Newsletter on food safety, health and consumer policy
from the European Commission's Health and Consumers DG

Health & Consumer Voice

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Ban of Bisphenol A in baby bottles

A ban prohibiting the manufacture in the European Union of baby bottles containing the potentially hazardous Bisphenol A (BPA) substance enters into force on 1 March.

BPA is an organic molecule that is used in the manufacture of polycarbonate plastics, widely employed to manufacture plastic materials, such as baby bottles.

Small amounts of BPA can be released from plastic containers such as baby bottles into the food they carry if these containers are heated at high temperatures.

According to scientific evidence, infants' ability to eliminate BPA is still building up during their first six months of life. Their exposure to the substance is thus the highest during this period, especially if infant formula administered through such baby bottles is their only source of nutrition.

The ban of the manufacture of baby bottles with BPA was adopted in January (EU Directive (2011/8/EU) and enters into force on 1 March. In addition the ban will be extended on 1 June 2011 to the placing on the market and the import into the EU of baby bottles containing BPA.

In parallel, the industry is voluntarily withdrawing from the market baby bottles containing BPA and replacing them with safer products. This withdrawal is expected to be completed by mid 2011.

Member States now have to communicate to the Commission the national legal measures they take to comply with the provisions of the directive.

John Dalli, Commissioner for Health and Consumer Policy said: "March 1 represents a landmark in our efforts to protect public health in the EU. The ban clearly demonstrates our determination to offer the highest possible level of health protection to our citizens.

Despite the fact that there are uncertainties concerning the harmfulness of the exposure of infants to Bisphenol A, the Commission deemed it both necessary and appropriate to take action. The aim is to further reduce the exposure of the most vulnerable part of our population – i.e. the infants – to the substance thus safeguarding their health".

Further information is available at:

http://europa.eu/rapid/pressReleasesAction.do?reference=IP/ 11/229&format=HTML&aged=0&language=EN&guiLanguage=en

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In brief

EU consumers could save about €13 billion in total in electricity bills

A European Commission study on the EU retail electricity markets shows that EU consumers could save about €13 billion in total in electricity bills if they switched to the cheapest electricity tariff they could find. Individually, consumers could save about €100 if they switched to the cheapest offer.

Mystery shoppers conducting the study have indeed been able to find a less expensive tariff in more than six cases out of ten (62%).

This study is a follow-up to the findings of the 2009 Consumer Markets Scoreboard, which found the retails electricity market to be amongst the worst performing markets for consumers. The study also shows that consumers are not making full use of the savings opportunities that market liberalisation has created, allowing them a choice of electricity suppliers:

- Very few consumers switch electricity suppliers: switching rates are above 10% in only seven EU countries;

- Less than a third of EU consumers (32%) have compared offers from different suppliers;

- 41% of consumers do not know if they can find a cheaper tariff for themselves;

- Less than half of EU consumers (47%) know how much electricity they consume.

As next step, the Commission envisages a series of actions to improve the situation, including the following:

- National regulators will develop guidelines for providing information to consumers more effectively, for making it easier to compare prices and to switch suppliers;

- Jointly with key stakeholders, the Commission will identify best practices in alternative dispute resolution in the energy sector;

- The Commission will promote better energy bills and complaint handling via the implementation of the recommendations already in place, including those developed by the Citizen's Energy Forum.

The full text of the study is available at:

http://ec.europa.eu/consumers/strategy/facts_en.htm#Energy

New EU Guidelines on Colorectal Cancer Screening and Diagnosis

On 3 February, on the eve of the World Cancer Day, the European Commission published the first edition of the "European Guidelines for Quality Assurance in Colorectal Cancer Screening and Diagnosis".

Colorectal cancer is the second most common newly diagnosed cancer in the EU. It is also the second most common cause of cancer death in the EU, accounting for one in seven new cancers and one in eight cancer deaths. Improving diagnosis and screening is therefore key to reduce the mortality rates.

The EU Guidelines on colorectal cancer screening aim to raise quality standards by providing guiding principles and evidence-based recommendations on quality assurance which should be followed when implementing colorectal screening programmes in the EU Member States. They cover the entire screening process - from invitation and organisation, through to diagnosis and management of lesions detected.

The publication provides indeed the first ever set of uniform guidelines on all the steps necessary for effective colorectal cancer screening in the EU. By implementing them, Member States have the potential to organise their health systems more effectively, including the diagnosis and management of cancers detected in screening. There is good evidence that population-based screening using the EU-recommended test reduces mortality from colorectal cancer by around 15% in people of appropriate age (50 to 74 years) invited to attend screening.

The guidelines, coordinated for the Commission by the International Agency for Research on Cancer

(http://www.iarc.fr), were developed with the input of over 90 experts from 32 countries, and set a benchmark for best practice in colorectal cancer screening. Widespread application of the Guidelines should also make it easier for experts in the field to exchange information and experience across the EU. This is essential for innovation and continuous quality improvement of existing cancer screening programmes.

The European Commissioner for Health and Consumer Policy John Dalli said: "These guidelines on screening help to give patients a chance of receiving timely treatment thanks to early diagnosis of colorectal cancer. For patients, screening and diagnosis can make the difference between life and death. This is why it is important that these guidelines, and the benchmark for best practice in colorectal cancer screening which they set, are indeed followed widely across the EU".

The European Guidelines for Quality Assurance in Colorectal Cancer Screening and Diagnosis is available at the EU Book Shop website or through the following link:

http://ec.europa.eu/health/major_chronic_diseases/diseases/cancer/index_en.htm#fragment3

Further information is available at:

http://europa.eu/rapid/pressReleasesAction.do?reference=MEMO/ 11/64&format=HTML&aged=0&language=EN&guiLanguage=en

Commission seeks opinions on the future of collective actions

On 4 February, the European Commission launched a public consultation aimed at achieving a coherent approach towards collective redress in the European Union. Contributions can be sent until 30 April 2011.

Collective redress is not a new concept in the EU. Current EU law already provides for the possibility of pursuing collective actions for injunctions in the field of consumer law, but the national legal systems vary considerably concerning financial markets, competition, environmental protection, and other areas of law. The situation is even more diverse among Member States when several consumers or businesses want to seek damages in the same case. Injunctive collective redress (aimed at stopping illegal behaviour) is indeed a normal feature in the EU's consumer legislation, but as regards collective actions for damages (also called compensatory actions), some Member States have them, while others do not.

The Commission will therefore attempt to identify common legal principles that should underpin collective actions across the EU by launching this horizontal public consultation entitled: "Towards a more coherent European approach to collective redress". The purpose of this consultation is to identify common legal principles, should a future Commission initiative be presented on collective redress.

The Commission will consider all views to identify whether collective redress may or may not be a suitable subject for EU legislation, taking into account the principles of subsidiarity, proportionality and effectiveness. A hearing will be held to complete the consultation. The Commission will then publish a Communication on the results. The final decision on whether new EU legislation is needed will be based on the consultation's outcome and, if appropriate, after a detailed impact assessment exploring all possible actions.

The consultation paper is available at:

http://ec.europa.eu/consumers/redress_cons/collective_redress_en.htm

A renewed Catalogue for better feed information

Feed information will soon improve significantly, thus further empowering feed users, due to a rare act of private-sector cooperation that resulted in a Commission proposal, which was endorsed by the Member States at the Standing Committee for on the Food Chain and Animal Health (SCoFCAH).

The private sector worked voluntarily on a ground-breaking update of the old list of feed materials (Catalogue), which contains less

than 200 entries. The coverage of the feed materials listed in the new Catalogue is significantly increased and simultaneously the information about their properties is improved.

In brief

Rare Disease Day 2011: focus on health inequalities

The last day of February is the International Rare Disease Day. 28 February 2011 marked the fourth edition of the event. This is an awareness-raising event coordinated by EURORDIS, the European Organisation for Rare Diseases, at international level and by national alliances of patient organisations at national level. On this occasion, hundreds of patient organisations from more than 40 countries worldwide organised awareness-raising activities and converged around the slogan "Rare but Equal".

Patient groups and their partners, coordinated by national alliances at country level, planned a multitude of events to draw attention to rare diseases and the millions of people who are affected by them. Awareness-raising activities were carried out across Europe, in Russia, Georgia and Armenia, as well as in the US, Canada, Australia, New Zealand, China and Japan. Furthermore, a book entitled "The voice of 12.000 patients" and several videos were made available on the website of the event.

Rare diseases are life-threatening or chronically debilitating diseases with a low prevalence and a high level of complexity. A disease or disorder is defined as rare in Europe when it affects less than 1 in 2000 citizens. It is estimated that there are 6000 to 8000 rare diseases in the world today, 75% affecting children.

The national healthcare services for diagnosis, treatment and care of rare disease patients differ significantly in terms of their availability and quality.

Paola Testori Coggi, European Commission's Director-General for Health and Consumers said: "I would like to express my wholehearted support for World Rare Diseases Day. It is vital that we continue to raise awareness of the difficulties faced by those affected. Even though only around 7% of Europeans suffer from a rare disease, this translates to around 36 million people. Rare diseases are a prime example of where working at European level can prove to be immensely beneficial. A Eurobarometer survey published to mark World Rare Diseases Day illustrates that most Europeans agree".

Further information is available at:

http://www.rarediseaseday.org/

The new feed marketing rules came into effect on 1 September 2010. Introducing the new approach of co-regulation, all interested feed chain partners were given the chance to participate in the updating of the EU Catalogue of feed materials. Thirty-eight EU associations of the feed sector presented their joint proposal shortly after the new regulation entered into force, proving their strong commitment in the mandate they received from the legislators and their belief in the added value of the Catalogue's updating.

In line with the co-regulation approach, the Commission checked the proposal, did some limited fine-tuning and presented it for a vote in the animal nutrition section of the Standing Committee for on the Food Chain and Animal Health (SCoFCAH). The draft Regulation received a positive opinion by qualified majority and will now undergo the European Parliament and Council scrutiny before the Commission can officially approve it.

The regulation is expected to enter into force in the first half of 2011.

Further information is available at:

http://ec.europa.eu/food/food/animalnutrition/labelling/index_en.htm

Conference on Childhood Immunization in Budapest

The Hungarian Presidency will host a high-level conference entitled "For a Healthy Future of Our Children – Childhood immunization" in Budapest on 3-4 March 2011. The goal of the conference is to increase awareness about the importance of achieving and maintaining high childhood immunization coverage, in order to strengthen the prevention and control of vaccine preventable disease. Commissioner Dalli will address the audience with opening remarks by a video message.

On the occasion of this conference, the impact of childhood immunization across EU will be discussed and experiences from efforts to reach under-vaccinated populations will be shared. The conference will review cross-border issues related to childhood immunization, and strategies for vaccinating mobile and difficult-to-reach children will be identified. The event will also aim at exploring further opportunities for EU collaboration on childhood immunization.

Senior national public health experts, including national immunization programme managers and national epidemiologists from the EU and the European Economic Area (EEA) and EU candidate/potential candidate countries, as well as representatives of professional associations and non-governmental organisations will take part to the event.

The topics addressed by the conference are in line with the planned Commission's initiative of a proposal for a Council Recommendation on cross-border aspects of childhood immunization. This initiative will aim at seeking a political commitment to strengthen and maintain high childhood vaccination coverage for priority vaccine preventable diseases, and will also provide recommendations to tackle the main causes of insufficient vaccination coverage.

Further information is available at:

http://www.eu2011.hu

EP news

European Parliament paves the way for protection of citizens from Falsified Medicines

The European Parliament voted favourably in its first reading on the proposed new EU legislation on falsified medicines on 16 February. Falsified Medicines are fake medicines that pass themselves off as real, authorised medicines. Falsified medicines may contain ingredients, including active ingredients, which are of low quality or in the wrong dosage - either too high or too low. Since they have not passed through the necessary evaluation of quality, safety and efficacy as required by the EU authorisation procedure, they can be a major health threat.

The Directive aims at preventing falsified medicines from reaching the patients by introducing harmonised, pan-European safety and control measures. These measures will ensure easier identification of falsified medicines, and improved verifications and controls at EU borders and within the EU.

It also addresses the sale of falsified medicines over the internet. The Directive provides indeed for an obligatory "trust mark" on the websites of legally-operating online pharmacies.

Once the Council will have adopted this new EU legislation, it will have to be transposed by each Member State into its national law within 18 months and is going to apply as of then. In parallel, the Commission will work on various measures to implement and supplement the legislation.

Commissioner for Health and Consumer Policy John Dalli said: "I welcome this vote on a Directive that will increase the protection our citizens from the dangers of falsified medicines and I congratulate and thank the Rapporteur, Ms. Marisa Matias, for all her work. I look forward to a swift implementation of this Directive by the Member States".

Further information is available at:

http://ec.europa.eu/health/human-use/quality/fake-medicines/index_en.htm

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