BRAINSTORMING ON INNOVATION: 2018 is going to be a big year as far as the EU’s plans to promote research and innovation are concerned. Brussels needs to come up with a blueprint on spending by May, and on Monday senior figures will gather to get the ball rolling. In deciding how to split the budget pie for the next seven years, research and innovation (aka Horizon 2020) faces a strong challenge from the other big pots: agriculture and regional funding. The Commission is also busy working up its detailed proposal on the successor to Horizon 2020, Framework 9, to determine how and on whom the money will be spent.

Michel Goldman, former executive director of the Innovative Medicines Initiative, one of the EU’s flagship programs for pharma research, said he thinks smoothing the transition academia-industry transition and educating medical doctors to think outside of health care are two things that could help. “Obviously we need to invest more, but money is not enough,” Goldman told Morning Health Care. “I think money should be used in a way that fosters collaboration and facilitates competition, because we need both.”

The wrong way to do it: Goldman, who after leaving IMI founded the Brussels Institute for Interdisciplinary Innovation in Healthcare (I3h), said academics need to be incentivized to collaborate more with one another and with industry to move ideas into clinical development.
Competition is also critical, he said, particularly in the arena of start-up companies taking on risky projects. But what doesn’t work is the current Big Pharma model where several companies chase the same target for the right to treat the same disease: “If everything goes in the same direction you might miss the target,” Goldman said. For Alzheimer’s, for example, multiple companies are developing therapies based on similar mechanisms even after earlier trials have failed, he said.

Among his other suggestions: ease the transition for young academics to become bio-entrepreneurs, perhaps by using a U.S. model where people combine academic and corporate duties. And medical education should be revamped so that front-line health professionals understand and make the best use of advances such as gene therapies, diagnostics based on artificial intelligence system or wearable medical devices they may one day use. “Physicians and health care providers need to expand their knowledge outside medicine,” he said.

**Backing the right horse:** Director of the Alliance for Biomedical Research in Europe, Ulrich Jaeger, has his own views on how the EU can support life science research. Writing in Science Business on Thursday, Jaeger said the EU needs to place less weight on innovation under Framework 9 to give a better chance of success in winning grants for clinical research. It also needs to reduce the admin burden.

For him, the money is also essential. “Unfortunately, research is viewed as an easy target for cuts because it is considered there will be less impact on the general public ... In the longer term, it is patients who have to put up with the effects of any cuts, through reduced access to new treatments,” he said.

**Across the Channel:** These issues will reverberate in the U.K. too as the country figures out how to protect its life sciences industry after Brexit. MPs in the House of Commons’ science and technology committee announced Thursday they will hold a summit in February to talk about the risks and opportunities of leaving the EU, and asked for input on the future science relationship. Got thoughts? The deadline for comments is February 5.

**Good morning and welcome to Morning Health Care** and the end of the first week of January! We’ve got the goods on health care in the Nordics today, from the Finns’ building of a genomic center to Sweden’s challenge with mental health care. Of course, we have the latest on the fallout from health service delays in the U.K. And let me take this opportunity to remind you the days are starting to get longer now, should you mourn the rare appearance of the sun, as we are. Have a great weekend!

*Big thanks to Sarah Wheaton, Marion Solletty, Judith Mischke, Natalie Sauer, Laura Greenhalgh and Nirvi Shah.*
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MARK YOUR CALENDARS: Your weekly health care calendar hit your inbox Thursday. You can also go online to export and plan your week or suggest your own event.

FINLAND’S DNA PROJECT: While the U.K. seeks input on its post-Brexit framework for research, Finland is seeking comments by February 2 on plans to build a national genome center. The government is optimistic the center will be a “new and compelling” innovation for health care, Sandra Liede, a senior specialist in legal affairs at the Ministry of Social Affairs and Health, told me.

While many countries have undertaken huge genome projects to sequence citizen’s DNA, Finland’s project will serve as a “registrar” that defines which genomic data will be primarily collected and in what form it should be stored. The national database will include variants that can be used for different purposes, with different levels of data security depending on the data in question and the data to be linked to it, Liede said. “It’s a national effort and the government is convinced of the economic benefits for all stakeholders and the economy at large.”

DENMARK’S SMOKING STALEMATE: A new study found that Danish smoking practices have plateaued in recent years despite significant public health focus on smoking reduction. Some 22 percent of adults smoke, a figure that has remained flat since 2011, according to an annual national survey by the Heart Association, the National Board of Health, the Cancer Control and the Lung Association out Thursday. Smokers are still primarily taking up the habit during adolescence. “We need to have more players on the pitch to break the curve,” Niels Them Kjær, project manager in the Cancer Control, said in a statement. “Our goal is that no children and young people smoke in 2030.”

SWEDEN’S HEALTH CARE CHALLENGES: Sweden may have one of the world’s strongest health care systems, but it still deals with long waiting times for patients, challenges with obstetrics and mental health care, according to Health and Social Affairs Minister Annika Strandhäll. And it’s as much a challenge of training as anything else: “We see that employment and lack of expertise are the main challenges for the whole health care in Sweden, [and] where we need to focus our resources forward,” Strandhäll wrote to us.

Included in her plans: An injection of 3 billion kronor (€300 million) is planned this year to improve things by employing more nurses, raising salaries and provide better education for staff. Strandhäll said she will put a bill to parliament in the coming
months intended to improve access to health care by promising patients a medical assessment within three days at the most.

Strandhäll has also asked Göran Stiernstedt, whom she called one of Sweden's foremost experts on health care policy, to look into how to ensure the public health budget is actually spent on health care and reduce profiteering by private companies.

**Mental health days:** Stress and minor mental health issues are now the No. 1 reason for longer term sick leave in Sweden, said Strandhäll, describing mental health as “modern society's perhaps greatest health challenge ahead.”

**THERESA MAY’S MEA CULPA MOMENT:** The U.K. prime minister apologized to patients for the ongoing delays in Britain’s health system on Thursday, echoing Health Secretary Jeremy Hunt from the day before. But neither apology was particularly warmly received by politicians or the public, with Twitter users calling her words “hollow” and “worthless.” Medical groups took the opportunity to ask again for additional funding and better long-term planning in the health care system.

Former Labour PM Tony Blair entered the fray Thursday when he said the billions spent on dealing with Brexit could have gone into saving the NHS. Hunt didn’t take kindly to the criticism, tweeting: “Tony Blair’s memory is as selective in office as out of office: does he not remember his own regular NHS winter crises? Perhaps he was too focused on joining the euro to give his full attention to the NHS...”

**Ireland chimes in:** Irish Health Minister Simon Harris, whose system is facing similar issues of overcrowding, vowed Thursday to increase bed capacity and negotiate a new contract with general practitioners to improve primary care.

**DOCTOR PROTESTS IN ROMANIA:** Romanian family doctors are starting the new year on strike in protest of the underfunding of primary care. As of Wednesday, they ceased providing services reimbursed by health insurers, the chairman of the National Society of Family Medicine, Rodica Tanasescu, told News.ro. Tanasescu said she didn’t know how long they would strike. “We have been in discussions at the ministry of health, but everything remained at the level of ‘it will,’” she said. “We have no other solution. Indeed, the most affected are the patients, but they are [also] affected by what happens in the medical system.”

**AU REVOIR, VALLET:** Benoît Vallet is stepping down from his gig as France’s director general for health, the top civil servant in the health ministry, to work with the country’s Court of Auditors starting Monday. At the EU level, he played a key role in the discussions that fed into the Commission’s forthcoming proposal on ways to boost vaccine coordination among member countries. In France, it’ll be up to his successor at
the health ministry, Jérôme Salomon, to implement the country’s new requirement for 11 childhood vaccines.

**GETTING TOUGH ON AIR POLLUTION**: The European Commission is expected to press ahead with legal action this year against countries that aren’t doing enough to clean up the Continent’s often foul air, amid a string of existing infringement proceedings against countries breaching EU air-quality standards. It’s a touchstone for Bulgaria too: The country, which holds the rotating presidency of the Council for the first half of 2018, said it would make air quality “a focus” of its presidency given it has the highest death rate related to air pollution in the bloc. Read Marion’s policy primer on what’s coming up this spring below.

**EXPANDING FERTILITY TREATMENT**: The British Fertility Society called for better fertility preservation for cancer patients, those with other medical conditions that could cause infertility and transgender individuals in new guidelines for women and girls issued Thursday at the national fertility conference in Liverpool.

With genetic conditions that render an affected individual infertile from birth, a mother could potentially freeze her eggs for her daughter to use. For transgender men who choose to use hormone treatments that affect their fertility, “by freezing eggs, embryos, or ovarian tissue, there is still the opportunity for transfolk to have a child who is biologically related to them,” it said.

**MENTAL HEALTH MISSIVE**: The U.K.’s parliament’s education and health select committees launched a joint inquiry into the provision of mental health services to children ahead of a scheduled oral evidence session later this month. The government put out a green paper in December that focused on the need for earlier intervention, an increased role for schools and colleges and improved access to NHS services.

**PROTECTING KIDS FROM SUGARY DRINKS**: British celebrity chef Jamie Oliver is today calling on the government to ban sales of energy drinks to children until 16 years of age, upping the existing labeling controls that state “not recommended for kids.”

**The dangers of sweeteners**: Meanwhile, the science press was awash with the findings of a Nature study that pointed to a popular sweetener trehalose as a culprit behind epidemic strains of the bacterium *Clostridium difficile*, linked to potentially fatal diarrhea.

— QUICK LINKS

The U.K. has promised more R&D — so where will the money come from? The Guardian asks.
How the Chan Zuckerberg Science Initiative plans to solve disease by 2100, its president writes in Nature.

Cost of Viagra soars as drugmakers impose inflation-busting price increases in the U.S., reports the FT.

The NHS is switching to cheaper mimics of expensive cancer drugs, but some doctors fear they won’t work as well. More from New Scientist.

Spain’s elite army regiment put on diet over obesity fears, also via the Guardian.

***POLITICO Pro Article***

Commission says ‘we need to fight’ air pollution

— By Marion Solletty

The European Union plans to get tough on air pollution this year, as the Commission is expected to press ahead with legal action against countries that aren’t doing enough to clean up the Continent’s often foul air.

The Commission has launched a string of so-called infringement proceedings against countries breaching EU air-quality standards, hoping to increase pressure on national capitals to adopt stronger measures to fight air pollution. More of them may be taken to the European Court of Justice, and ultimately face fines, for breaching EU legal limits after the Commission won what was widely seen as a test case against Bulgaria last year.

“I have been very clear with EU member states that they have to up their game,” Karmenu Vella, European commissioner for environment, said at a clean air event in Paris in November. “Failing to meet air quality standards that have been in place for decades is not an option.”

Bulgaria, which holds the rotating presidency of the Council for the first half of 2018, said it would make air quality “a focus” of its presidency. The country has experienced the problem first hand: It has the highest death rate related to air pollution in the bloc, with over 13,000 premature fatalities a year linked to fine particulate pollution — out of nearly 400,000 for the whole EU.

The European Court of Justice ruled that the country failed to fulfill its obligations under EU law to reduce the level of toxic dust in the air.

Facing an infringement procedure pushes the issue to the top of national government agendas, said Norbert Kurilla, Slovakia’s secretary of state for environment. Slovakia
recently joined the crowd of 20 EU countries facing such proceedings. “I can make a political guarantee that we will do our best to reach compliance,” he said.

Dirty air is a Continent-wide problem. Central and Eastern European countries struggle with dust and fine particulate pollution, where low-quality domestic heating units are often a major source of those pollutants. And Western European countries are recording high levels of nitrogen dioxide, a pollutant closely linked to diesel vehicle exhaust, in their cities.

Five of them — France, Germany, Italy, Spain and the U.K. — were given a final warning in early 2017 by the Commission, the last step before being taken to the European Court of Justice.

“The Commission has enforcement powers and we use them,” said Daniel Calleja, the Commission’s director general for environment, at the November event in Paris. “To improve air quality, we need to fight.”

On top of pressure coming from Brussels, EU national and local governments face an increasing number of lawsuits filed by citizens and NGOs, which have resulted in several court-ordered deadlines to come up with better plans to fight air pollution.

In one of them, France’s highest court gave the government until March 31 to come up with tougher measures to tackle high levels of nitrogen dioxide. In the U.K., the leading NGO on this issue, ClientEarth, launched its third legal challenge against the government’s air-quality plans in November, with a decision expected in the coming months.

Similar cases have been brought in Belgium, the Czech Republic, Germany, Italy, the Netherlands and Slovakia. The Commission welcomes them. “National judges’ action and ours complement one another,” said a Commission official who spoke on the condition of anonymity. “They are the first in line to implement EU law.”

And there is growing public support for action as the health effects of air pollution become more widely known. The issue is the second-most important concern of EU citizens after climate change, a recent survey found.

But the politics of cleaning up the air can get complicated, with mayors, regional and national governments often sparring over how to tackle the job.

The Socialist mayor of Paris, Anne Hidalgo, faced harsh criticism for her anti-pollution measures, including closing some roads, which led to increased congestion.
Political rival Valérie Pécreuse of the conservative Les Républicains, president of the Ile-de-France region encompassing Paris, raised concerns about the impact on commuters, saying it’s “interesting to have a capital city for pedestrians but I have to deal with the consequences. I am putting billions of euros in the regeneration of the transport system.”

London Mayor Sadiq Khan, from the Labour Party, called on the Conservative government to give him more powers to tackle fine particulate pollution from construction sites and wood-burning stoves. Both Khan and NGOs have accused the government of “passing the buck” to local authorities, which have to come up with detailed measures by the end of March to cut nitrogen dioxide pollution.

In Germany, authorities tiptoe around diesel bans for fear of weakening the country’s powerful car industry, already in turmoil from the Dieselgate emissions cheating scandal. However, cities face pressure from local courts to consider driving restrictions to clean up polluted air.

The Commission is trying to foster cooperation between different levels of government through its so-called Clean Air Dialogue, where it brings officials together to discuss possible measures, and how EU funds can help. Three are ongoing with Ireland, Luxembourg and Hungary.

“We expect member states to work closer with their regional and local authorities,” Vella told POLITICO. “We need better coordination between national policies, including taxation, and local decisions to promote cleaner air.”

In parallel, the Commission launched a review of its air quality laws, to last until 2019. This is likely to lead to an increase in EU air pollution limits, which are currently laxer than World Health Organization standards.

That’s going to increase pressure on countries, as 22 out of 28 EU members are already in breach of existing limits for nitrogen dioxide, according to the latest data from the European Environment Agency. But “it’s imperative that we do it,” said Hans Bruyninckx, executive director of the EEA.

“It’s realistic if we make the right choices at the systemic level,” with the EU fostering change in policies covering energy, climate, transport and agriculture, Bruyninckx said. “Those will be the core policy domains that link these things together. If we don’t have the breakthrough there, we can pretty much forget about reaching the WHO standards on air quality.”