
- Apart from their positive impact on the health of individuals, alternative medicines would also have advantages in relation to finances, both for the older persons themselves as well as for member states health budgets which are currently under pressure.

In this context we would like to refer to a recent large scale survey¹, carried out in The Netherlands, which demonstrates that patients whose GP has additional training in homeopathy, acupuncture or anthroposophic medicine have substantially lower health care costs and lower mortality rates. The lower costs result from fewer hospital stays and fewer prescription medicines. These differences remain even when neighbourhood-specific factors and are taken into account; this means that the lower costs and longer life expectancy are unlikely to be related to differences in socio-economic status.

The empirical analysis was based on detailed data of health care costs of 150.000 insurees of a Dutch health insurance company. For each of these, information on the costs of four different types of care was available:

- care by GP
- hospital care
- pharmaceutical care
- paramedic care (e.g. physical therapy)

Overall, the results provide strong evidence of substantially lower costs (7 %) for general practitioners who have additional training in complementary medicine as compared to conventional GP's. Homeopathic GPs report some 15 percent lower costs in all three age categories below age 75. The differences result from lower hospital and pharmaceutical costs. Even more significant is the analysis of mortality rates. The report shows that patients with a general practitioner offering traditional as well as complementary medicine treatment have lower mortality rates, i.e. higher life expectancy. This is

¹ <http://members.ziggo.nl/peterkooreman/gpcs.pdf>



interesting news for any health insurance company and any government that want to reduce the soaring healthcare costs and increase life expectancy.

Developing this product and services area should therefore be considered as desirable innovation, which is in line with both health as well as individual requirements.

The Health for Growth Programme would seek to:

- to develop common tools and mechanisms to address shortages of resources, in order to contribute to innovative and sustainable health systems;
- to increase access to medical expertise and information for specific conditions and to develop shared solutions and guidelines to improve healthcare quality and patient safety in order to increase access to better and safer healthcare for EU citizens;
- to identify, disseminate and promote the up-take of validated best practices for cost-effective prevention measures in order to prevent diseases and promote good health;
- to develop common approaches and demonstrate their value for better preparedness and coordination in health emergencies in order to protect citizens from cross- border health threats.

These four aims seem to provide a comprehensive and well-structured framework, which builds on the accomplishments and lessons learnt from the previous and current health Programmes.

In relation to the first aim, the Commission states that ‘improving access to healthcare for all citizens regardless of income, social status, location and nationality is key to bridging the current substantial inequalities in health’.

ECHAMP warmly welcomes the recognition that all EU citizens should have access to safe and high-quality healthcare regardless of their circumstances, which is currently not the case; access to healthcare still varies significantly. We would like to again underline the importance of enabling patients to access the healthcare services and treatment options of their choice; this requires a pluralistic and holistic approach to public health.

As regards the second aim, we believe that homeopathy and anthroposophic medicine can play a major role in increasing access to better and safer healthcare for EU citizens. The safety profile of our products is outstanding, as can be seen by the increasing numbers of patients and citizens making use of our products.

Given the above, ECHAMP would like to urge the Commission to include homeopathy and anthroposophic medicine in the annual work plans of the Programme, to do justice to the increasing interest and increasing number of users. ECHAMP would be happy to support the Commission to this effect, by providing detailed evidence, such as quantitative data, studies and evaluations.

We also have excellent relations with patients and health professional groups, and would be in a strong position to contribute to the implementation of the Programme.



3 Specific amendments to the Regulation

The numbering reflects the numbering in the Commission document.

HAVE ADOPTED THIS REGULATION:

Chapter I General provisions

Article 2

General objectives

The general objectives of the Health for Growth Programme shall be to work with the Member States to encourage innovation in healthcare and increase the sustainability of health systems, to improve the health of the EU citizens and protect them from cross-border health threats, **taking an integrated and patient-centred approach.**

Article 3

Specific objectives and indicators

The general objectives referred to in Article 2 shall be pursued through the following specific objectives:

(1) To develop common tools and mechanisms at EU level to address shortages of resources, both human and financial, and to facilitate up-take of innovation in healthcare in order to contribute to innovative, **accessible, equitable** and sustainable health systems.

Article 4

Eligible actions

The objectives referred to in Article 3 shall be achieved through the actions listed below and according to the priorities set out in the work programme referred to in Article 11 of this Regulation.

(1) Contributing to innovative, **integrated** and sustainable health systems:

(2) Increasing access to better and safer healthcare for citizens:

2.3. Strengthen collaboration on patient safety and quality of healthcare, by increasing the availability of information to patients, exchange of best practices and development of guidelines, **taking an integrated and patient-centred**; support action on chronic diseases care and research including development of European guidelines;

(3) Promoting good health and preventing diseases:–

3.4. Foster a **pluralist and integrated** health knowledge system, to contribute to evidence-based decision making



Article 11

Annual Work programmes

1. The Commission shall implement the Programme by establishing annual work programmes (with the input from and in cooperation with relevant stakeholders) setting out the elements provided in the Financial Regulation and in particular:

Article 13

Monitoring, evaluation and dissemination of results

1. The Commission shall, in close cooperation with the Member States and relevant stakeholders, monitor the implementation of the actions under the Programme in the light of its objectives and indicators, including information on the amount of climate related expenditure. It shall report thereon to the committee referred to in Article 13, and shall keep the European Parliament and the Council informed.

2. At the request of the Commission or the European Parliament, which shall avoid causing any disproportionate increase in the administrative burden on the Member States, Member States shall submit any available information on the implementation and impact of the Programme.

3. No later than mid-2016, an evaluation report shall be established by the Commission on the achievement of the objectives of all the measures (at the level of results and impacts), the efficiency of the use of resources and its European added value, in view of a decision on the renewal, modification or suspension of the measures, taking into account the views and suggestions of relevant stakeholders. The evaluation shall additionally address the scope for simplification, its internal and external coherence, the continued relevance of all objectives, as well as the contribution of the measures to the Union priorities of smart, sustainable and inclusive growth. It shall take into account evaluation results on the long-term impact of the predecessor Programme and be taken into account in the further implementation of the Programme.

5 of Regulation (EU) No 182/2011 shall apply.