



# Representing the voice of European Doctors

*Sarada Das, Secretary General*

5 February 2026 | Brussels



We represent national medical associations across Europe, covering roughly:





































# 1.7 million European Doctors from 36 countries

We are committed to contributing the medical profession's point of view to EU institutions and European policy-making through pro-active cooperation on a wide range of health and healthcare related issues.



We promote the highest level of medical training and practice but also the provision of evidence-based, ethical and equitable healthcare services.

# CPME Members

	<b>Austria</b> Österreichische Ärztekammer (Austrian Medical Chamber)		<b>France</b> Conseil National de l'Ordre des Médecins (French Medical Council)		<b>Malta</b> Medical Association of Malta		<b>Albania</b> Udhuri i Mjekëve të Shqipërisë (Order of Physicians of Albania)
	<b>Bulgaria</b> Български Лекарски Съюз (Bulgarian Medical Association)		<b>Germany</b> Bundesärztekammer (German Medical Association)		<b>Norway</b> Den norske lægeforening (Norwegian Medical Association)		<b>Georgia</b> Georgian Medical Association
	<b>Croatia</b> Hrvatska liječnička komora (Croatian Medical Chamber)		<b>Greece</b> ΠΑΝΕΛΛΗΝΙΟΣ ΙΑΤΡΙΚΟΣ ΣΥΝΔΕΣΜΟΣ (Panhellenic Medical Association)		<b>Poland</b> Naczelna Izba Lekarzy (Polish Chamber of Physicians and Dentists)		<b>Israel</b> Israeli Medical Association
	<b>Cyprus</b> ΠΑΓΚΥΠΡΙΟΣ ΙΑΤΡΙΚΟΣ ΣΥΛΛΟΓΟΣ (Cyprus Medical Association)		<b>Hungary</b> Magyar Orvosi Kamara (Hungarian Medical Chamber)		<b>Romania</b> Colegiul Medicilor din România (Romanian College of Physicians)		<b>Kosovo*</b> Oda e Mjekëve të Kosovës* (Kosovo* Doctors Chamber)
	<b>Czech Republic</b> Česká lékařská komora (Czech Medical Chamber)		<b>Iceland</b> Læknafélag Íslands (Icelandic Medical Association)		<b>Slovakia</b> Slovenská lekárska komora (Slovak Medical Chamber)		<b>Montenegro</b> Ljekarska komora Crne Gore (Montenegrin Medical Chamber)
	<b>Denmark</b> Lægeforeningen (Danish Medical Association)		<b>Ireland</b> Ceardchumann Dochtúirí na hÉireann (Irish Medical Organisation)		<b>Slovenia</b> Zdravniška zbornica Slovenije (Medical Chamber of Slovenia)		<b>North Macedonia</b> Лекарска комора на Република Северна Македонија (Doctor's Chamber of North Macedonia)
	<b>Estonia</b> Eesti Arstide Liit (Estonian Medical Association)		<b>Latvia</b> Latvijas Ārsts biedrība (Latvian Medical Association)		<b>Sweden</b> Sveriges Läkarförbund (Swedish Medical Association)		<b>Serbia</b> Лекарска комора Србије (Serbian Medical Chamber)
	<b>Finland</b> Suomen Lääkäriliitto/Finlands Läkareförbund (Finnish Medical Association)		<b>Lithuania</b> Lietuvos gydytojų sąjunga (Lithuanian Medical Association)		<b>Switzerland</b> Verbindung der Schweizer Ärzte (Swiss Medical Association)		<b>Turkey</b> Türk Tabipleri Birliği (Turkish Medical Association)
					<b>United Kingdom</b> British Medical Association		<b>Ukraine</b> Ukrainian Medical Association (UMA)
			<b>Luxembourg</b> Association des Médecins et Médecins-Dentistes du Grand-Duché de Luxembourg				

\* References to Kosovo are without prejudice to positions on status. They are in line with United Nations Security Council Resolution 1244/1999 and the opinion by the International Court of Justice on the Kosovo declaration of independence.



# Board of Directors 2025-2027



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**Marie-Paule Bockstal  
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*Administration and Finance  
Consultant*

# Policy and Priorities 2025-2027

## Policy clusters

Digital Health

Pharmaceuticals & Healthcare Products

Public Health

Professional Practice & Patients' Rights

## Priorities include

AI, EU Health Data Space, eHealth, Digital Skills, Cybersecurity, Data Protection

Access & Shortages, Falsified Medicines, Medical Devices, Antibiotics, Legislation

Environmental Health, Vaccination, Alcohol & Tobacco Control, Food Systems, Mental Health, Gambling

Health workforce, Independence, Professional Qualifications, Health Systems



# How to navigate and how to succeed?

Policies developed in close and continuous cooperation with CPME members in General Assemblies, Working Groups, members' conferences, surveys etc.



Meetings with and support to members to understand national context and priorities, e.g. in reports to General Assemblies, meetings at national level, letters, articles etc.



**CPME** European Doctors  
@CPME\_EUROPA

📌 Our General Assembly adopted a statement of concern over UK government action seeking to limit doctors' [#RightToStrike](#)

We also express concern and opposition to the trend of physician substitution by 'Physician Assistants'

👉 Full statement: [cpme.eu/news/european-...](https://cpme.eu/news/european-...)



The BMA and 5 others  
12:16 PM · Nov 14, 2023 · 64.2K Views



# How to enter into dialogue with policy-makers?

- Bilateral meetings with policy- / decision-makers
- Participation in expert groups at EU/European level, e.g. Commission network on AMR/One Health
- Events, e.g. Doctor MEP Roundtable, European Health Union Network in European Parliament
- Contributing to conferences of the institutions, e.g. Council presidencies, European Parliament hearings, Commission summits



"We need more,  
better and  
happier doctors"

Dr. Martin Balzan | Vice President





# Our partners

## Institutions & Agencies

European Commission  
European Parliament  
Council of the European Union  
European Economic and Social Committee  
European Centre for Disease Prevention and Control (ECDC)  
European Food Safety Authority (EFSA)  
European Medicines Agency (EMA)  
European Patent Organisation  
Organisation for Economic Co-operation and Development (OECD)  
World Health Organisation – Europe (WHO – Europe)  
Council of Europe  
International Organization for Migration (IOM)

## European and international medical organisations

European Association of Senior Hospital Physicians (AEMH)  
European Council of Medical Orders (CEOM)  
European Federation of Salaried Doctors (FEMS)  
European Junior Doctors (EJD)  
European Medical Students Association (EMSA)  
European Union of General Practitioners/Family Physicians (UEMO)  
European Union of Medicine in Assurance and Social Security (EUMASS)  
European Union of Medical Specialists (UEMS)  
European Working Group of Practitioners and Specialists in Free Practice (EANA)  
World Medical Association (WMA)  
European Forum of Medical Associations (EFMA)

## European stakeholders

Association Internationale de la Mutualité (AIM)  
Council of European Dentists (CED)  
European Alcohol Policy Alliance (Eurocare)  
European Federation of Nurses Associations (EFN)  
European Hospital and Healthcare Federation (HOPE)  
European Midwives Association (EMA)  
European Patients Forum (EPF)  
European Public Health Alliance (EPHA)  
European Public Service Union (EPSU)  
European Region of the World Confederation for Physical Therapy (ER-WCPT)  
European Social Insurance Platform (ESIP)  
Federation of Veterinarians of Europe (FVE)  
Health and Environment Alliance (HEAL)  
Pharmaceutical Group of the European Union (PGEU)  
Smoke Free Partnership (SFP)



# Policies

## Health Check for Europe 2024-2029

European doctors' ambitions to continue building the European Health Union:

1. Tackle the health workforce crisis
2. Ensure a safe digital transformation of healthcare
3. Enable healthier living
4. Guarantee accessibility and effectiveness of medicines
5. Take climate action for better health





Digital health

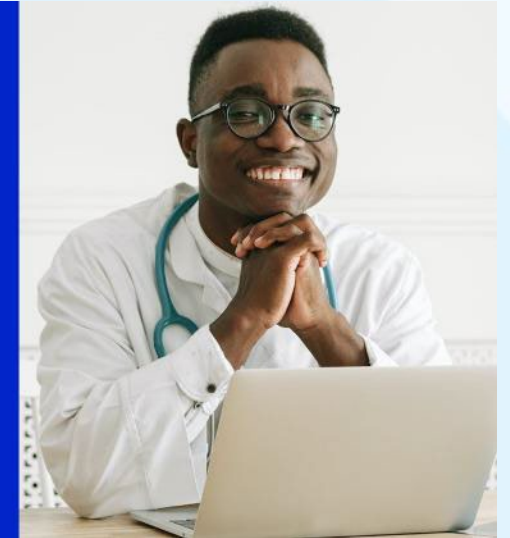
# Digital Health

## Priorities and actions

- European Health Data Space Regulation
- Artificial Intelligence Act and civil liability Directive
- Digital Skills for future doctors
- Data Protection and ePrivacy Regulation
- Cybersecurity
- Medical confidentiality

European doctors  
welcome adoption  
of agreement on the  
European Health  
Data Space

**CPME** MEDECINS EUROPEENS  
EUROPEAN DOCTORS



**STATEMENT**

Electronic Health  
Record Systems need  
to be Feasible,  
Functional and  
Findable

**CPME** MEDECINS EUROPEENS  
EUROPEAN DOCTORS



## POLICY AGENDA

# Digital Health

- Policy on [deployment of AI in healthcare](#)
  - Need for human oversight
  - Request on strict liability for AI under civil liability rules
- Implementation of European Health Data Space
  - Focus on [Electronic Health Records Systems](#), incl. i2x project
- Survey on medical confidentiality in digital healthcare
- Upcoming amendments for Digital Omnibus proposals



### POLICY

**European doctors' recommendations for AI to meet the needs of clinical practice**

**CPME** MEDECINS EUROPEENS  
EUROPEAN DOCTORS





# Pharmaceuticals & Healthcare

# Pharmaceuticals & Healthcare

## Priorities and actions

- Access to medicines and medicine shortages
- Pharmaceutical legislation
- Antimicrobial resistance
- Medical devices

### How to make progress on tackling AMR?

#### Addressing Antimicrobial Resistance in Medical Practice

27 April 2023 | 13:00 – 16:15 CEST | Stockholm | In person and online



#### Speakers will include:

Swedish Ambassador on AMR  
Slovenian Medical Chamber  
Health Action International  
Public Health Agency of Sweden  
European Commission | Strama  
Health Action International | ReAct Europe  
European Centre for Disease Prevention and Control  
Health Emergency Preparedness and Response Authority

08 SEPTEMBER 2022

### European Doctors and Veterinarians reaffirm their partnership on One Health

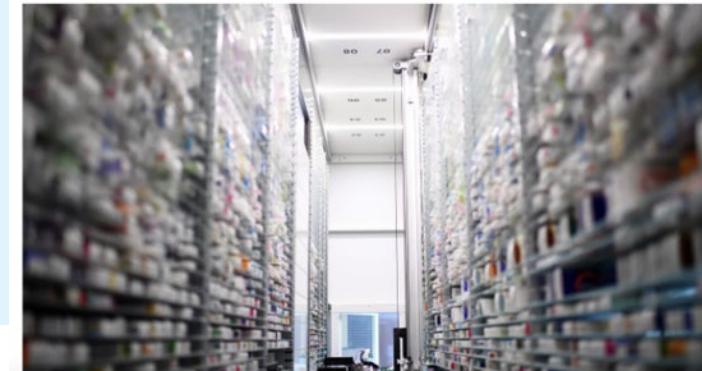
To enhance further cooperation on the One Health approach in Europe, CPME and the Federation of Veterinarians of Europe (FVE) have renewed their Memorandum of Understanding.



PRO Article Health Care

### Pharmacists, doctors call for tougher EU laws to prevent future drug shortages

The EU's response to antibiotics shortages has illustrated the limitations of Europe's powers, they say.



## POLICY AGENDA

# Pharmaceuticals & Healthcare Products

- Lobbying with on legislation incl. Biotech Act (upcoming), Critical Medicines Act (ongoing), and implementation of the EU general pharmaceutical legislation (adopted) with emphasis on:
  - Ensuring equitable access to innovative medicines across Europe
  - Tackling medicine shortages long-term
  - Addressing unmet medical need
  - Fighting antimicrobial resistance with One Health approach
  - Medical ethics in clinical trials
  - Safe regulatory framework for medicines and medical devices



European Doctors  
and Community  
Pharmacists discuss  
solutions to combat  
shortage crises



CPME  
MEDICINS EUROPEENS EUROPEAN DOCTORS



Photo: istock / PavelMuravev

An aerial photograph of a lush green forest. A winding river flows through the center, leading to a large, calm lake. The forest is dense and vibrant green, with some mist or fog visible in the upper corners. The text 'Public Health & Disease Prevention' is overlaid in white, sans-serif font at the bottom of the image.

# Public Health & Disease Prevention

# Public health Priorities and actions

- Environmental health & Climate Change
- Alcohol and tobacco
- Nutrition and physical activity
- Vaccination
- Mental health
- Health Inequalities



**As a medical doctor, better air quality is needed in Europe as the impacts of air pollution related diseases are very serious and often fatal**

**Dr Ina Kelly**

CPME Chair of Environmental Health & Climate Change



## WHO WE ARE

The Coalition for Vaccination brings together European associations of healthcare professionals and relevant student associations in the field of vaccination. It was convened by the European Commission in 2019 based on the 2018 Council recommendation on strengthened cooperation against vaccine-preventable diseases.

## OUR MISSION

The Coalition aims to support delivering accurate information to the public, combating myths around vaccines and vaccination, and exchanging best practices on vaccination. It also organises advocacy campaigns to promote the uptake of vaccination among healthcare professionals.

Healthcare professionals' role is to raise awareness of the benefits of immunisation and to reassure people that vaccination is a safe and efficient way of protecting individuals and populations from vaccine-preventable communicable diseases. They should also lead by example and ensure that they are correctly vaccinated. This is not only to protect themselves from potentially injuring and life-threatening preventable diseases, but also to help protect the vulnerable risk groups within their patient communities.



## POLICY AGENDA

# Healthy Living

- Input to new Safe Heart Plan incl.
  - Tobacco control policy incl. taxation
  - Advertising controls
  - Alcohol labelling
- Continued action on climate change and health, in particular air quality incl. through EU Healthy Air Coalition
- Co-chairing of Coalition for Vaccination
- Cooperation with WHO-Europe on doctors' mental health and wellbeing
- Upcoming policy on health effects of online gambling

*The Standing Committee of European Doctors (CPME) represents national medical associations across Europe. We are committed to contributing the medical profession's point of view to EU and European policy-making through pro-active cooperation on a wide range of health and healthcare related issues.*

### Policy on Adverse Health Effects of Cannabis

European doctors:

1. Warn that cannabis is a hazardous and addictive drug and a serious public health concern, and therefore discourages cannabis use.
2. Encourage local, national, and European public health agencies to improve surveillance efforts to ensure that more data is available on the short- and long-term health effects of cannabis, especially emergency department visits and hospitalisations, impaired driving, workplace impairment and worker-related injury and safety, and prevalence of psychiatric and addictive disorders, including cannabis use disorder.
3. Advocate for products containing cannabis to be subject to the same regulatory and licensing process as other prescription products.
4. Advocate for stronger public health messaging across the entire population regarding the adverse health effects of cannabis and cannabinoid inhalation and ingestion, with an emphasis on reducing initiation and frequency of cannabis use among adolescents, especially high potency products, use among women who are pregnant or contemplating pregnancy; and avoid
5. Advocate for access to people suffering problem.
6. Strongly oppose fur indicates that legalis

#### PRESS RELEASE

**European doctors urge policy-makers to ensure commercial influence does not harm public health**



A healthcare professional in blue scrubs is sitting on the floor in a busy hospital hallway, looking up at the ceiling. The hallway is filled with blurred figures of other staff members in white coats and scrubs walking past, suggesting a fast-paced environment. The scene is lit with warm, overhead lights, and the floor is a dark, polished material. The overall mood is one of quiet observation amidst a busy setting.

# Professional Practice & Patients' Rights

# Professional Practice & Patients' Rights

## Priorities and actions

- Health systems & health inequalities
- Workforce, skills & working conditions
- Violence against doctors and other healthcare professionals
- Health workforce crisis
- Professional regulation & qualifications



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## Policy on Quality of Basic Medical Education

### O. Recommendations:

#### Action at National level

- Ensure medical curricula are regularly reviewed and adapted to future challenges and requirements.
- Continuously update curriculum content to include emerging fields such as AI and place a greater focus on general practice and outpatient care.
- Establish and enhance quality assurance procedures, including accreditation processes.
- Ensure basic medical education includes sufficient practical training and ensure the availability of positions for training/practice/internship.
- Evaluate the role of competencies in addition to duration-based minimum training requirements.
- Ensure basic medical education curricula include a robust digital component, equipping healthcare professionals with necessary digital skills and knowledge.
- Recommends that national accreditation authorities be guided by educational principles compatible with those of the World Federation for Medical Education (WFME).
- Ensure the medical faculties have sufficient scientific and financial resources.
- Ensure that knowledge of medical ethics is integrated into basic medical training.
- Encourage national accreditation authorities to facilitate the recognition of equivalent cross-border internships, allowing students opportunities to study and train freely within the EU.

## POLICY AGENDA

# Professional Practice

- Survey on safe staffing policies at national level
- Input to European Parliament process on health workforce, incl. conference in March 2025
- Input to evaluation of Professional Qualifications Directive
- Upcoming policy on optimisation of workforce service delivery

## STATEMENT

# Independence of the medical profession

- The statement highlights the increasing challenges that the independence of the medical profession faces across Europe, causing a threat to doctors, patients and society.
- The existence of robust organisations representing the medical profession strengthens democracy. Independence is key in making patients' right to health a reality and safeguarding the highest quality of medical practice and autonomy.
- Please find the full policy [here](#).

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### Statement on the independence of the medical profession

The independence of the medical profession across Europe faces increasing challenges. As European doctors we underline what is at stake for doctors, patients and society as a whole if it is not safeguarded and reinforced:

- National medical associations, both CPME full members and associate members, report challenges to the independence of the profession at the level of individual doctors, medical facilities and the organised representation of doctors. These challenges can take many forms:
  - Individual doctors have faced governmental pressure to break patient-doctor confidentiality and report names of patients seeking their care to identify undocumented migrants or protesters for the purposes of launching prosecutions.
  - Financial actors without medical background or mandate are accessing the ownership and governance of medical facilities as capital investors to skew patient care to the maximum economic profitability of services and restricting doctors in their clinical practice.
  - National medical associations voicing their opposition to government policy have been taxed in the form of retaliatory changes to their status, such as the loss of mandatory membership, dismissal of their leadership, or in the most extreme cases even imprisonment of organisations' leaders.
  - Another threat facing medical associations is restrictions on their ability to take collective action seriously restricting the ability to take industrial action.
  - Fair remuneration is one of the components of working conditions among many others which ensure that the medical profession remains attractive. In times of health workforce shortages, it is in the societal interest to safeguard access to healthcare by retaining medical services. To achieve this, governments need to make long-term



# Engagement in the Netherlands

# General Assembly & Policy Sessions 22-23 November 2024, Amsterdam

- A welcome address was provided by The Royal Dutch Medical Association (RDMA) celebrated its 175<sup>th</sup> Anniversary. To commemorate the milestone, the RDMA hosted a conference themed 'The European Doctor and Digital Health' at the iconic NEMO Science Museum.
- The RDMA is a longstanding member of CPME



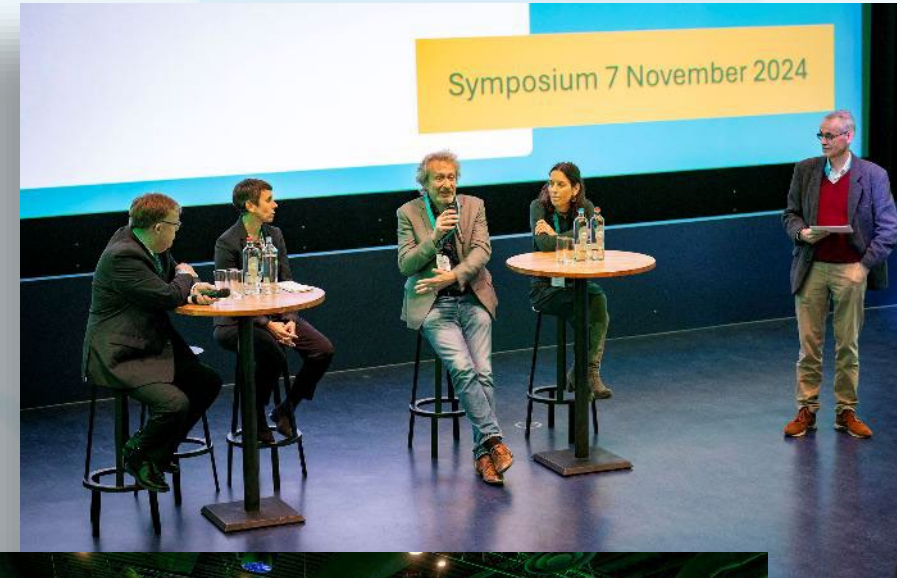
# Opening address by Prof. Dr Jan Anthonie Bruijn, President of the Dutch Senate

- Prof. Dr Bruijn provided vital questions for our discussions that are tackled by the Dutch Parliament on the sustainability of healthcare and highlighted that we need to make explicit choices about where our priorities lie.
- He concluded that all Western countries share similar challenges and that international cooperation is mandatory, and associations such as CPME can be pivotal.



# Conference: The European Doctor and Digital Health, Amsterdam

- Distinguished speakers included Abigail Norville (Deputy Secretary-General of the Dutch Ministry of Health, Welfare and Sport) and Prof. Dr. Henk Marquering (Professor of Translational Artificial Intelligence), will explored the technological impacts on healthcare.
- Legal and ethical aspects of digital health were also a focal point, with Prof. Corrette Ploem, (Professor of Law, Healthcare Technology and Medicine), and Prof. Dr Tamar Sharon (Professor of Philosophical Ethics and Political Philosophy), leading these discussions.
- Conference press release [here](#)



Dr Christiaan Keijzer of the KNMG completed his successful three-year term at the end of 2024 and will continue to support the incoming Board of Directors as Immediate Past President.

Dr Christiaan Keijzer | President 2021-2024



# Many thanks for your attention!

For more information, please contact CPME Secretariat:

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