





















Mr. Michel Barnier
Chief Negotiator Task Force for the Preparation and Conduct of the Negotiations with the
United Kingdom under Article 50 TEU
European Commission
Rue de la Loi / Wetstraat 200
1049 Brussels, Belgium

Rt. Hon David Davis MP Secretary of State Department for Exiting the European Union 9 Downing Street SW1A 2AG London

Brussels and London, 13 March 2018

Dear Mr Barnier and Dear Mr Davis,

We are writing to you as a group of organisations that support and represent the interests of European patients to urge you to ensure that patient safety and access to medicines are prioritised in the second phase of negotiations to determine the UK's future relationship with the EU.

We welcomed the positive agreement on reciprocal healthcare achieved at the conclusion of the first phase of negotiations in December 2017. We were reassured that negotiators sought to protect the interests of patients, irrespective of their country of residence. We urge you to ensure that this approach, with the aim to protect those undergoing and seeking treatment, continues into the second phase of negotiations.

In order to achieve this, we have identified a number of priorities that should be included in the second phase of negotiations and addressed as a matter of urgency:

1. Close cooperation in the regulation of medicines and medical devices

Working together pools regulatory expertise across Europe and creates an attractive market for companies to launch new therapies. Millions of patients across the EU benefit from better access to innovative therapies and a high level of product safety as a result of comprehensive EU medicines regulation and shared regulatory systems for medical devices.

It is vital that close UK-EU cooperation and coordination in the regulation of medicines and medical devices is secured in the future for the benefit of patients and business.

2. A trade agreement that protects the supply of medicines and medical devices

The scale of the trade delivering medicines and medical devices to patients in the UK and the EU is substantial. In the case of medicines, the UK supplies 45 million packs of drugs to Europe every month; whilst 37 million packs travel in the opposite direction. These products

are often manufactured in complex supply chains across Europe where products or components of products cross borders several times.

Nobody should have their health put at risk by a block in the supply of medicines or medical devices. Future trade agreements must, therefore, include provisions to ensure that medicines and devices can continue to cross borders, so UK and EU patients can continue to access them.

3. Continued partnership on medical research to enable innovative research to be conducted across the UK and the EU

There is a long history of partnership in medical research that has not only benefited patients across the UK and the EU, but also those across the world. Collaborative research is more impactful: papers authored by UK and EU partners boost citations, taking scores to twice the world average, while each €1 invested into EU research programmes delivers returns of €11 for society.

By working together, the EU and the UK have achieved many research breakthroughs, particularly for rare disease patients for whom working on a multi-national level is vital to pool expertise and provide access to sufficient numbers of patients.

The aligned clinical trials landscape across the EU means that patients can take part in pioneering pan-EU trials. It is vital that these trials continue and that opportunities for EU and UK patients to take part in them are protected. Specifically, we urge that the UK remains committed to aligning with the forthcoming Clinical Trials Regulation and that negotiations secure collaboration on key underpinning infrastructure including the centralised clinical trials portal.

An environment for medical research that builds on this strong foundation and enables further innovative collaborative medical research across the UK and the EU for maximum patient benefit should be a key objective in future negotiations.

4. A smooth transition to ensure patient safety

A smooth transition will be critical to ensure that the necessary changes are delivered seamlessly, with no impact on the ability of UK or EU patients to access medicines after the UK leaves the EU.

Given the uncertainty in this area, as well as the urgent need to safeguard patient safety and access to medicines, the undersigned organisations urge negotiators to address these issues as soon as possible.

Patient safety and access to medicines must be at the heart of the second phase of negotiations to determine the UK's new relationship with the EU. We speak with a single voice: there must be no negative impact on patients whatever the deal agreed.

We look forward to hearing from you and would very much welcome the opportunity to set up meetings with your teams to discuss our priorities.

Yours sincerely,

Nicola Bedlington Secretary General, European Patients' Forum Nina Renshaw Secretary General, European Public Health Alliance

Wendy Yared Director, Association of European Cancer Leagues

Susanne Logstrup Director, European Heart Network

Derick Mitchell Chief Executive, Irish Platform for Patient Organisations, Science & Industry

Aisling Burnand MBE Chief Executive, Association of Medical Research Charities

Jeremy Taylor Chief Executive, National Voices

Simon Gillespie Chief Executive, British Heart Foundation

Sir Harpal Kumar Chief Executive, Cancer Research UK

Jayne Spink PhD Chief Executive, Genetic Alliance UK

Roisin Foster Chief Executive, Cancer Focus Northern Ireland