

April 2016

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### **Brexit update**

As we approach June 23, when the UK will vote on whether to remain in or leave the EU, the BMA is finalising its briefing for members, ahead of its launch in May.

Recognising that this is a momentous issue whose result could have huge implications for the medical profession, the briefing will highlight the significant impact — intentional or unintended, positive and negative — of EU policy and legislation on the UK's medical profession and the health of the nation.

Given that the referendum coincides with the ARM — where the European Office will be manning a stand — in Belfast (June 20/23) attendees should arrange a postal vote to ensure that their voice is heard on this critical issue.

Additional information about the BMA's work on this topic is available at the link below:

<http://www.bma.org.uk/news-views-analysis/news/2016/february/eu-referendum-bma-plans-briefing>

### **Transatlantic Trade and Investment Partnership (TTIP) update**

As the 13<sup>th</sup> round of negotiations drew to a close in New York (25/29 April), the EC (European Commission) has published a report on the current state of play. In response to numerous suggestions that agreement may not be reached before President Obama leaves office in January 2017, the report states that “negotiators are making good progress in many TTIP chapters, while significant strides remain to be made in some areas in order to have the main elements of a deal finished this year.”

With regard to public services, the report reiterates the EC's commitment that “TTIP will safeguard the ways that national governments choose to deliver and run the public services they offer to their own citizens.”

Whilst we welcome the reiteration of the EC's commitment to protect public services, the BMA will continue to monitor this issue and intervene where necessary to ensure that the finalised proposals do not adversely impact upon the NHS.

The EC report on the state of play can be read via the first link with additional background about the BMA's work on TTIP available at the second link:

<http://trade.ec.europa.eu/doclib/press/index.cfm?id=1488>

<http://www.bma.org.uk/working-for-change/policy-and-lobbying/bma-europe>

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### **Report demonstrates that minimum unit pricing is more effective than taxation**

Ahead of the Scottish Court of Session's June hearing to decide whether the Scottish legislation to introduce minimum unit pricing (MUP) for alcohol can be lawfully implemented, a new report from the Sheffield Alcohol Research Group, commissioned by the Scottish Government, estimates that alcohol taxes would have to rise by 28% in order to achieve comparable reductions in alcohol-related deaths to a 50p minimum unit price. In addition, the report suggests that such an increase would be a less targeted measure, raising the cost of alcohol for 'moderate' consumers by more than MUP.

The report is significant as the ECJ (European Court of Justice) had ruled that it is up to the Scottish courts to decide whether other measures – such as taxation – could protect human life and health as effectively as minimum unit pricing, while being less restrictive to trade.

The report can be read in full at the first link below with the ECJ judgement available via the second link:

[https://www.shef.ac.uk/polopoly\\_fs/1.565373!/file/Scotland\\_report\\_2016.pdf](https://www.shef.ac.uk/polopoly_fs/1.565373!/file/Scotland_report_2016.pdf)

<http://curia.europa.eu/jcms/upload/docs/application/pdf/2015-12/cp150155en.pdf>

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### **Regulatory solutions required to tackle chronic diseases**

As the EC considers the development of legislation to regulate trans fats and tighten restrictions on the advertising of unhealthy foods to children, Dr John D Woods, Chair of Council BMA Northern Ireland and a consultant nephrologist, met with MEPs and EC officials in Brussels to outline why such regulatory measures are required to prevent chronic diseases across the UK.

Dr Woods and European Office staff reiterated the BMA's view that the proposed revision of the EU's Audio-Visual Directive should include the tightening of certain rules, in order to protect vulnerable viewers from the impact of alcohol advertising or the advertising of products high in fat, salt and sugars. These views had previously been expressed via a public consultation to which we were advised that the BMA was the only professional association to have responded individually.

Dr Woods also reiterated the association's view that the "voluntary" approach to trans-fat regulation in the UK does not provide adequate protection for the population as a whole, and that consequently the EC should propose legislation which would introduce a statutory upper limit of 2% for IPFTAs (industrially processed trans fatty acids) in all food and drink produced or sold in the EU.

We will continue to work with partners from across Europe to ensure that industry lobbying on these matters is countered and that the EC develops the necessary regulatory measures to prevent chronic diseases.

Further information about the BMA's efforts to tackle the enormously harmful impact of poor diet can be read in the Board of Science report *Food for Thought: Promoting Healthy Diets among Children and Young People* via the following link:

<http://www.bma.org.uk/news-views-analysis/news/2015/july/food-for-thought-getting-the-recipe-right>

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### **MEPs vote to limit use of controversial herbicide**

The EP's (European Parliament) plenary (full session) has voted to approve a non-binding resolution which, citing concerns from the WHO about the carcinogenicity and endocrine disruptive properties of glyphosate, calls on the EC to renew its marketing approval for just 7 years, instead of 15, and for professional uses only. MEPs also called on the EC to commission an independent review and disclose all the scientific evidence that EFSA (The European Food Safety Authority) used to assess glyphosate - an active substance widely used in herbicides.

As the resolution is non-binding, it does not oblige the national experts sitting in the Standing Committee on Plants, Animals, Food and Feed (Phytopharmaceuticals Section) - to reject the EC proposal. If there is no qualified majority, it will be up to the EC to decide whether or not to renew the proposal. Further information about the vote can be read via the link below:

<http://www.europarl.europa.eu/news/en/news-room/20160407IPR21781/Glyphosate-authorise-for-just-seven-years-and-professional-uses-only-urge-MEPs>

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### **European Parliament votes to scrap nutrient profiles**

As part of the EC's REFIT (Regulatory Fitness and Performance) Programme which seeks to cut red tape, MEPs have adopted a non-binding resolution which calls on the EC to scrap the potential use of nutrient profiles in ranking food products based on their nutritional composition.

Citing the "problems of distortion of competition" caused by nutrient profiling – "the science of classifying or ranking foods according to their nutritional composition for reasons related to preventing disease and promoting health" as defined by the WHO – it calls on the EC "to review the scientific basis of this regulation... and, if appropriate, to eliminate the concept of nutrient profiles."

Unsurprisingly, the decision was criticised by both consumer rights groups and public health advocates with the food/drink industry, notwithstanding a few notable exceptions, welcoming the vote.

Whilst the resolution is non-binding, it will add to the pressure being exerted under the REFIT programme for the EC to delete the reference to nutrient profiles in an existing Regulation on the nutrition and health claims made on foods.

The EP's resolution can be read in full via the following link:

<http://www.europarl.europa.eu/sides/getDoc.do?type=REPORT&reference=A8-2015-0208&language=EN>

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### **European Parliament approves data protection proposals**

After four years of negotiations, and significant lobbying by the BMA, the EP has voted to approve the revised General Data Protection Regulation which should come into force by mid-2018. The new rules will replace the EU's current data protection framework, in place from 1995, and promise to give citizens more control over their own private information in a digitised world of smart phones, social media, internet banking and global transfers

The rules will impact significantly upon medical research with a preliminary analysis of the agreement indicating that:

- A new concept of 'pseudonymisation' is introduced as a privacy enhancing technique where the information which allows data to be attributed to a particular individual is held separately and subject to technical and organisational measures to ensure non-attribution.
- Children under 13 can never give consent to processing of personal data required for online services (e.g. provision of an email or Facebook account). Children 16 and over can give consent themselves. In between these ages, parental consent is the default position unless member states legislate to reduce the age threshold.
- Health research: sensitive personal data may be processed for public health purposes (defined widely) in the public interest without consent, provided this is on the basis of EU or member state law.
- Historical and scientific research, and statistical processing: sensitive personal data may also be processed for these purposes if EU or member state law so provides. Data must be pseudonymised wherever possible.
- Member states are specifically given the ability to enact more conditions (presumably, permissive), or limitations, on the processing of genetic, biometric or health data.

We will conduct a full analysis of the substantive regulation and draft a detailed briefing on the impact of these rules upon the medical profession. Further information about the vote and subject matter can be read via the following link:

<http://www.europarl.europa.eu/news/en/news-room/20160407IPR21776/Data-protection-reform-Parliament-approves-new-rules-fit-for-the-digital-era>

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**MEPs vote to limit public access to data on medicinal safety and efficacy**

The EP has voted to approve a Directive on Trade Secrets which would increase commercial confidentiality and reduce public access to data on the safety and efficacy of medicines.

Whilst the Directive is intended to help firms win legal redress against the theft or misuse of their trade secrets, there are concerns that it will significantly limit public access to data on medicinal safety and efficacy by declaring such information as commercially confidential and thereby preventing its release into the public domain by either journalists or whistleblowers.

The EU's Council of Ministers is expected to approve the draft Directive – which can be read in full at the link below - at its meeting of 26 May.

<http://www.europarl.europa.eu/oeil/popups/ficheprocedure.do?reference=2013/0402%28COD%29&l=en>

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