



Health & Consumer Voice

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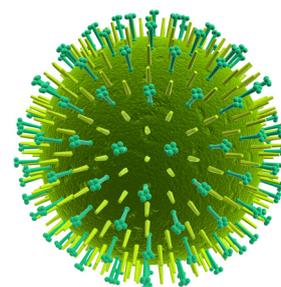
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EU steps up action on A(H1N1) flu

The Commission is leading EU Member States' coordination efforts to exchange information on surveillance, case definition and measures taken by EU countries to respond to this A(H1N1) flu virus. The situation is changing rapidly and the European Centre for Disease Prevention and Control is monitoring the situations on a continuous basis.



Following human cases of the A(H1N1) flu virus notified to WHO by a number of countries, European Commission's Directorate-General for Health and Consumers is leading the EU coordination under the framework of the Communicable disease decision 2119/98 through the Community Early Warning and Response System (EWRS), under which EU Member States are required to notify measures they intend to take as well as any confirmed cases.

Health Commissioner Androulla Vassiliou called for an extraordinary Health Ministers' meeting which took place in Luxembourg on 30 April. The meeting discussed further common approaches to tackling the A(H1N1) flu virus, including countermeasures such as anti-virals and vaccines. The Commission holds frequent audio meetings with the EU's Health Security Committee and national contact points of the Early Warning Rapid Alert System (EWRS) with the aim of adopting a common guidance document on managing the virus. This includes e.g. information on the case definition, advice to travellers and management of cases.

The Commission raised its level of alert to red on 27 April by launching its Health Emergency Operating Facility (HEOF). WHO declared level 5 on 29 April. Daily information exchange with the MS contact points continues. In addition, there are regular audio meetings with the members of the Global Health Security Initiative (G7 countries, Mexico, WHO and European Commission). Commissioner Vassiliou briefed EU foreign ministers on 26 April and discussed a common EU approach at the extraordinary Health Council.

Commissioner Vassiliou met on 29 April with pharmaceutical industry representatives, in particular with the European Vaccine Manufacturers, to address key questions on vaccines and antivirals against the A(H1N1) flu virus. The European Commission will continue to work with the industry, which is committed to contributing to the efforts in the face of the virus.

Regular updates on the situation can be found on:

http://ec.europa.eu/health/ph_threats/com/influenza/novelflu_en.htm

and

<http://ecdc.europa.eu/>



In brief



European Parliament likely to build a "Europe for Patients"

On 23 April the European Parliament voted on three important health policy initiatives: patients' rights in cross border healthcare, improving patient safety and EU strategy on rare diseases. These actions mark an important step forward in providing patients with better opportunities and access to healthcare in Europe.

The European Parliament also highlighted in all three health votes the need for enhanced cooperation between all EU Member States, in order to pool knowledge and expertise to maximise health benefits for all.

- Patients Rights in Cross Border Healthcare:

The European Parliament confirmed the need for a legislative framework which clarifies the rights and conditions under which patients seek, and are reimbursed, for healthcare in another Member State. Many of the amendments sought to strengthen patients' rights through greater emphasis on providing public information on the quality and safety of healthcare.

- Patient safety and the prevention and control of healthcare associated infections:

The recommendation to improve patient safety in Europe and reduce healthcare associated infections was adopted by the Commission on 15 December 2008. The Commission's proposal aims to help EU Member States in one of the biggest challenges that the EU health systems are facing – unintended harm to patients while receiving healthcare. It is indeed estimated that 8%-12% of patients admitted to hospitals suffer from such harm.

- European action on rare diseases:

The Communication and Recommendation on rare diseases, adopted by the Commission on 11 November 2008, serves as a prime example of where working at EU level adds value. It aims to improve the recognition of rare diseases and pool expertise, experience and research to maximise the effective use of resources to the benefit of all rare disease patients.

For further information, please view:

http://ec.europa.eu/health-eu/europe_for_patients/index_en.htm

RAPEX: rise in the number of dangerous products in 2008

Commissioner Meglena Kuneva had launched the 2008 RAPEX Annual Report at a media event in Brussels on 20 April. The Annual Report, which is published in English, French, German and Chinese, provides information on the number, origin and type of dangerous products notified through the RAPEX system and highlights how inspections and enforcement actions carried out by Member States are becoming increasingly effective. Annual RAPEX Report 2008 shows rise in number of dangerous products being detected.

The total number of notifications distributed through the RAPEX system has risen gradually since 2004 (when the General Product Safety Directive was transposed into the national laws by Member States). In this fifth year, the number of notifications has quadrupled from 468 (in 2004) to 1866 (in 2008). In 2008, the number of notifications rose by 16% compared to 2007. The growth in RAPEX notifications, also due to the increased capacity of the system, is a result of more effective product safety enforcement by national authorities, greater investment of resources, greater awareness amongst businesses of their obligations, enhanced cooperation with third countries and network-building actions across the Member States coordinated by the European Commission.

All EU countries participated in the RAPEX system by detecting and notifying new dangerous products and ensuring appropriate follow-up actions to the information received. Twelve countries further increased their activities in the system and notified more dangerous products than in 2007. The countries making most notifications were Germany (205 notifications), Spain (163 notifications), Slovakia (140 notifications), Greece



(132 notifications) and Hungary (129 notifications). Notifications sent by these countries represent 50% of all notifications on products posing a serious risk sent via the system.

Toys (498 notifications), electrical appliances (169 notifications) and motor vehicles (160 notifications) alone accounted for 53% of all notifications on products posing a serious risk in 2008. These results are in line with the RAPEX results from 2007. Textile products including clothing (with 140 notifications) became in 2008 the fourth most frequently notified - via RAPEX - category of product.

In total, 909 notifications on products posing a serious risk sent through the RAPEX system in 2008 concerned products manufactured in China. The number of products of Chinese origin notified via RAPEX increased in 2008 to 59% from 52% in 2007. The growing tendency should be seen in the context of a number of factors, such as: increasing imports of goods to the EU from China, focus of enforcement actions taken at the national level on products of Chinese origin, more effective cooperation between the EU and China.

The report also shows that Chinese authorities increasingly adopt restrictive measures on their market, on the basis of the RAPEX information provided through the "RAPEX-CHINA" application (established in September 2006).

For further information, please view:

http://ec.europa.eu/consumers/safety/rapex/index_en.htm

Alternatives to animal testing

Global efforts to promote alternatives to testing on animals received a significant boost through the signing of a cooperation agreement by international bodies, including the European Commission's Joint Research Centre (JRC), tasked with the validation of alternative test methods.

A cooperation agreement that should give new impetus to the worldwide availability of scientifically proven alternatives to animal test methods has been signed by the European Centre for the Validation of Alternative Methods (ECVAM), which is part of the Commission's Joint Research Centre, together with its equivalent in the US and in Japan and Canada's Environmental Health Science and Research Bureau.

The agreement establishes enhanced international cooperation and coordination on the scientific

validation and evaluation of in-vitro toxicity testing methods. Strengthened collaboration among the signatories will ensure that alternative methods are reproducible, based on sound science and able to accurately identify health hazards. This, in turn, should facilitate test methods that are widely accepted by regulatory bodies in the EU, Japan, the US, Canada and internationally by the OECD.

It is expected that, as a result of the agreement, testing methods that undergo scientific validation will be more credible and more rapidly applied by the testing community. The organisations will also work together to develop harmonised recommendations on regulatory issues and develop peer-review processing mechanisms.

For further information, please visit

<http://ecvam.jrc.it/>

EU bans dimethylfumarate (DMF) in several consumer products

On 1 May a European Commission Decision came into force to ensure that no consumer product containing the strongly sensitising DMF is placed on the market in the EU. The biocide dimethylfumarate (DMF) has caused severe allergic reactions because of its use in imported products such as sofas, shoes and soft toys.

Dimethylfumarate (DMF) is used by producers as a biocide to kill moulds that may cause damages to products such as furniture or shoes during storage or transportation in a humid climate. Placed in "desiccant" sachets inside the furniture or footwear boxes, DMF evaporates and impregnates the product, protecting it from moulds. However, it has been found to seriously affect consumers who were in contact with the products, causing painful dermatitis.

DMF is not legally available for use in the manufacture of goods in the EU, since biocidal products containing DMF are not authorised under the Biocides Directive (98/8/EC). However, manufacturers outside the EU may use these unauthorised biocides and then export their products to the EU.

The new Decision adopted will cover all Member States and will ensure a ban of DMF in all consumer products (maximum limit value: 0.1 mg/kg) across the EU. The Decision therefore protects EU consumers from the risk of DMF in imported products in the same way as they are protected at home.

For further information, please view:

<http://europa.eu/rapid/pressReleasesAction.do?reference=IP/09/676&format=HTML&aged=0&language=EN>

In brief



Airlines move to clean up ticket selling websites

New EU results published on 14 May show a consistent step change in airline ticket selling websites across Europe in terms of compliance with consumer protection rules. The findings feature in a final report on an 18 month EU-wide process to crackdown on misleading advertising and unfair practices. As a result of an EU enforcement investigation started in September 2007 – with 15 EU national authorities and Norway - 115 airline websites out of the 137 websites investigated have been corrected.

Following an additional "health check" process, involving independent mystery shopping in March 2009 on 67 major airlines, 52 airlines have either demonstrated to maintain the same standards or immediately responded to the Commission's consultation with undertakings to remedy outstanding issues.

This "health check" process checked websites against a comprehensive 14 point checklist, which was previously agreed with the airline industry. The Commission is now working to put in place an industry wide agreement to provide a level playing field for airlines across the EU and to maintain sites to a high standard.

What will happen next?

- The results of such process have been passed to national enforcement authorities, to be followed up where necessary.
- The Commission is working with the airline industry to put in place an industry wide agreement to uphold standards, including independent third party monitoring.
- The Commission will bring forward in June 2009, a Communication on enforcement, to strengthen the work of the network of national enforcement authorities (CPC network) after its first two years of operation.

For further information, please view:

http://ec.europa.eu/consumers/enforcement/sweep/index_en.htm



European Child Safety Cards 2009

Commissioner for Health Vassiliou and Commissioner for Consumer Affairs Kuneva launch European Child Safety Report Cards 2009, recently published by the European Child Safety Alliance for 24 European countries. The report cards score countries on the degree to which they have adopted, implemented and enforced proven child-injury strategies and good practices.

Each year about 10,000 children die in the European Union due to unintentional injuries. That is equivalent to losing an entire school classroom of children, more than 25 students, every day of the year. Yet it has been estimated by researchers that if all strategies known to be effective were uniformly implemented, approximately 90% of these injuries could be prevented.

On 6 May the European Child Safety Alliance published child safety report cards for 24 European countries and a European summary report. The report cards give the participating countries a clear view of performance gaps and actions required to reduce injury-related death and disability among Europe's most vulnerable citizens – children.

The report cards, co-funded by the European Commission's Public Health Programme, score countries on their level of adoption, implementation and enforcement of over 100 proven, effective child injury prevention strategies – good practices known to save children's lives. The good practice policies relate to road traffic accidents, drowning, falls, poisoning, burns, choking and support data infrastructure and professional capacity necessary to combat child injury.

There is great variability between the best performing and poorer performing countries, with injury death rating up to 4 times higher in the countries with the poorest per-



formance. Among the 24 countries participating in these report card assessments, the highest unintentional child injury death rates are found in Latvia, Lithuania and Estonia and the lowest are found in the Netherlands, the United Kingdom, Ireland and Sweden.

As concerns the uptake of the proven good practices, the best child safety performance scores were achieved in Iceland, the Netherlands and Sweden, while the worst performing countries seem to be Greece and Portugal.

These results suggest that the process of developing and implementing child safety action plans does lead to increased attention and commitment to the child injury issue and steps towards uptake of proven good practices.

Arlene McCarthy, European Socialist Party MEP and Chair of the Internal Market and Consumer Protection Committee, also participated to the launch, advocating support for EU policy measures that address child safety priorities and are based on evidenced good practices.

"In this time of economic downturn, it will be critical that safety issues and our children are not compromised", the two Commissioners declared. "In 2009 and beyond it will be a priority to ensure that Member States enhance their commitment to child safety, with allocation of sufficient resources for uptake and enforcement of good safety practices and policies".

For further information, please view:

<http://www.childsafetyeurope.org>

In brief



Call for expression of interest: Stakeholder Dialogue Group

DG Health & Consumers is looking to renew up to 10 of the members of its Stakeholder Dialogue Group. For the purpose, it launched a call for expression of interest on 14 May 2009. Interested applicants should submit a one-page letter explaining why they consider their professional background relevant to the activity of the Stakeholder Dialogue Group and a CV of maximum 2 pages by 16 June 2009 to:

SANCO-stakeholders@ec.europa.eu

You can access the full text of the call at:

http://ec.europa.eu/dgs/health_consumer/index_en.htm

World Veterinary Day and the "One Health" Roadshow

The World Veterinary Day was introduced by the World Veterinary Association in 2000, to celebrate the crucial contribution of veterinarians to society, usually with an accompanying theme. This year the theme has been "Veterinarians and Livestock Farmers: A Winning Partnership".

In Brussels, the European Commission's Directorate-General for Health and Consumers organised an event on Friday 24 April. The Commission's "One Health" roadshow was present to promote the work of EU veterinarians to the general public and to explain how animal health is linked to human health.

The "One Health" roadshow is a customised vehicle which has been travelling around the EU since November 2008.

This initiative was launched in the frame of the 2008 edition of the EU Veterinary Week. The next edition of such event will take place on 28 September to 4 October 2009.

For more information, please visit:

<http://www.one-health.eu>



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