



COMITÉ PERMANENT DES MÉDECINS EUROPÉENS  
STANDING COMMITTEE OF EUROPEAN DOCTORS



European Junior Doctors  
Permanent Working Group



Fédération Européenne  
des Médecins Salariés  
European Federation  
of Salaried Doctors

**Mr Antonio Tajani,**  
**President of the European Parliament,**  
60, rue Wiertz,  
B-1047  
Brussels

23 January 2016

## **“Brexit” and the European Medical Profession**

Dear Mr Tajani

We are writing to you on behalf of the European medical profession and as a result of the UK Prime Minister’s recent speech outlining her government’s “Brexit” negotiating priorities. The UK’s impending departure from the EU, especially given its government’s stated objective that “we will decide for ourselves how we control immigration,” will have profound repercussions for the profession and its ongoing ability to provide high quality healthcare across the continent. Whilst “Brexit” will fundamentally alter both the UK and the EU, it must not be permitted to threaten Europe’s health.

Europe’s medical workforces have become increasingly integrated and interdependent – over 30,000 registered doctors in the UK gained their primary qualification in another EEA (European Economic Area) state - with such free movement playing a crucial role in both doctors’ professional development and in meeting varying medical workforce requirements across Europe.

“Brexit” may slow but will not reverse such pan-European professional migration. Nor must it be allowed to threaten the progress of attendant patient safety measures like the alert mechanism – an early warning system which advises all European regulators when a doctor is banned or their ability to practice restricted – or ongoing efforts to ensure that minimum standards in medical education and training are met.

Comparable levels of pan-European professional migration also exist in the medical research and innovation sector with 15% of all academic staff at UK universities originating from other EU member states . The importance of pan-European collaboration to this sector is axiomatic and requires no further elucidation.

With medical research becoming increasingly international in focus and integral to tackling the main current and future societal challenges, it is imperative that solutions are found to secure researcher mobility and the provision of clear long-term frameworks in a post-Brexit EU.

Likewise, and as public health threats such as those arising from AMR (antimicrobial resistance) do not respect borders, the UK’s withdrawal from the EU must not be permitted to impinge on the “international cross-sectoral and inter organisational collaboration and coordination...required to... prevent the cross border spread of AMR .”

The principle of medical neutrality in times of conflict is a guiding principle of our civilisation. Whilst, of course, the “Brexit” negotiations will be carried out between long-standing allies, we believe that the same principle should be applied here to the medical profession in order to ensure that the UK’s withdrawal from the EU does not result in any collateral damage to our patients’ health.

As the European Parliament will play a key role in the “Brexit” negotiations, we hope that this letter helps you to ensure that, whatever the outcome, it does not threaten Europe’s health and would be delighted to elucidate further as required.

Yours sincerely



**Dr Romuald Krajewski**, UEMS President



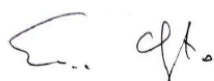
**Dr Nicolino D'Autilia**, CEOM President



**Dr Sascha Reiff**, EJD President



**Dr Aldo Lupo**, UEMO President



**Dr Enrico Reginato**, FEMS President



**Dr Jacques de Haller**, CPME President

(Endnotes)

<sup>1</sup> [http://www.gmc-uk.org/doctors/register/search\\_stats.asp](http://www.gmc-uk.org/doctors/register/search_stats.asp)

<sup>2</sup> Academies publish joint statement on research & innovation after the EU referendum, 19 July 2016

<sup>3</sup> <http://ecdc.europa.eu/en/publications/Publications/draft-EU-guidelines-prudent-use-antimicrobials-human-medicine.pdf>