



Newsletter



March 2010

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PRESIDENT'S MESSAGE

Dear Colleagues

Let me start my editorial with the following quotation by the American industrialist and founder of the National Cash Register Company and the world's first sales training school at Sugar Camp in Dayton, Ohio, John Henry Patterson (1844–1922):

To succeed in business it is necessary to make others see things as you see them!

As everybody knows, the European Council of Optometry and Optics (ECOO), as the professional body for optometry and optics, has from its beginning given an important impetus to the development of optometry in Europe. The founders of ECOO realised that the European optometric and optical profession needed a strong professional body to unify the scope of practice in optometry and optics in Europe.

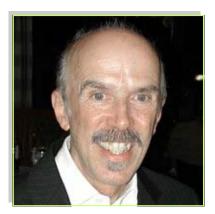
ECOO now represents more than 70,000 practitioners in 30 European countries. ECOO is becoming stronger and stronger, but we have still to think how ECOO can promote the profession in Europe better. During our last ECOO meeting in Budapest I presented one important outcome of the last brain-storming meeting of ECOO's Executive Committee which said:

"ECOO needs public health and health economic data to help its member states to convince the authorities that well



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trained optometrists are a cost effective alternative for primary eye care to reduce the costs in medical care and to substitute the declining number of ophthalmologists in many European countries".

Public health and health economics related data are the basis for governments and other authorities to develop healthcare policies and to update the laws on professional healthcare providers. But ECOO does not have any data which could be presented to governmental authorities.

For that reason ECOO has to initiate a multi-disciplinary study about the delivery of primary eye care in Europe.

The aim of this multi-national study is to collect researchrelated public health and health economics data to help ECOO's member organisations in their negotiations with authorities.

ECOO has taken the first steps towards the realisation of this study. You can read more about it in this newsletter. ECOO also needs every kind of support from its members for this important project.

"To succeed in business it is necessary to make others see things as you see them!" John Henry Patterson describes exactly the importance of this research project for the future of optometry in Europe. Without excellent arguments we cannot convince the authorities and the public that well trained optometrists are a cost-effective alternative for primary eye care in Europe.

For that reason I would like to ask all ECOO's member organisations: "please support this project".

Wolfgang Cagnolati

ECOO SEEKS SUPPORT FOR IMPORTANT RESEARCH STUDY

ECOO's Executive Committee has initiated an important research study to identify the best available model of primary eye care in Europe today. Provided that the necessary financial support can be found, the study will look at three economically similar countries which are nevertheless 'archetypically' different in terms of the delivery of primary eye care, namely:

- an ophthalmological model
- a mixed optometric/ophthalmological model
- an optometric model

The proposed study, based on interviews and literature searches, would examine the financing of primary eye care by national health systems, insurance companies and private expenditure. In summary, the study would:

- describe the mode of delivery of primary eye care in the three countries
- assess the comparative clinical outcomes
- · assess the comparative economic costs
- and evaluate the impact of national arrangements
 on primary eye care.

ECOO is appealing to its member organisations and other bodies to give ECOO their financial support for this important work.

ECOO PAPER ON

CONTINUING EDUCATION AND TRAINING

Following work done by Paul Folkesson, Roger Anderson and others in ECOO's Education Committee, a paper on continuing education and training (CET) has been published on ECOO's website.

The purpose of the paper is to provide a simple model of CET for any country to adopt if it wishes. The paper gives an overview of the possible mode and scope of CET, the fulfilment of CET obligations (if they exist) and the awarding of credit points. Different types of CET activity (it is suggested) would earn different numbers of credit points. A goal could be 12 points a year, with the possibility of transferring an additional 5 points to the following year.

DEFINING A STANDARD FOR OPTICAL AND OPTOMETRIC SERVICES

Having a sight test and being dispensed a pair of spectacles should be the same all over Europe. But is it? That question could be answered, if a project initiated by ECOO's Executive Committee goes ahead.

ECOO is in conversation with the European standards body CEN about the possibility of defining a European standard for optical and optometric services. Such a standard – which if formally adopted would be applied by all CEN member countries - would describe in detail the process by which a patient or customer would have his/her sight tested, a prescription issued if necessary, the spectacles made and dispensed, contact lenses fitted and dispensed, and (if necessary) the patient referred for further medical examination.

CEN is the Centre Européen de Normalisation, is based in Brussels and is closely linked to the institutions of the European Union

SUCCESSFUL EDUCATION CONFERENCE IN BRNO

ECOO and the Association of Czech Opticians and Optometrists organised another successful educational conference at the end of February in a snow-covered Brno. With the generous support of CibaVision, the Brno Trade Fair and other sponsors, a wide-range of speakers gave a mixture of clinical and professional lectures to a large audience from western, central and eastern Europe.

The value of the conference was demonstrated by, among other things, the progress continuing to be made in the 'twinning' of optometry and optics departments of several universities and schools throughout Europe. In some cases, the original contacts leading to such twinning were made at previous educational conferences held in Brno.

A leading theme of the conference was the development of accreditation by ECOO of national and university qualifications against the ECOO European Diploma of Optometry. Presentations were given on the important pilot projects currently being undertaken by ECOO to test the possibility of accrediting qualifications in Norway, Germany and the Czech Republic. In the margins of the conference, representatives of universities from other countries expressed an interest in participating in this work.

ECOO RECEIVES BIDS TO RUN SECRETARIAT

ECOO has received several bids from organisations to run its secretariat. A working group established by the Executive Committee is currently examining the bids and will make a recommendation to the Executive Committee by the end of next month. The Executive Committee will make its recommendation to the General Assembly in May in Copenhagen.

Bidders were asked to indicate their administrative capabilities, as well as the name of the person who would act as the Secretary General of ECOO. ECOO's current Secretary General, Richard Carswell, will retire from ECOO in October.



The European Academy 2010 annual conference will be held in Copenhagen in May 2010 and will be a joint event, held in collaboration with the Spring Meeting of the European Council of Optometry and Optics (ECOO)

The joint event will run for 2.5 days, from Friday 14 May to Sunday 16 May 2010 and will include the ECOO General Assembly, the first Academy Annual General Meeting and a busy social programme – including the traditional ECOO Get Together Dinner to be held at Tivoli Gardens on Friday evening and the first Academy Dinner, which will be held on Saturday 15 at the Copenhagen Marriott with its breathtaking views over the harbour and city.



The Academy's academic and research programme promises to build on the success of its first conference in Lausanne last year

and has been expanded to include hands-on workshops at the TEC School of Optometry in Copenhagen, Academy member-only round-table discussion groups as well as a full programme of lectures, panel discussions and poster presentations.



The two keynote lectures will be delivered by **Professor Bernard Gilmartin**, Professor of Optometry at Aston University (UK) and **Dr Barbara Ryan**, Co-Director of Wales Optometry Postgraduate Education Centre, Cardiff University and Clinical Lead for the Welsh Low Vision Service.

ECOO members are also invited to bring their partners and friends along too! Copenhagen is an attractive and vibrant city and there is a full Accompanying Person(s) programme to enable partners to get the most out of their visit, including a traditional Danish lunch in the idyllic Nyhavn district, (a charming area of the city filled with houses built in the 17th Century), a cruise through the canal district, exploring the areas where Hans Christian Andersen lived and worked, a city tour and entry to the Rosenberg Castle, home to some of

Denmark's greatest cultural treasures, including the Crown Jewels and entry to the ECOO Get Together dinner and the Annual Academy Dinner.

Booking forms are available on the ECOO and Academy websites. **ECOO** delegates are urged to book their places for the ECOO Spring Meeting and Academy conference as soon as possible.

The full programme will be available soon at www.eaoo.info/copenhagen.



To find out more on Copenhagen 2010 visit <u>www.eaoo.info/copenhagen</u>, call +44 (0) 20 7766 4345 or email info@eaoo.info. Booking forms for ECOO delegates are all available online.

Both meetings are being organised by the European Academy in collaboration with ECOO and the Danish Optometric Association.





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DEADLINE MISSED FOR EU DIRECTIVE ON SERVICES

Only one third of EU member states have successfully implemented the EU's services directive, despite the passing of a 28 December 2009 deadline.

This was the main finding of a report published by Eurochambres, an organisation representing EU chambers of commerce, on 2 February, with the body now calling on the European Commission to ramp up pressure on national governments. "Disappointingly, a number of member states clearly did not consider this directive's implementation as a political and economic priority," said Eurochambres secretary general Arnaldo Abruzzini.

USE OF GLAUCOMA MEDICATION LINKED TO REDUCED LIKELIHOOD OF DEATH

Use of glaucoma medication of any class was linked with a 74% reduced hazard of death compared with use of no glaucoma medication, a large study of subjects with glaucoma or suspected glaucoma found.

"After adjustment for potential confounding variables, the use of glaucoma medications was associated with a reduced likelihood of death in this large sample of U.S. adults with glaucoma," the study authors said. "Future investigations should explore this association further because these findings may have important clinical implications."

The longitudinal study looked at 21,506 glaucoma or glaucoma suspect subjects from 2003 to 2007 who were enrolled in a managed care network. Patients were 40 years or older.

The estimate for hazard of death associated with glaucoma medication use was determined with Cox regression analysis. Multivariable models took demographic characteristics and comorbid medical issues into consideration.

During the study, 237 patients (1.1%) died.

The reduced hazard of death (adjusted hazard ratio, 0.26) for glaucoma medication use was found for both single glaucoma drugs, including prostaglandin analogues (adjusted hazard ratio, 0.31) and topical betaantagonists (adjusted hazard ratio, 0.44), and for combined glaucoma medications.

Arch Ophthalmol. 2010;128(2):235-240 in Primary Care Optometry News 12 February 2010

After much controversy and far-reaching amendments, the services directive was finally passed three years ago. It is designed to help service businesses, such as interior designers and barbers, operate across EU borders, whereas the majority currently only work in their domestic markets. The directive specifically excludes regulated professions which are covered by the separate EU directive on the recognition of professional qualifications.

A key operational component of the legislation is the setting up of single points of contact (PSCs) in each country, enabling EU businesses to access and complete all the necessary forms online in order to set up shop in a different member state.

The nine states which comply fully with the services directive are the Czech Republic, Denmark, Estonia, Finland, Germany, Hungary, the Netherlands, Sweden and the UK.

A LIMIT ON PHARMACY OPENING HOURS?

An advocate-general of the European Court of Justice will this month give an opinion on the question whether a pharmacy's opening hours must be limited (case C-393/08).

Emanuela Sbarigia owns a pharmacy on Via Gambero, in the heart of the historic area of Rome. In 2006 she was allocated the period from 21 July - 10 August as her holiday period by the local authorities. Given the location of her pharmacy and the high numbers of tourists during this time she asked for this holiday period to waived. This request was refused.

Whilst challenging this refusal Ms Sbarigia also asked to be allowed to open for longer hours and to no longer take part in the annual holiday rota, citing the special nature of her clientele, notably the high number of tourists, as the justification. Such a request had already been granted to a pharmacy based near the main train station in Rome for the same reasons. Ms Sbarigia's request was, however, turned down.

The Italian court now hearing the case has asked the Court of Justice whether the restrictions on the opening hours of pharmacies and the requirement to take annual leave are compatible with the principle of freedom of establishment and the competition rules.

POSSIBLE CONSOLIDATION OF EUROPEAN LAW ON CROSS-BORDER HEALTHCARE

An Advocate General of the European Court of Justice has proposed that a refusal of additional reimbursement for medical expenses arising from unplanned hospital treatment abroad is contrary to the European Union's rules on the freedom to provide services.

Mr Chollet, a French national resident in Spain and insured with the Spanish social security system, unexpectedly needed to be admitted to hospital during a visit to France. The Spanish social security institution refused his application for refund of the percentage of the costs charged to him by the French hospital (the '*ticket modérateur*') in accordance with the French legislation. This led Mr Chollet to lodge a complaint with the European Commission, which initiated an infringement procedure against Spain. The case (C-211/08) is now with the European Court.

The Advocate General reminds the European Court that European legislation provides that, where the institutions of a Member State are called upon to pay for the treatment of a worker who is affiliated to a system in another Member State, coverage of that expenditure is based on the tariffs established by the Member State in which the services are provided. Accordingly, whenever the legislation of the Member State of the disbursing institution provides (as in France, in the case of Mr Chollet) that a percentage of the costs of the services is to be borne by the recipient, that legislation will apply also where the person in question is insured with another Member State.

The Advocate General points out that the Court has already explained that European law does not detract from the powers of Member States to organise their social security systems and that it is for each Member State to lay down (i) the conditions for affiliation to a social security system and (ii) the conditions for entitlement to the related benefits. However, Member States must comply with European law when exercising those powers and, in particular, with the provisions on freedom of movement.

Furthermore, according to the Court, medical services provided for payment fall within the scope of freedom to provide services, there being no need to distinguish between care provided in a hospital environment and care provided outside such an environment, and regardless of the way in which the national system with which that person is registered operates.

Lastly, the Court has already had occasion to confirm, in cases concerning planned health treatment, the right of persons affiliated to the social security scheme of a Member State to additional reimbursement, corresponding to the difference between the level of cover offered by the institution in the State in which treatment was received and the level of cover provided in the State of affiliation, but within the limits set by the tariffs applicable in the State of affiliation. The legislation of a Member State which does not guarantee the same level of cover as that offered for treatment received in the State of affiliation, constitutes a restriction on the freedom to provide services.

The Advocate General does not believe that the terms of the problem are altered by the fact that the proceedings brought by the Commission concern situations which have arisen unexpectedly, when the patient is already in another Member State. In the view of the Advocate General, the Spanish rules have a restrictive effect, if only because they deter the patient from prolonging his stay in another State or prompt him to bring forward his return to his State of residence in order to receive the medical treatment there.

The restriction on the freedom of movement, which takes the form of refusal to grant additional reimbursement, cannot be justified by reference to the risk of financial repercussions on the national health service. Indeed, the State of affiliation is not required in any case to reimburse more than the cost that it would have borne if treatment had been given in the national territory.

Moreover, in the view of the Advocate General, the risk of a resurgence of 'health tourism' is offset by the fact that the reimbursement is conditional in any event upon the existence of a medical need and that it is also possible to trigger mechanisms for administrative cooperation between the States in order to prevent abuse.

The Advocate General therefore suggests that the Court should declare that, by refusing persons entitled under the Spanish national health system additional reimbursement for medical costs incurred in another Member State as a result of unplanned hospital treatment, in so far as the level of cover applicable in that State is lower than that provided for under Spanish legislation, Spain is in breach of the principle of the freedom to provide services.

The European Court is not obliged to follow the Advocate General's opinion, when it makes its final ruling.









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Newsletter

The newsletter will be sent to members by e-mail or fax and we want to make sure it is received by every member:

Are your details up to date?

Telephone or email Charlotte at: +44 (0)20 7202 8169

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ECOO member state organisations should send relevant news and information which is of interest to all ECOO members to the ECOO office. Please email to: charlotteverity@aop.org.uk



NEARLY HALF A MILLION DOLLARS RAISED ON WORLD SIGHT DAY

Optometry practices and ophthalmic manufacturers contributed nearly \$500,000 to Optometry Giving Sight through the World Sight Day Challenge last October.

With the support of the optometry profession and industry, Optometry Giving Sight funds programs that help address the needs of the 670 million people who do not have access to an eye exam and a pair of glasses – 90% of whom are living in developing countries. Through the provision of vision care, the training of local eye care professionals and construction of infrastructure such as community-based vision centres, these programs ensure sustainable, lasting results for people in need.

By the end of 2009, Optometry Giving Sight distributed nearly \$3 million through its partners to help screen and provide basic eye care services to more than 3.5 million people, train 1,550 midlevel eye care personnel and create 101 vision centers/optical labs. The funds were distributed to projects in Sri Lanka, Southern Africa, East Timor, Latin America, indigenous Australia, Papua New Guinea and other parts of the world.

You can learn more about Optometry Giving Sight and read more from World Sight Day Challenge participants at www.givingsight.org.

This information is provided as a service by *Primary Care Optometry News*.





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