

PRESS RELEASE

6520/88 (Presse 74)

1243rd meeting of the Council
and of the Ministers for Health
meeting within the Council

Brussels, 31 May 1988

President:

Mrs Rita SUESSMUTH
Federal Minister for Youth,
Family Affairs, Women and Health
of the Federal Republic of Germany

31.V.88

The Governments of the Member States and the Commission of the European Communities were represented as follows:

Belgium:

Mr Philippe BUSQUIN Minister for Social Affairs

Denmark:

Mrs Agnete LAUSTSEN Minister for Health

Germany:

Mrs Rita SUESSMUTH Federal Minister for Youth, Family Affairs, Women and Health

Greece:

Mr Yannis FLOROS Minister for Health, Social Welfare and Social Security

Spain:

Mr Julian GARCIA VARGAS Minister for Health and Consumer Affairs

France:

Mr Claude EVIN Minister attached to the Minister for Social Affairs and Employment with responsibility for Health and Social Security

Ireland:

Mr Rory O'HANLON Minister for Health

Italy:

Mrs Maria Pia GARAVAGLIA State Secretary for Health

Luxembourg:

Mr Benny BERG Minister for Health and Social Security

Netherlands:

Mr CH.R. van BEUGE

Deputy Permanent Representative

Portugal:

Mrs Leonor BELEZA

Minister for Health

United_Kingdom:

Lord SKELMERSDALE

Parliamentary Under-Secretary of
State, Deputy of Health and Social
Security

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Commission:

Mr Manuel MARIN

Vice-President

THE FIGHT AGAINST AIDS

The Council and the Ministers for Health meeting within the Council discussed in detail the progress of AIDS and the measures adopted by the Member States to combat the disease.

They strengthened and supplemented the common approach to the fight against AIDS, the broad outlines of which they had adopted at their meeting in May 1987. Their conclusions on the matter were as follows:

"THE COUNCIL AND THE REPRESENTATIVES OF THE GOVERNMENTS OF THE MEMBER STATES, MEETING WITHIN THE COUNCIL,

note with satisfaction that all the Member States are pursuing homogeneous policies in the fight against AIDS in accordance with the common approach outlined in their conclusions of 15 May 1987

reaffirm this common approach and their will to persist with and strengthen it

note in particular that all the Member States are ensuring complete freedom of movement of persons and equal treatment as laid down in the Treaties

stress their support for the principles of the WHO, the declaration of London of 28 January 1988 (World Summit of Ministers for Health) and the Recommendation of the Council of Europe of 26 November 1987

reaffirm their commitment to the following principles in particular:

- since AIDS is a public health problem, the fight against that disease must be based on public health considerations
- in combating AIDS, absolute priority is to be given to prevention through health information and education
- in terms of prevention, any policy of systematic and compulsory screening is ineffective
- any discrimination against or stigmatization of persons affected by AIDS, particularly as regards employment, must be avoided

agree to pay particular attention to the problem of drug abuse in the context of the fight against AIDS

take note of the Commission communication on its activities in this respect and request it to include those working to combat AIDS in the exchange programmes for research workers, teachers, etc.

welcome the work carried out by the ad hoc Working Party on AIDS with the co-operation of the Commission, and instruct it to continue its work, with the Commission's co-operation, in accordance with their mandate of 15 May 1987 as supplemented on 31 May 1988."

They also decided to set up a system for the regular, rapid exchange of epidemiological data at Community level and a procedure for a regular, intensive exchange of information and experience on the measures adopted at national level.

The texts relating to these two procedures are given in Annexes I and II.

THE FIGHT AGAINST CANCER

The Council and the Ministers also discussed in detail the fight against cancer in the Community and agreed on the following essential points:

"The Council and the Ministers for Health

1. confirm the high priority they attach to the fight against cancer;
2. take note of the progress achieved in the implementation of the "Europe against cancer" programme;
3. underline their great and abiding interest in this programme, while emphasizing that the various measures planned by the Commission can only be assessed on the basis of specific proposals compatible with the respective competences of the Community and the Member States;
4. consider anti-smoking measures to be a central element in the fight against cancer in the Community which should involve, among other things:
 - (a) protecting non-smokers, especially in public places
 - (b) encouraging the habit of not smoking (for example, by encouraging private initiatives).

- (c) protecting young people under 16 years of age by means of appropriate measures
- (d) restricting advertising
- (5) stress the importance of the training - including the vocational training - of health personnel; training should be facilitated by exchanges of such staff between Member States, in particular through the award of grants, and by comparing experience acquired in the training programmes
- (6) express the view that prevention and screening should be supplemented with an improvement in therapy and counselling aimed at helping patients to cope with their illness
- (7) point out that the establishment of cancer registers in the Member States and the Community constitutes an essential tool for research into cancer, and agree to examine this problem in more depth having regard to the protection of epidemiological data
- (8) stress the importance of the work on chemical carcinogens being carried out in other contexts (internal market, social policy, research)
- (9) give an undertaking, for European Information on Cancer Year (1989), to continue and increase the mobilization of all health and teaching personnel, who have a key role to play in this area
- (10) recommend that a European week of public awareness of the fight against cancer be repeated periodically
- (11) emphasize that an effective fight against cancer requires the close co-operation of all concerned, i.e. in particular, the Member States, public and private associations and bodies, cancer experts and the Commission. At Community level, this means among other things that the Commission will have to arrange for an ongoing process of dialogue and information."

TOXICOLOGY

The Council and the Ministers for Health gave the guidelines set out in Annex III for the continuation of the Community programme in this sphere.

ANNEX I

THE RAPID AND PERIODIC
EXCHANGE OF EPIDEMIOLOGICAL DATA ON AIDS
AT COMMUNITY LEVEL

THE COUNCIL OF THE EUROPEAN COMMUNITIES AND THE REPRESENTATIVES OF
THE GOVERNMENTS OF THE MEMBER STATES, MEETING WITHIN THE COUNCIL,

Agree to set up a system for the rapid and periodic exchange of
epidemiological data on AIDS at Community level;

Agree that this exchange will take place on a quarterly basis through
the medium of the Institute for African and Tropical Medicine and
Epidemiology (a WHO collaborating centre) in Paris on the basis of
the activities already undertaken by the latter and that it will
cover the points set out in the Annex;

Ask the Commission to continue and, if necessary, strengthen its
co-operation to this end with the Paris Institute in the framework
of the funds available under its research and health budget;

Instruct the ad hoc Working Party on AIDS, with the participation of
the Commission, and together with the Institute, to adapt and update,
if need be, the above procedures and to report back to them.

Aspects to be covered in the collection and dissemination of data concerning established cases of AIDS

- Number of cases per year, according to the date of diagnosis
- number of deaths (annual assessment)
- survival time
- doubling time for cases
- distribution of cases by:
 - = sex
 - = age group (*)
 - = risk group
- spread among heterosexuals
- spread among intravenous drug users
- prognoses

The trend of cases of HIV infection will be the subject of scientific studies as part of the Community programme for the co-ordination of research into AIDS.

(*) in the case of the 20 to 29 age group, further broken down, if possible, into age groups 20 to 24 and 25 to 29.

THE REGULAR EXCHANGE OF INFORMATION
AT COMMUNITY LEVEL ON NATIONAL MEASURES FOR
THE FIGHT AGAINST AIDS

THE COUNCIL OF THE EUROPEAN COMMUNITIES AND THE REPRESENTATIVES OF
THE GOVERNMENTS OF THE MEMBER STATES, MEETING WITHIN THE COUNCIL,

Agree to set up at Community level a regular exchange of information
on the actions, measures and initiatives envisaged and adopted in
the Member States in the fight against AIDS;

Agree that the aim of this exchange will be to help Member States
in their fight against AIDS, to contribute towards safeguarding the
free movement of persons within the Community, to prevent contradictory
national policies from being developed in regard to third-country
nationals and to facilitate the establishment and implementation of a
common strategy for the fight against AIDS, in accordance with the
conclusions of the Council and the Ministers for Health of 15 May 1987;

Instruct the ad hoc Working Party on AIDS, with the participation of
the Commission, to implement this exchange within itself by means of
wide-ranging and detailed mutual information on national political,
administrative, legal and technical actions and measures, and on
scientific initiatives not covered by the Community research
co-ordination programme;

The Working Party will take the questionnaire it has prepared, which will be adapted and updated as required, as the basis for this exchange. It will take account of the World Health Organization's activities in this field.

Instruct the Working Party to supplement the exchange of information, with the participation of the Commission by an exchange of experience on the approaches, projects and programmes undertaken in the Member States which, allowing for national characteristics, could serve as a model in the areas for which an initial list is given in the Annex;

Instruct the Working Party to:

- propose, if appropriate, on the basis of the aforementioned exchange of information and experience, co-ordinated or concerted measures for the fight against AIDS;

- submit regular reports on its proceedings to the Council.

Initial list of areas
for the exchange of experience
by the ad hoc Working Party on AIDS

1. Greater effective prevention of AIDS
2. Improvement in the advice and care given in sero-positive people and to AIDS sufferers, including children and new-born babies
3. Efforts undertaken to prevent discrimination against and the stigmatization of AIDS sufferers, sero-positive persons and others affected by AIDS
4. Improving the competence of people engaged on a professional and voluntary basis in the fight against AIDS
5. Promotion of activities to enable AIDS sufferers and sero-positive persons to help themselves, and better integration of such activities into the health authorities' policies
6. Suitable approaches towards persons in high-risk groups who are hard to reach (prostitutes, homosexuals, intravenous drug users).

TOXICOLOGY

THE COUNCIL AND THE REPRESENTATIVES OF THE GOVERNMENTS OF THE MEMBER STATES MEETING WITHIN THE COUNCIL,

1. take note of the activities undertaken so far under the programme
2. record their interest in the activities in progress and planned by the Commission, to be carried out in close co-operation with the Member States and international bodies and to be closely co-ordinated with work under Community research programmes
3. support in particular the following activities:
 - collaborative studies in immunotoxicology
 - assessment of nephrotoxic health effects
 - validation of in-vitro testing programmes
 - the establishment of methodological guidelines for the assessment of reproductive effects
4. call on the Commission to step up its efforts to avoid duplication of work at Community and national level in assessing toxic substances and also, to that end, to increase co-operation with international bodies
5. call on the Commission also to consider in close co-operation with the Member States,
 - the problem of extrapolating data obtained on animals to man and the quantitative evaluation of carcinogenic risks for man
 - the question of establishing a data base concerning the normal variability of biochemical and physiological parameters in the older population more exposed, among other things because of their age, to chemical toxic risks
6. call on the Commission to provide the necessary organizational means for these activities, particularly for co-operation with the Member States.