

Brexit negotiations must not relegate health, warns Marian Harkin MEP

Brussels, 23 March 2017. British and European patients are likely to pay a high price for Brexit, concluded Brexit, Trade and Health, an event organised by the European Public Health Alliance (EPHA) in partnership with the University of Manchester and the Economic and Social Research Council (ESRC).

Medicines may become more expensive for UK and EU patients -a side effect of the possibility of changes in parallel import law, as explained by Dr Jasem Tarawneh, of the University of Manchester. Medicines availability could also be at stake for UK patients after leaving the European Medicines Agency (EMA) system, as illustrated by National Health Service (NHS) European Office Director Elisabetta Zanon. British-driven research and innovation will likely come to a screeching halt, unless the UK finds a replacement for the large amounts of health research funding from the European Union -well over €300m since 2014 according to NHS data¹. Patients all over the continent would suffer the consequences of this slower-paced innovation. The health workforce could be severely impacted as well, with the UK standing to lose about 144,000 EU-nationals working in health and social care, including 10% of NHS doctors².

Brexit will prove to be more than a bilateral negotiating effort for the United Kingdom. Questioning the capacity of the UK to simultaneously engage in negotiations on a variety of fronts, experts suspect the UK might wish to opt in to EU-US deals -for example, the recently agreed transatlantic mutual recognition of inspections of medicines manufacturers between the European Union and the United States³.

Uncertainty is never good for business according to the trade community, nor is a divergence between the United Kingdom and the European Union in terms of regulations for business, which is also the case for public health, social and environmental standards.

"We must focus on the public health implications of trade and investment policies not just in terms of a future UK-EU trading relationship but also UK and EU trade policy following the UK departure. With the Brexit debate and deliberations strongly focused on economic and legal consequences, our public health concerns are in jeopardy of falling by the wayside. It is crucial that we don't relegate health care issues to some sort of second tier, behind the 'big picture'" warned MEP Marian Harkin in her address.

UK Prime Minister Theresa May intends to trigger Article 50 on 29 March, and European Council President Donald Tusk has called a meeting for 29 April to consider the EU approach with regard to the negotiations with the UK. The European public health community will closely monitor the process.

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Notes for editors:

1. [Brexit Implications | NHS European Office](#)
2. [Brexit Implications | NHS European Office](#) and [Brexit, Making Sense of the Issues | NHS European Office](#)
3. [EU & US regulators agree on transatlantic mutual recognition of inspections of medicines manufacturers | BAB Policy](#)

ABOUT EPHA The **European Public Health Alliance (EPHA)** is a change agent – Europe's leading NGO advocating for better health. We are a dynamic member-led organisation, made up of public health NGOs, patient groups, health professionals, and disease groups working together to improve health and strengthen the voice of public health in Europe. EPHA is a member of, among others, the Social Platform, the Health and Environment Alliance (HEAL), and the Better Regulation Watchdog. <http://www.ephha.org/>