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The Green Paper "Promoting healthy diets and physical activity: a European dimension for the prevention of overweight, obesity and chronic diseases" – comments from Norway

The Norwegian Ministry of Health and Care Services appreciate the initiative taken by the European Commission, to develop the Green Paper "Promote healthy diets and physical activity: a European dimension for the prevention of overweight, obesity and chronic diseases" - COM(2005) 637 final. The Commission has also invited to a broad consultation, aiming to identify the most relevant strategies at the European level. In the following text, the Norwegian comments are set up in accordance to the questions raised in the Green Paper:

General comments

As a general comment, we would like to give attention to the need for focusing on not only overweight and obesity, but also on other diseases related to unhealthy diet and physical inactivity. Since many measures will be the same for prevention of coronary heart diseases and cancer, as for diabetes type II and obesity, it is necessary to have a coordinated effort in this regard. We also find it relevant to mention the potential for positive effects on mental disorders, especially by increased levels of physical activity.

The need to reduce social inequalities in health is recognized in many European countries, also in Norway. In all efforts to strengthen public health, one must ensure that these efforts do not make this situation even worse, and strive to make a change for those who need it most.

Inter-sectorial and co-coordinated efforts to promote physical activity and healthy diets in the population is of crucial importance, and we would particularly like to emphasise the importance of balanced and multi-stakeholder responses, and active participation among sector authorities in the development of actions to be taken. Responsibility for the accomplishment of actions seems to be very much dependent on real ownership, and on the

identification of synergy effects between health goals and other prioritised goals within the different sectors. Actors within sectors like education, planning, transport, agriculture and fisheries need to be included, as their roles and responsibilities in creating a more healthy society is of crucial importance,

I STATE OF PLAY AT EUROPEAN LEVEL

Comments to I.2: A European strategy to be developed, should not only focus on the promotion of *healthy life styles*, but also be concrete concerning development of more healthy *environments*, to facilitate active living and healthy diets.

IV STRUCTURES AND TOOLS AT COMMUNITY LEVEL

IV.1 European Platform for Action on Diet, Physical Activity and Health

As a part of the work to develop an action plan for nutrition (see Concluding remarks), it will be relevant to consider the need to develop a platform for collaboration at the national level in Norway. The model developed by the European Commission, and the experiences from this work, could be useful in this connection.

IV.2 European Network on Nutrition and Physical Activity

Representatives from Norwegian health authorities participate in the European Network on Nutrition and Physical Activity. This network is useful as a channel for sharing of experience and for dissemination of new data or scientific evidence.

We would also like to mention the EU Expert Group on Social Determinants and Health Inequalities, which is established as a subgroup of the High Level Committee on Public Health (HLCPH). The Expert Group is, among other tasks, to provide a forum for the exchange of information and good practice between member states; to evaluate the situation and evidence base concerning health inequalities and social determinants; and to provide guidance and advice on the need for further action and joint work and research in this area. One of the outputs from the Expert Group will be a “workpackage” on socioeconomic dimensions of specific health policy issues, including, specifically, obesity. Therefore, the work of this group is of great relevance in development of strategies to counteract obesity.

IV.3 Health across EU policies

What are the concrete contributions which Community policies, if any, should make towards the promotion of healthy diets and physical activity, and towards creating environments which make healthy choices easy choices?

All related policies, as agricultural policy, should take health policy into account and not be contradictory to it.

Young people’s consumption and attitudes are influenced by advertising and marketing of foods, and the European Commission has already focused on this fact. It may be a need to consider regulations at a later stage (see also V.1.2), and such regulations will demand participation from several sectors.

In any work to increase physical activity, transport policy is an important field. This holds for all levels of planning and policy-making, including the EU level. Making it more competitive to walk or bicycle on short daily travels represents a great potential for getting more people

being physically active on a daily basis. In addition it would improve the environment, congestion problems and road budgets as well.

Which kind of Community or national measures could contribute towards improving the attractiveness, availability, accessibility and affordability of fruits and vegetables?

Availability, accessibility and price are important factors influencing the intake of fruits and vegetables in combination with educational measures. The food industry should be encouraged to develop more healthy alternatives, as for example ready-to-eat fruits and vegetables that can serve as alternatives to energy-dense, nutrient-poor foods. Several such projects have been initiated in Norway during the last years, some of them with aim to increase the consumption of fruit and vegetables among children and adolescents.

Norway has since 2004 had a nation-wide subscription programme for fruits and vegetables in primary schools subsidized by the Government to increase intake of fruits and vegetables among pupils. A similar system concerning school milk has also existed for many years, organized by the dairy industry and supported by the Government. The Ministry of Education has recently asked an independent expert group to consider and give advice concerning the future school meal in Norway. Their report will be published in June 2006. Free fruits and vegetables in primary school, to increase the intake and help to neutralize social disparities, is one of the questions discussed by this expert group.

On which areas related to nutrition, physical activity, the development of tools for the analysis of related disorders, and consumer behaviour is more research needed?

We have convincing documentation that dietary habits and the level of physical activity is of great importance for our health. However, much is still unresolved concerning how nutrition and physical activity can affect health. Further research about how diet and physical activity can improve health, on a broad basis, is needed. Furthermore, we need more knowledge about the effect of activities and measures that are used to promote healthy habits.

Systematic research regarding the effect of measures as price policy, food laws and marketing, is particularly needed. The impacts of the environment on human behaviour are also particularly interesting. This includes opportunities and attractiveness of environments for physical activity in general, and the competitiveness of active travel in particular. Efforts taken by the EU to increase knowledge and improve decision-making (good practice dissemination, etc) in these areas might be of huge importance with regard to the prevention of overweight, obesity and chronic diseases.

IV.4. The Public Health Action Programme

How can the availability and comparability of data on obesity be improved, in particular with a view to determining the precise geographical and socioeconomic distribution of this condition?

Monitoring of changes in diet and physical activity is a basic necessity for the formulation, evaluation and revision of a public health policy. This is important at the national level, but it is also important to have comparable data within Europe and internationally.

Norway supports the idea of development of a European system for monitoring of diet and physical activity. A regular European report of the status regarding diet and physical activity would be valuable. We propose continuance of the project "European Food Consumption Survey Method (EFCOSUM)". EFCOSUM was undertaken within the framework of the EU

Programme of Health Monitoring. The aim of EFCOSUM was to define a method for monitoring food consumption in nationally representative samples in Europe in a comparable way. Additionally, it should indicate how to make existing data comparable and available for the Health Information Exchange and Monitoring System (HIEMS).

The EFCOSUM project demonstrated that there is a broad European consensus on the basic ingredients of an individually based monitoring system oriented at diet. The consortium of 23 countries created not only the general outline regarding methods, most relevant indicators and the like, but also the proof that it is feasible to carry out a European survey. Therefore, their proposal could be implemented when the necessary funds are made available.

Data collection and development of indicators on obesity and health behaviours should be coordinated with indicator systems of urban transport, land use patterns and transportation systems. This is important with regard to both geographical and socio-economic distributions and the “clustering of unhealthy habits”, as well as health resources in terms of opportunities and qualities for more healthy habits. Indicator systems should not only cover indicators describing health, obesity and behaviour, but also “impact indicators” (conditions for behaviour) and “response indicators” (political response of various kinds).

How can the programme contribute to raising the awareness of the potential which healthy dietary habits and physical activity have for reducing the risk for chronic diseases amongst decision makers, health professionals, the media and the public at large?

The programme can contribute to raise awareness by making economic analyses related to health effects of different sectors’ policies more visible, including effects of preventive measures.

Which are the most appropriate dissemination channels for the existing evidence?

Professional publications might be important dissemination channels within the various sectors.

IV.5. European Food Safety Authority

The European Food Safety Authority (EFSA) can contribute with risk assessment of high intakes of nutrients in connection with fortification of foods and with food supplements. EFSA will also have an important role in the work with scientific criteria for health claims, and also in consideration of nutrient profiles in this connection. EFSA might also contribute to work with nutrient recommendations and food based dietary guidelines (see also V.9).

V. AREAS FOR ACTION

V.1. Consumer information, advertising and marketing

When providing nutrition information to the consumer, what are the major nutrients, and categories of products, to be considered and why?

The major nutrients are energy, fat, saturated and/or unsaturated fatty acids, trans-fatty acids, sugar, refined (added) sugar, sodium (salt) and dietary fibre. Large segments of the population in Norway and Europe still have a high consumption of foods high in content of fat and sugar, and a lower intake of nutrient-rich foods such as whole-grain breads and vegetables than recommended. (See also V.2.)

The intake of sugar among children and adolescents far exceeds recommended levels, primarily owing to the consumption of soft drinks and sweets.

In the long run it is the total diet that is decisive for health; what is consumed, how much and how often. However, major categories of products to focus on for reduction are energy-dense and nutrient-poor foods as soft drinks and for increase fruit, vegetables, whole-grain products and fish.

Which kind of education is required in order to enable consumers to fully understand the information given on food labels, and who should provide it?

Both basic knowledge about nutrition and food preparation and basic cooking skills are required in order to enable consumers to fully understand and utilize information given on food labels. Information should be given by the national authorities, educational institutions, NGOs and supported by the food sector.

Are voluntary codes (“self-regulation”) an adequate tool for limiting the advertising and marketing of energy-dense and micronutrient-poor foods? What would be the alternatives to be considered if self-regulation fails?

Marketing of foodstuffs with a high content of fat and sugar may lead to a higher consumption of such foods. Norwegian authorities agree with the Commission, that this area is challenging and that regulation must be considered if voluntary codes don't work. Such codes must therefore be monitored and the results considered carefully. In May 2006, Norwegian health authorities will host a WHO expert meeting on this issue. The results will be of great interest for development of policies at the national level, in Europe and for cooperation with WHO at the global level.

How can effectiveness in self-regulation be defined, implemented and monitored? Which measures should be taken towards ensuring that the credulity and lacking media literacy of vulnerable consumers are not exploited by advertising, marketing and promotion activities?

In Norway, a project is established as a cooperation between governmental bodies, the food industry and consumer representatives, with the aim to develop guidelines for voluntary self-regulation of marketing. This project might give a better knowledge on what measures that is needed.

V.2. Consumer education

How can consumers best be enabled to make informed choices and take effective action?

A combined effort is needed; information, basic knowledge and practical skills, trained in schools or other educational institutions. Availability of healthy alternatives is a central matter. Food labelling is one important means of providing consumers with information about the nutritional content and nutritional value of the foods. Labelling should make it easier to evaluate foods and make informed choices with regard to diet and health. Important in this regard is mandatory labelling of the content of nutrients as carbohydrates, sugars / added sugars, salt, protein, fat and fatty acids (saturated and/or unsaturated and trans-fatty acids).

As a comment in connection with the ongoing process to revise the labelling regulations in EU, Norway has already proposed QUID labelling for added sugar. This would make it easier for the consumer to consider the content of sugar.

Concerning use of symbols as a part of the labelling, Norway are now considering whether or not such a system should be established in Norway as a governmental initiative. In case, it should be followed by informative nutrition declaration. Some retailers in Norway have recently introduced the Swedish "key-hole"-system in shops at the Norwegian market. In cooperation with the other Nordic countries, the possibilities to have a common Nordic system, (common criteria if not a common symbol) will also be considered. It is also good reasons for development of such a system at the European level, and Norway will be pleased to take part in discussions concerning this issue. It is essential that good information is given when a symbol is introduced, especially to ensure that the use of a symbol contribute to making it easier for population groups in all socio-economic categories to choose healthier products.

What contributions can public-private partnerships make toward consumer education?

Good relations and communication between governmental bodies, non-governmental organisation and the private industry can probably create win-win situations. As an example, in Norway the bakery industry has recently developed a sign-posting system for information to consumers concerning the composition of bread. The system has been developed in close cooperation with the consumer representatives and health authorities.

In the field of nutrition and physical activity, which should be the key messages to give to consumers, how and by whom should they be delivered?

- Key messages to consumers with regard to a *healthy diet* are to increase consumption of fruits and vegetables, whole-grain products, fish and especially fatty fish, to reduce intake of solid fats and intake of energy-dense, nutrient-poor foods.
- Key messages to consumers with regard to *physical activity* should be “make it fun, simple and varied; the effects of increased activity are numerous; vigorous activity is not necessary; better often and easy, than rarely and advanced”

Information should be given by many participants/parties as day-care centres, educational institutions, health and social services sector, NGO's, consumer organizations, professional bodies and governmental authorities.

V.3. A focus on children and young people

As a part of the focus on children and young people, attention should also be given to the follow up on the WHO Global Strategy on Infant and Young Child Feeding, and to the document "Protection, promotion and support of breastfeeding in Europe: a blueprint for action". Adequate nutrition and a healthy diet in early childhood will contribute to health later in life.

What are good examples for improving the nutritional value of school meals, and how can parents be informed on how to improve the nutritional value of home meals? What is good practice for the provision of physical activity in schools on a regular basis?

Schools are a key setting for health-promoting interventions. In Norway, various models for school meals and daily physical activity at school are being tested through the project "Physical Activity and Healthy Meals at school". Important aims of this project are to disseminate good models and advice local school authorities on key success factors.

The first year evaluation shows that it's crucial that the schools work *systematically and focused* to improve the physical environment, and how to organise and secure resources to

stimulate for activity, and habits of good school meals. The joint approach which is taken by the Ministry of Education and the Ministry of Health and Care Services is considered successful. Based on the experiences from the project “Physical Activity and Healthy Meals in School“, and the general emphasis and need to improve children’s and adolescents’ behaviours in these areas, there are now ongoing discussions around including one hour of daily physical activity as a national requirement and providing free school meals. The major argument for this approach is to ensure that the same opportunities for physical activity and healthy eating are given to all children regardless of school initiatives and parents’ socioeconomic status. Studies demonstrate that children that eat fruit and vegetables regularly at school also eat more of these products outside of school, and similar findings are indicated for physical activity.

What is good practice for fostering healthy dietary choices at schools, especially as regards the excessive intake of energy-dense snacks and sugar-sweetened soft drinks?

The guidelines for school meals in Norway includes recommendations about what kind of food that should not be served in schools, as soft drinks, salty snacks, sweets and cakes. The guidelines issued are a normative tool for school owners and administrators and apply to primary and secondary schools alike.

Access to good drinking water throughout the school day is essential to reduce intake of sugar-sweetened soft drinks.

Research in Norwegian schools shows that providing free fruits and vegetables seems to reduce intake of unhealthy snacks among pupils.

How can the media, health services, civil society and relevant sectors of industry support health education efforts made by schools? What role can public-private partnerships play in this regard?

In Norway both NGOs and the food industry have participated in activities in schools, in connection with school meals, home-economics and sports. The experience is good, but it depends very strongly on good cooperation with governmental bodies, to ensure that activities performed and information given is in line with official recommendations.

V.4. Food availability, physical activity and health education at the work place

How can employers succeed in offering healthy choices at workplace canteens, and in improving the nutritional value of canteen meals?

Availability of healthy foods, as fruits and vegetables, in canteens at work places will have a positive effect on the diet of employees.

What measures would encourage and facilitate the practice of physical activity during breaks, and on the way to and from work?

There has been a dramatic decrease in physical activity as a natural part of the working day of adults as a result of the mechanisation implying an overall reduction of manual labour. There is a need to include daily routines for physical activity in relation to the work place. Physical activity is an important health-enhancing measure at work places. There are many indications that physical activity as well as good physical health, have positive effects upon the working environment and productivity.

The new Working Environment Act obliges employers to consider physical activity as a part of the company’s systematic work on health, environment and safety at work (HES). Such measures will be considered in co-operation with representatives of the employees. Suitable

measures are, however, bound to vary from company to company. Information and educational material has been developed in order to increase knowledge about potential health effects of better facilitation for physical activity at work. Possible measures can be:

- Informing about physical activity and the importance of health, work satisfaction and working environment
- Planning and organising work so that opportunities for physical activity are ensured
- Ensuring information and education about physical activity as part of the employees' education and development programmes
- Establishing activities like dance, gymnastics, aerobic, yoga and weight training at work.
- Establishing good change and shower facilities, as well as safe cycle parking, so that it is more attractive to cycle to work.
- Implementing other measures to increase active transport to work
- Co-operating with voluntary organisations of different kinds to establish varied activities both within and outside work hours.

V.5. Building overweight and obesity prevention and treatment into health services

Which measures, and at what level, are needed to ensure a stronger integration aiming at promoting healthy diets and physical activity into health services?

To ensure a stronger integration aiming at promoting healthy diets and physical activity into health services, mandatory knowledge about the role of physical activity and diet in preventive medicine, during basic studies and up throughout graduating courses, is absolutely necessary. In addition to better knowledge among different health groups, there is a strong need for specialists in nutrition and physical activity in health services to handle the increasing number of people who need help to make lifestyle-changes. It is also necessary to develop efficient measures about how to utilize/ integrate physical activity and nutrition in treatment of different diagnoses, e.g. cancer, diabetes, obesity, high blood pressures etc., and effective methods and tools to use in this work.

It is a need for increased documentation on what effects physical activity and diet might give, and more research is needed to find good and effective models to use with patients with obesity or other diseases related to unhealthy eating and physical inactivity.

V.6. Addressing the obesogenic environment

In which ways can public policies contribute to ensure that physical activity be “built into” daily routines?

Which measures are needed to foster the development of environments that are conducive to physical activity?

Creating physical environments that facilitate and encourage an active life style and physical activity is an important aspect of work to prevent overweight, obesity and chronic diseases. This includes transport systems that strengthen the competitiveness of active travel like walking and cycling. It has been proved that qualities in the physical environment influence the level of physical activity within various groups of the population.

Norwegian authorities are currently working on developing better planning procedures and tools that integrate health aspects and physical activity more efficiently. This includes, among other efforts, health impact assessments (HIA) and their integration into ordinary planning procedures, pilot projects related to health and planning at the municipal level, the development of municipal health profiles, and various efforts related to ensure improved

accessibility and more universal designs. The Planning and Building Act, which is currently under revision, is viewed to be of crucial importance in the work to create more health-enhancing surroundings, and health aspects are now explicitly stated in the regulations and requirements for impact assessments. The development of guidance material (checklists and other tools) for practical work with new regulations and planning procedures is also an area of high priority.

More active participation of children and adolescents in planning processes is another field of interest, which is sought to be developed in order to create more activity-encouraging environments. A national plan for children's health and environments is being developed, and national planning authorities and health authorities are currently investigating what is needed to obtain better participation of children and adolescents in planning processes.

Active transport is another field of priority, as walking and cycling on short travels is an easy way of integrating physical activity into everyday life. Main areas of action is better facilities for cycling and other forms of active travel, and both planning authorities and transportation authorities at different levels are therefore essential actors of action. A National Cycle Strategy was developed in 2003, and a national network of "cycle cities" is currently seeking to find better ways to improve cycling facilities and promote cycling. Dissemination of good practice and knowledge of the interrelatedness of transport planning and health issues is an important part of this work. Establishing better knowledge of children's transportation habits (school journeys, etc), and causes for the current situation and trends, is another field of priority.

School yards and kindergarten outdoor environments are other important arenas where everybody is reached and children spend great amounts of time both within and outside the school/kindergarten time.

V.7. Socio-economic inequalities

Which measures, and at what level, would promote healthy diets and physical activity towards population groups and households belonging to certain socio-economic categories, and enable these groups to adopt healthier lifestyles?

The fact that so-called lifestyle choices follow clear socioeconomic gradients in most European populations, points to a need for structural measures in this field. Although healthy behaviours are indeed subject to individual choices, they are also effects of socioeconomic backgrounds which the individuals do not choose. Physical environment, social background and political influence are factors that are of major importance for the health of the population. Society is able to affect individual decisions by obtaining and procuring knowledge and influence peoples attitude, and it should indeed exploit every opportunity of positive persuasion. Furthermore measures that focus on "Healthy" decisions and make these more attractive must be taken. Public action for healthier lifestyles should therefore aim at making healthy choices easier. Availability and price are two factors influencing individual choices that can be used for intervention.

For instance, the Norwegian School Fruit Programme evaluated the effects of providing school children with free fruit and vegetables versus a system with parent paid fees. The results showed that pupils in the free fruit group had significantly higher intake of fruit and vegetables than pupils in the fee-based group (as well as pupils in no-fruit schools).

Moreover, non-subscribers in a fee-based arrangement are likely to be children of less advantaged socio-economic background.

How can the “clustering of unhealthy habits” that has frequently been demonstrated for certain socio-economic groups be addressed?

Cooperation between different health personnel and others who work with diet, physical activity and smoke cessation, is necessary. Low-level-activities are also important in this regard.

A special challenge is to reach immigrants who often need information in their own language. Activities initiated must also be culturally acceptable.

V.8. Fostering an integrated and comprehensive approach towards the promotion of healthy diets and physical activity

Which are the most important elements of an integrated and comprehensive approach towards the promotion of healthy diets and physical activity?

Public health work requires inter-sectorial effort because the necessary conditions for good health in the population are to be found within various sectors of society. For this reason the work to promote public health, including the endeavours to enhance healthy diet and increase the levels of physical activity in the population, must be more comprehensive than the domain of the health sector. Important elements of this are, among others, partnerships as a main strategy for a more committed, permanent and inter-sectorial cooperative process, and voluntary efforts for public health and physical activity. Voluntary efforts constitute a vital force in public health work; particularly in the endeavour to promote public health through increased physical activity. The sports and outdoor life organizations are key agents in these efforts, among other factors because of their well developed local networks of clubs.

V.9. Recommendations for nutrient intakes and for the development of food-based dietary guidelines

In which way could social and cultural variations and different regional and national dietary habits be taken into account in food-based dietary guidelines at a European level?

Food-based dietary guidelines must be decided at the national level, because they will depend on national dietary habits. However, the basic recommendation can be common, for example the level of intake of fruit and vegetables recommended. It can therefore be useful to share experiences and discuss ideas concerning such recommendations. The invitation recently sent from EFSA to a workshop on this issue is therefore welcomed.

V.10. Cooperation beyond the European Union

Under which conditions should the Community engage in exchanging experience and identifying best practice between the EU and non-EU countries? If so, through which means?

Relevant channels are already existing structures like the European network on Nutrition and Physical Activity and working groups established by EFSA, and in relevant cooperation with WHO, FAO and Codex Alimentarius. One example on such cooperation is the planned conference on obesity, diet and physical activity, that will be organised by the WHO Regional office of Europe in Istanbul in November this year.

V.11. Other issues

Are there issues not addressed in the present Green paper which need consideration when looking at the European dimension of the promotion of diet, physical activity and health?

Research on cost-benefit of different measures should be strengthened, as well as developing indicators and tools for more healthy planning and decision making within different sectors.

Which of the issues addressed in the present Green paper should receive first priority, and which may be considered less pressing?

Food labelling should be given high priority, together with possible systems for monitoring of diet, physical activity and health (and obesity) at the European level. Also risk assessment and monitoring of high intakes of nutrients should be given priority, to prevent harmful levels of intake as a result of fortification and (or food supplements).

Concerning physical activity, high priority should be given to follow up on the 4th Minister Conference on Environment and Health, in the European region (see below).

Concluding remarks

In Norway, an action plan on physical activity was launched in December 2004, and an action plan on promoting healthy diet will be finalized this autumn. A basis for both plans is the Global Strategy on Diet, Physical Activity and Health adopted by WHO in May 2004. The Norwegian action plan on physical activity 2005-2009 - *Working together for physical activity* – is a major effort in the direction of getting more sectors involved in the work to prevent overweight, obesity and chronic diseases. Eight ministries were involved in the development of this plan, and they are now central agents in the implementation of the plan, that includes 108 different actions to be taken. Norwegian authorities are currently working on a communication strategy that aims at making the plan and its implications better known among decision makers, planners and other stakeholders within different sectors, in order to enforce the power of implementation.

The ongoing work on an action plan on healthy diet involves cooperation between eleven ministries, and it involves many interested stakeholders. In addition to these two action plans, the Norwegian government has recently decided to develop a national, long-term, cross-sectoral strategy against social inequalities in health. This strategy is expected to be ready early in 2007. As a following up of the 4th Minister Conference on Environment and Health in 2004, the Norwegian Government has decided to develop a Children's Environment and Health Action Plan for Norway.

This National Action Plan will be finalized during 2006.

The Norwegian Ministry of Health and Care Services appreciate this opportunity to comment the Green Paper, and we look forward to a constructive dialog with the European Commission in further development of public health strategies.

Yours sincerely,

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