

COUNCIL OF THE EUROPEAN COMMUNITIES
GENERAL SECRETARIAT

PRESS RELEASE

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**1453rd meeting of the Council
and the Ministers for Health,
meeting within the Council**

Brussels, 3 December 1990

President: Mr Franco DE LORENZO

**Minister for Health
of the Italian Republic**

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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
Mr Robert DELIZEE	State Secretary for Health and Policy on the Disabled, attached to the Minister for Social Affairs

Denmark:

Mr Joergen VARDER	State Secretary for Health
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Germany:

Mr Jochen GRÜNHAGE	Deputy Permanent Representative
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Greece:

Ms Marietta YIANNAKOU-KOUTSIKOU	Minister for Health
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Spain:

Mr Julian GARCIA VARGAS	Minister for Health and Consumer Affairs
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France:

Mr Bruno DURIEUX	Minister for Health
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Ireland:

Mr Rory O'HANLON	Minister for Health
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Italy:

Mr Franco DE LORENZO	Minister for Health
Ms Maria Pia GARAVAGLIA	State Secretary for Health

Luxembourg:

Mr Johny LAHURE	Minister for Health
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Netherlands:

Mr H. J. SIMONS

State Secretary for Welfare, Health
and Cultural Affairs

Portugal:

Mr Arlindo DE CARVALHO

Minister for Health

United Kingdom:

The Baroness HOOPER

Parliamentary Under-Secretary of State,
Department of Health

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Commission:

Ms Vasso PAPANDEOU

Member

HEALTH IN THE COMMUNITY CONTEXT

The Ministers held an exchange of views on their participation in decisions at Community level relating to sectors of public health. At the end of this discussion, the President read the following statement by the Presidency:

Statement by the Presidency

"The President of the Council of Health Ministers of the European Communities, on the basis of the broad consensus which emerged during the discussion among the Health Ministers of the European Communities gathered in Brussels on 3 December 1990, in the perspective of the Intergovernmental Conference which opens on 15 December 1990 in Rome;

GIVEN the importance of public health issues in the European Community;

HAVING NOTED that many Community measures concerning sectors connected to public health protection (such as those concerning the safe use of drugs and other medical devices, the safety of foods of animal and vegetable origin, water quality, biomedical research programmes, as well as the prevention of risks due to the production, use or even the occurrence of chemical, physical and biological agents) are often adopted without any participation or contribution of the Council of Health Ministers,

CONSIDERS consequently as desirable and urgent the adoption of measures which make possible:

- (a) a greater and more systematic engagement of the Ministers of Health of the European Community in the development of the measures produced by the Community in the public health sector;

(b) a clearer definition of the competences in the field of public health in the Community, in order to:

- facilitate co-operation among Member States notably to prevent and to fight the major threats to public health;
- improve preparation and discussion of texts susceptible to influence public health."

NUTRITION AND HEALTH

The Council and the Representatives of the Governments of the Member States meeting within the Council adopted a Resolution concerning an action programme on nutrition and health in which, in particular, they:

"INVITE the Commission to submit to the Council a proposal for an action programme, together with the budget proposals necessary under the usual procedures, which provides in particular that 1994 will be "European Nutrition Year". When drafting this programme, the Commission is invited to use as a basis the aims and guidelines set out in the Annex.

INVITE the competent authorities in the Member States to take appropriate measures, on the basis of any decisions taken by the Council, to carry out the programme, and to set up the necessary co-ordination arrangements.

RECOMMEND that Community activities in this sector be conducted while taking into account the activities of the WHO and FAO and, as far as possible, in co-operation with them.

INVITE the Commission to call meetings of senior officials appointed by the competent national authorities on a regular basis at least every two years from

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1992 onwards to evaluate progress in the programmes on nutritional education and consumer information.

ASK the Commission to keep the Council regularly informed of progress and to submit a final report to the Council on the work done."

The objectives and guidelines defined in the Annex are to provide information and foster awareness among the general public, certain select groups of people at risk, persons and bodies involved in sectors dealing with food and nutrition, as well as the study, analysis and exchange of experience on the part played by nutritional aspects in health.

The planned measures comprise, in addition to European Nutrition Year, general measures to heighten awareness, pilot projects and research and studies. It is also planned to step up and diversify the work of the Scientific Committee for Food.

SAFETY OF FOOD AND DRINK AND WATER INTENDED FOR HUMAN CONSUMPTION

The Council and the Ministers adopted the following conclusions:

"WHEREAS, with the single market in prospect, the regulatory innovations so far introduced into Community rules under the Single European Act must be developed further to ensure the reasonable protection of public health in a system based on free movement of foodstuffs;

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WHEREAS, whenever Community harmonization is lacking or inadequate, the diversity of national legislation frequently gives rise to difficulties in trade and, at any rate, to an increase in disputes and may have adverse repercussions on public-health protection;

RECOGNIZE that the chief task of the Community in this situation is to take co-ordinated and thorough action to adopt as soon as possible, and at all events by the end of 1992, effective rules, particularly in priority sectors where a high level of health protection has to be attained;

CONSIDER that the implementation of such action must take account of the fact that the protection of public health has long been the basic aim of Community foodstuffs and water regulations and is not merely a question of adopting new rules but also of co-ordinating, updating and amplifying existing ones and guaranteeing, through effective, uniform application, that they are actually complied with;

RECOGNIZE that the Commission must play an important role in the success of such action and that the Commission needs to take the necessary steps to bring unity to the differing approaches within the Commission itself, with precedence being given to the aim of protecting public health;

EMPHASIZE that, in order to ensure more effective health protection, uniform legislative principles and approaches should be adopted for the foodstuffs, agricultural and veterinary sectors as well as for the environment and the safety of water intended for human consumption;

EMPHASIZE the need for the involvement of the Council and of the Ministers for Health, inter alia with adequate information, enabling a contribution to be

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made in particular, by formulating general health objectives and criteria, to decisions in the foodstuffs and water sector on matters involving the protection of public health."

USE OF DRUGS IN SPORT

The Council and the Ministers adopted a Resolution on Community action to combat the use of drugs, including the abuse of medicinal products, particularly in sport.

Starting from the principle that an educational and preventive approach should prevail and extend to cover all persons taking part in sporting activities, in particular young people and the circles in which they move; and in collaboration with the Council of Europe and particularly given the prospect of the 1992 Olympic Games, they invite the Commission, assisted by a Group of Experts appointed by the Member States:

- to draft and circulate, in close conjunction with the Member States, by the end of 1991, with a view to the Olympic Games in 1992, a Code of Conduct to combat the use of drugs in sport. The Code should constitute an important instrument of information and education against the use of drugs in sport. Denouncing the use of drugs in sport as contravening the rules of health protection and in any case as constituting unsporting behaviour, it should be submitted for joint discussion by medical and sporting circles operating in the Community;
- to propose to the Council measures of Community interest taking into account the measures already initiated by government sporting authorities, the Council of Europe and international sporting organizations. Such measures could comprise in particular:
 - (a) stepping-up training information and health education initiatives against the use of drugs in sport;

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- (b) Study of most common current drug-use practices;
- (c) Drug-testing methods and co-operation between laboratories;
- (d) Research on effects of drug-taking on health within the Community biomedical research framework programme.

DRUGS - reducing the demand for narcotic and psychotropic substances

The Council and the Ministers adopted the following conclusions:

"HAVING REGARD to the interim report and the guidelines for a European plan to combat drugs approved by the European Council in Dublin on 25 and 26 June 1990;

HAVING NOTED the task which the European Committee for the fight against drugs (CELAD) assigned to the ad hoc Working Party on Drug Abuse, namely to examine the aspects relating to drug demand reduction contained in the preliminary draft European plan to combat drugs, drawn up by the current Presidency of CELAD, and to prepare a document on the subject;

IN THE LIGHT OF the thorough work carried out by the ad hoc Working Party on Drug Abuse in preparing that document;

HAVING NOTED that at its meeting on 19 and 20 November 1990 CELAD used the findings of that work in its European plan to combat drugs, to be submitted by CELAD to the Rome European Council on 14 and 15 December 1990;

HAVING EXAMINED, furthermore, the report drawn up by the Commission in conjunction with the Member States on demand reduction policies in the Member States, requested of the Commission by the European Council in Dublin on 25 and 26 June 1990;

EXPRESS their appreciation of the work carried out by the ad hoc Working Party and the Commission;

SUGGEST that the European Council, at its meeting on 14 and 15 December 1990, approves the paragraph on demand reduction in the European plan to combat drugs proposed by CELAD, in view of the important health-related objectives which it contains and which the Council supports;

TAKE NOTE of the conclusions of the report on demand reduction policies, which the Commission forwarded to the Council;

IDENTIFY, amongst social and health measures, the following as the most urgent of the measures defined by CELAD in the European plan to combat drugs and as being in keeping with the needs emphasized by the Commission in its report on demand reduction policies in the Member States:

1. The intensification of prevention measures in each Member State, aimed at the general population and high-risk groups;
2. The intensification of measures in the Member States, to extend the range of effective methods for treating drug addiction by:

- (a) developing services providing the main therapeutic options, where appropriate in an integrated fashion, with special emphasis on those groups among which the continued use of drugs entails serious subsequent risks to their health;
 - (b) analysing, updating and applying the various methods of treatment assessment;
3. The intensification in the Member States of intervention of proven efficacy in obtaining and maintaining the social and occupational integration of addicts;
4. The intensification in the Member States of those activities and in-service training of qualified staff in the prevention, treatment and social integration sectors;

INVITE THE COMMISSION:

- (a) to promote the Community-wide exchange of information, concerning in particular information and educational material on prevention, approaches to treatment and measures taken on social and occupational integration;
- (b) to promote the exchange of information on the methods used to evaluate the efficacy of the different measures taken and, in close co-operation with the Member States, to explore the possibility of improving methods of evaluation, enabling the Member States to use compatible and comparable evaluation methods;
- (c) to draw up regular reports, in collaboration with the Member States, on demand reduction policies, in particular, with a view to assessing the implementation and efficacy of the measures taken by the Member States;
- (d) to carry out a feasibility study on the organization within the Community of regular training and update courses for qualified staff on themes which,

because of their novelty and/or special nature, have not yet been sufficiently developed and studied;

INVITE finally the ad hoc Working Party on Drug Abuse to act on any requests from CELAD to examine the social and health aspects of studies concerning a Drugs Monitoring Centre and to report to the Council."

AIDS

The Council and the Ministers for Health adopted the following conclusions:

"HAVING CONSIDERED the epidemiological development and the medical and social consequences of the spread of HIV infection in Europe;

HAVING CONSIDERED in particular the growing link between drug addiction, infection from (Human Immunodeficiency Virus) HIV and the development of HIV-related diseases in many of the European countries;

HAVING REGARD to the conclusions of the Council and the Ministers for Health, meeting within the Council, on 16 May 1989 regarding the prevention of AIDS in parenteral drug users, in particular the section on pregnant women drug users, and to the increase in the number of children born sero-positive;

HAVING REGARD to the intermediate report and the guidelines for a European plan to combat drugs approved by the European Council in Dublin on 25 and 26 June 1990 and to the draft European plan to combat drugs to be submitted by the European Committee for the fight against drugs (CELAD) to the next European Council on 14 and 15 December 1990, and in particular the paragraph on drug addiction and AIDS.

INVITE THE MEMBER STATES:

1. to promote, in drug addiction services and reception centres, access to early intervention and, where appropriate to treatment for sero-positive drug addicts and for those with clinical signs of HIV infection;
2. to foster within these structures, respecting confidentiality, a psychological and social climate which is sensitive to the needs of the individuals concerned;

INVITE THE COMMISSION:

1. to step up exchanges of information, experience and experts:
 - (a) on medical and social assistance to sero-positive pregnant women and newborn babies;
 - (b) on the organization of home care for people suffering from HIV/AIDS and other forms of health care for HIV-infected persons;
 - (c) for assessing the measures implemented in the Member States to supply safer injecting materials, including new types of disposable syringes and needles;
2. to inform the Council of the results of the exchange of experience referred to in point 1 and to submit an appropriate assessment and, if necessary, proposals for action;

IN ADDITION, REPEAT the call made to the Member States in the conclusions of the Council and the Ministers for Health, meeting within the Council, on 17 May 1990

to continue with active policies to avoid any discrimination against sero-positive persons and people suffering from HIV/AIDS and to encourage the social acceptance of such persons;

FINALLY INVITE the Member States to extend the commitment to non-discrimination and social acceptance to those living with sero-positive persons and people suffering from HIV/AIDS or to those who have contact with such persons."

ACUTE HUMAN POISONING

On the basis of the draft submitted by the Commission, and after receipt of Parliament's Opinion, the Council and the Ministers adopted a Resolution on improving the prevention and treatment of acute human poisoning.

This Resolution makes provision for collecting comparable, valid clinical toxicology data, essentially from poison centres, and for harmonizing the way in which such data are collected; in order to do so, it provides for case data to be recorded on a harmonized record sheet and for annual reports to be drawn up on a common layout. The Member States are to designate a competent authority which must, inter alia, produce a summary of the harmonized annual reports from the poison centres every year to be forwarded to the Commission.

Provision is also made for summaries in order to improve the availability of antidotes, an indicative list of which has been drawn up, and to increase the practical scope for using these antidotes.

For its part, the Commission will have to prepare regular summary reports indicating, in particular, the measures to be taken on a Community scale for the prevention of acute poisoning and to expand on the specific topics based on the information received from the Member States.

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Finally, provision is made to review this Decision within five years and for the technical annexes to be reviewed by the Commission within two years (data record sheet, layout of annual reports, indicative list of antidotes) and to be updated regularly thereafter.

The Commission will be assisted in this task by experts appointed by the Member States.

TOBACCO ADVERTISING

The Council examined the amended Commission proposal and the Presidency compromise proposal on the advertising of tobacco products in the press and by means of bills and posters.

Following these discussions, the President noted that:

- there was a unanimous wish to contribute to the reduction of tobacco consumption which was detrimental to health;
- there was no qualified majority in favour of either the Commission proposal or the compromise suggestion put forward by the Presidency.

The Commission said that it would reconsider this issue in the light of delegations' comments and that, in view of the objections levelled at partial harmonization, it would present a proposal for full harmonization.

COMMISSION COMMUNICATIONS

The Council took note of three communications from the Commission concerning:

- the setting up of a high-level Committee on health protection
- the state of co-operation between the Commission and the World Health Organization
- the progress of work by the Commission on biomedical research.

EUROPEAN LICENCING SYSTEM FOR MEDICINAL PRODUCTS

The Council held an exchange of views on the outlook for the future European licencing system for medicinal products on the basis of a communication from the Presidency.

In its communication, the Presidency welcomed the recent Commission proposal for such a system, while emphasizing the desirability of gradual development from current national systems and the need to ensure the highest technical qualifications for its work, with Member States being adequately involved in the decision-making process throughout.

MISCELLANEOUS DECISIONS RELATING TO HEALTH

Cardio-vascular disease in the Community

The Council and the Ministers adopted the following conclusions:

CONCLUSIONS

of the Council and of the Ministers for Health of the Member States,
meeting within the Council

on cardio-vascular disease
in the Community

THE COUNCIL OF THE EUROPEAN COMMUNITIES AND THE MINISTERS FOR HEALTH OF THE
MEMBER STATES, MEETING WITHIN THE COUNCIL,

1. note that cardio-vascular disease is one of the main causes of death in all the Member States of the Community, particularly in the working population;
2. consider that a number of preventive measures have already been put in hand for cancer and that these measures have an effect in preventing cardio-vascular disease;
3. consider that further measures should be identified and implemented;
4. call upon the Commission to investigate the best way of facilitating exchange of information and co-operation on national measures, including in the field of research and means of diagnosis, obtaining to that end the assistance of experts and of representatives appointed by the Member States and to report on the outcome of that investigation.

In carrying out this work the Commission should, in order to avoid duplication, take account of the work of other bodies in this area, particularly the WHO.

Bruxelles, le 3 décembre 1990

NOTE BIO(90)381 AUX BUREAUX NATIONAUX
CC. AUX MEMBRES DU SERVICE DU PORTE-PAROLE

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PREPARATION DU CONSEIL SANTE DU 3 DECEMBRE 1990

La proposition de directive en matière de publicité autorisée par voie de presse et d'affiches en faveur des produits de tabac sera le principal sujet de la réunion des Ministres de la Santé le 3 décembre 1990 à Bruxelles.

La proposition de la Commission (voir P-86) vise à éliminer les entraves aux échanges dues aux disparités des dispositions nationales en matière de publicité. Elle prévoit, pour tous les produits du tabac :

- une limitation de la publicité en restreignant le message publicitaire à la seule présentation de l'emballage du produit du tabac et l'inclusion de certains avertissements sur l'encart publicitaire;
- l'interdiction de la publicité indirecte;
- l'interdiction de la publicité destinée principalement aux jeunes.

Les Etats membres auraient la possibilité d'interdire totalement la publicité en faveur des produits de tabac. La Commission propose donc une harmonisation totale de la publicité autorisée, ce qui implique que les Etats membres ne pourraient pas prendre des dispositions plus sévères à l'égard de la publicité sauf l'interdiction totale. La proposition se base sur l'article 100A (majorité qualifiée). Madame PAPANDREOU a annoncé au Parlement européen l'intention de la Commission de proposer, en fonction de l'évolution qui se dessinera, l'interdiction totale de la publicité à partir du 31.12.1992.

Trois délégations (D, NL, DK) contestent l'existence d'entraves aux échanges des produits de tabac et considèrent que l'objectif de la protection de la santé pourrait être atteint par des accords volontaires. La Présidence, d'autre part, a présenté un compromis qui se limite à prévoir en ce qui concerne les messages publicitaires une liste de principes, permet aux Etats membres d'introduire d'exigences plus sévères, contient une clause de réexamen pour la fin 1992 et prévoit la possibilité de mettre en oeuvre la directive par des accords volontaires.

Autres points de l'ordre du jour :

- Lutte contre le dopage : Un projet de résolution considère nécessaire des actions vigoureuses contre le dopage et invite la Commission à élaborer avant la fin 1991 et en vue des Jeux Olympiques de 1992 à Barcelone un code de conduite anti-dopage et à proposer des actions d'intérêt communautaire.
- Prévention et traitement des intoxications aiguës chez l'homme : le projet de résolution préparée, entre autre, invite les Etats membres à entreprendre une série d'actions (recueil des données, disponibilité des antidotes, services d'urgence, etc.) et la Commission à établir des rapports périodiques et à développer des thèmes sur la prévention.

- Programme d'action sur la nutrition et la santé : Suite aux discussions qui ont eu lieu au Conseil informel de Naples le 20 juillet 1990 la Présidence a élaboré un projet de résolution qui invite la Commission à présenter un programme d'action en la matière. L'année 1994 pourrait être proclamée "Année européenne de la nutrition". Le Conseil pourrait enfin adopter des conclusions en matière de drogue, de SIDA et de salubrité des aliments et des boissons.

Amitiés,

C. Stathopoulos

Bruxelles, le 3 décembre 1990

NOTE BIO(90)381 (suite 1 et fin) AUX BUREAUX NATIONAUX
CC. AUX MEMBRES DU SERVICE DU PORTE-PAROLE

CONSEIL SANTE DU 3 DECEMBRE 1990

Pas d'accord sur la proposition de directive pour la publicité par voie de presse et d'affiches en faveur de produits de tabac. A l'issue de longues discussions qui se sont poursuivies aussi pendant le déjeuner la Présidence a constaté qu'il n'y avait pas la majorité qualifiée nécessaire pour l'adoption de la proposition. Madame PAPANDROEU a regretté l'incapacité du Conseil de statuer sur la proposition de la Commission et a annoncé qu'elle proposera une harmonisation totale de la publicité en faveur des produits de tabac. Ceci signifie en d'autres termes, que Madame Papandreou saisira bientôt la Commission d'une proposition de directive interdisant totalement la publicité pour ces produits. Une telle interdiction a déjà été adoptée par le Conseil Marché Intérieur pour la publicité par voie de télévision en faveur des produits de tabac. Lors de la discussion qui a eu lieu sur ce point, les trois délégations qui s'opposaient à la proposition actuelle ont confirmé leurs positions. Deux d'entre elles (UK, DE) plaident en faveur d'accords volontaires, trois délégations (UK, DE et NL) considérant que la base juridique choisie (Art. 100A, majorité qualifiée) n'était pas justifiée, vu que certains Etats membres pouvaient maintenir (et d'autres envisager) une interdiction totale. Donc l'harmonisation envisagée n'était pas totale.

Les Ministres ont examiné lors de leur réunion dans la matinée les autres points de l'ordre du jour. Un accord s'est dégagé sur tous les sujets traités. Ainsi le Conseil a adopté :

- la résolution relative à une action communautaire de lutte contre le dopage. La Commission élaborera avant la fin de 1991, en vue des Jeux Olympiques de 1992, un code de conduite anti-dopage;
- la résolution concernant une action communautaire sur la nutrition et la santé. L'année 1994 sera proclamée "Année européenne de la nutrition";
- la résolution relative à l'amélioration de la prévention et du traitement des intoxications aiguës chez l'homme;
- des conclusions relatives à la salubrité des aliments, des boissons et des eaux destinées à la consommation humaine;
- des conclusions concernant la réduction de la demande de stupéfiants et de psychotropes;
- des conclusions concernant la lutte contre le SIDA.

Enfin les Ministres ont eu, en vue de la prochaine Conférence Intergouvernementale, un débat sur le rôle de la santé dans les futurs traités. Un accord s'est dégagé sur la nécessité de créer des bases juridiques valables pour d'éventuelles actions communautaires, en particulier dans le domaine de la prévention de certaines maladies (cardiovasculaires, SIDA, etc.). Le Président en exercice, M. DI LORENZO, Ministre Italien de la santé, fera rapport au Président du Conseil européen sur les délibérations du Conseil Santé.

Améliés,

C. Stathopoulos

