EUROPEANS PATIENTS CONTINUE TO BE DENIED RIGHTS TO PAIN TREATMENT

France, Ireland, Italy and Slovenia set an example for pain patients, other member states struggle

When it was completed in 2011, the Cross-Border Healthcare Directive seemed to usher in a new era of rights for patients seeking healthcare in the European Union. The Directive requires national governments to take a flexible approach to EU citizens accessing national healthcare systems, with costs being recouped at a later date through inter-governmental exchanges. While the complexities of member state insurance systems recouping costs may be a challenge, the principal of access treatment across the EU is one which member state governments are all, in theory, signed up to.

Mariano Votta, Director of Active Citizenship Network added: “Treatment across the EU should be a right for all citizens. Not only does it potentially shorten waiting times, it also makes the most of our resources and capacity across Europe’s healthcare systems.”

However, in the transposition process of Directive 2011/24 at national level, only France, Ireland, Italy and Slovenia have formally recognized the importance of the assessment of the degree of patient's pain as stated in Article 8(5), setting the benchmark on the implementation of the cross-border healthcare directive.

Bart Morlion, President Elect of EFIC, the European Pain Federation, added: “It has been five years and still we see no progress on one of the most crucial parts of this Directive. If no measurement of pain takes place, then how can we really understand whether a patient deserves access to treatment in another member state? Pain specialists have a number of tools to measure the extent to which patients are experiencing pain and really this should become routine.”

A survey - conducted in 23 countries (Austria, Belgium, Bulgaria, Croatia, Cyprus, Denmark, Estonia, Finland, France, Germany, Greece, Ireland, Italy, Lithuania, Malta, Netherlands, Portugal, Romania, Slovakia, Slovenia, Spain, Sweden, United Kingdom) by the European Pain Federation (EFIC), Pain Alliance Europe (PAE), Active Citizenship Network (ACN), Grünenthal GmbH and Burson-Marsteller – was presented on May 23rd, 2016 at the European Parliament in the context of the Symposium “Societal Impact of Pain” (SIP).

The findings showed that in Italy and France, citizens have access to rights related to pain based on existing legislation, which was in place prior to the EU Directive referring to pain. In Ireland and Slovenia, the word “pain” is mentioned in the national legal framework related to the cross-border Directive.

In Italy and France, where the legislation makes reference to the mandatory assessment by physicians of the degree of the patient’s pain, it also demands that medical records provide specific sections for the degree of pain. Furthermore, according to an assessment conducted in 46 Italian hospitals by the Civic Evaluation Agency of Cittadinanzattiva, there is a specific space on pain management in medical record in 8 of 10 cases. Meanwhile, in France, the certification conducted by the National Health Authority (HAS) to evaluate the quality and safety of care showed that the management of pain practice is a priority.
Five years after the publication of Directive 2011/24/EU on the application of patients’ rights in cross-border healthcare, most member states still struggle with its implementation. Indeed, for most European citizens and pain patients the benefits of article 8.5 are not within reach as the degree of the patient’s pain is not specified in national regulations.

Joop Van Griensven, President of Pain Alliance Europe added: “It is unacceptable that patients are being denied their rights under this Directive. There are many conditions for which pain is a severe disabling symptom, where treatment should not be postponed with long waiting lists. Additionally, pain, if left untreated, can become chronic, creating life-long pain patients out of what are, potentially, short-term acute problems.”

Marian Harkin MEP stated: “It is time for the Commission to act. Member States have been very slow to properly implement the Cross Border Healthcare Directive. The National Contact Points must provide information to enable patients to make informed choices and doctors must be given the tools to assess the degree of pain being experienced by patients. Furthermore, medical professionals need to be more proactive in ensuring their patients can exercise their rights to cross border healthcare, where appropriate.”

On May 23 and 24, several Members of the European Parliament joined stakeholders and experts at the Societal Impact of Pain Symposium to address this and other urgent issues and find solutions to help European governments and EU Institutions act and prioritise the societal impact of pain in their policy agenda.

You can find out more about the Societal Impact of Pain symposium [here](#).