European commission

Under the Treaties, the European Commission has no mandate to carry out actions in the fields of health treatment or care. These remain the responsibility of the member states. This applies also to the question of integrated care. However, there are a number of activities of the European Commission that are of relevance to integrated care.

Each year the European Commission sets out the measures it intends to implement, and 2001 is no exception. These measures cover a very wide range of activities for which the Commission has responsibility under the Treaties. Some of these deal with health matters directly, and are based on the public health articles of the EC Treaty, whereas others deal indirectly with health and are based on other parts of the Treaty such as the internal market or agriculture articles.

As regards the proposed Directive on the high standards of quality and safety of tissues and cells, the Council is expected to adopt a Common Position on the proposed Directive setting high standards for the safety of blood and blood products.

See http://europa.eu.int/comm/health/ index_en.htm.

The Commission is also set to make Recommendations on Cancer Screening as well as on European Dietary Guidelines.

Earlier this year the Commission put forward a new initiative for a proposal for a Directive on the advertising and sponsorship of tobacco products. This is intended to replace the Directive that was annulled by the Court of Justice. Depending on the progress made by the European Parliament, the Health Council of 15 November 2001 hopes to adopt a political agreement and/or Common Position on this proposal.

See http://europa.eu.int/comm/dgs/health_ consumer/library/press/press144_en.html

The Commission is also intending to put forward in 2001 some measures that have been carried over from previous years. These include an amendment to Council Directive 92/117 to prevent outbreaks of food borne infections and intoxication, and Recommendations on the prudent use of anti-microbials in human therapy, as well as the prevention and reduction of risks associated with drug dependence.

These various measures are to be based on the main public health article in the EC Treaty, namely Article 152. This Article sets out in broad terms what can and cannot be undertaken at Community level. In comparison to the previous Treaty, much more can be undertaken at Community level, reflecting the evolving consensus on the importance of Community actions in this field. These actions are of a different nature to those of the World Health Organisation, but they may be mutually supportive. In this respect, the two organisations agreed to consolidate and intensify their cooperation by means of an exchange of letters and the signing in the year 2000 of a memorandum of understanding.

Much of the work of the European Commission in the health field has centred in recent years on eight main areas of activity that have been the subject of action programmes. Six of these have been primarily disease related and covered cancer, communicable diseases, drug dependence, pollution-related diseases, rare diseases, as well as accidents and injuries; two have been more general in nature and covered health promotion and health monitoring.

These programmes have provided support to actions intended to improve health at European Community level in these different areas. In order to continue to provide such support and to respond to the challenges and opportunities afforded by the new Treaty, the Commission put forward in May 2000 a proposal for a European Parliament and Council Decision on a programme of Community action in the field of public health. This programme is currently the subject of discussion by the Community Institutions with a view to its adoption in the near future. Once adopted, this new programme is expected to set out the main actions to be undertaken at Community level over the next six years.

Under the Swedish Presidency, agreement was reached on 27 February 2001 between the European Parliament and the Council on a Commissions proposal for a Directive on the manufacture, presentation and sale of tobacco products. This recasts two previous Directives on the tar yields of cigarettes and the labelling of tobacco products, including the prohibition of certain types of tobacco for oral use, and updates and supplements those provisions in the light of experience and scientific developments. It will enter into force on September 30th 2002.

The June 2001 Health Council adopted the common position on the new health programme and this is now being considered by the European Parliament in its second reading. The Commission hopes that this action programme on public health will be adopted under the Belgian Presidency in the second half of this year, as this is the cornerstone of its future approach to public health determinants. Further information on the European Union's activities is available on: *http://europa.eu.int*

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