

DISCURSOS Y EXPOSICIONES

FROM NATIONAL EXPERTISE TO EUROPEAN IMPACT. FEAM'S ROLE IN SHAPING HEALTH POLICY IN EUROPE

DE LA EXPERIENCIA NACIONAL AL IMPACTO EUROPEO. EL PAPEL DE FEAM EN LA CONFIGURACIÓN DE LAS POLÍTICAS SANITARIAS EN EUROPA

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European health policy is entering a phase of sustained complexity, marked by the convergence of demographic change, rapid technological development, geopolitical uncertainty, and rising expectations from citizens regarding access to care, innovation, and protection. Decisions taken at European level increasingly shape national health systems, clinical practice, research priorities, and regulatory frameworks, often with direct and immediate consequences for professionals and patients alike. At the same time, the pace of policy development, driven by political urgency and societal pressure, does not always align naturally with the rhythms of medical science, which depends on careful evaluation, accumulation of evidence, and professional judgment formed over time.

This growing gap between decision making and medical reality raises a fundamental question for Europe. How can health policies remain scientifically sound, clinically relevant, and ethically grounded, while responding to urgent political and societal demands. It is precisely at this intersection that academies of medicine have a critical role to play. By combining scientific authority, clinical experience, and institutional independence, they are able to offer a form of collective reflection which complements the speed and pragmatism of policy processes, without being detached from real world constraints.

The Federation of European Academies of Medicine, has the responsibility of representing this collective voice at European level. FEAM brings together national academies of medicine and medical sections of academies of sciences from across Europe, each deeply rooted in its own health system and scientific tradition, yet united by a shared commitment to evidence based medicine, professional integrity, and service to society. Holding this position goes beyond institutional representation. It entails the responsibility to ensure that medical science informs European health debates in a way which is timely, credible, and firmly connected to the realities of clinical practice and public health.

FEAM was created to respond to a simple but enduring challenge. As European integration in health related fields advanced steadily, medical expertise remained largely organised at national level, while key decisions affecting regulation, research, data governance, and preparedness increasingly moved to the European sphere. The federation exists to bridge this divide, allowing the experience and knowledge of European medicine to inform policy discussions in Brussels and beyond, while remaining anchored in national contexts and professional practice. This article reflects on FEAM's position within the European science and policy landscape and outlines the strategic priorities which guide its work today. It draws on accumulated experience, published outputs, and recent strategic discussions, and seeks to contribute to the scientific and professional dialogue at a moment when informed and independent medical advice is more necessary than ever.

FEAM was founded in the late 1990s, at a time when European integration was accelerating in areas with direct consequences for health, including research policy, medicines regulation, and public health coordination. National academies of medicine were increasingly aware that decisions taken at European level were shaping national frameworks, while the medical voice remained fragmented and insufficiently visible in European debates. FEAM emerged as a federation rather than a centralised body, designed to respect the autonomy of its members while allowing their expertise to be expressed collectively and more effectively at European level.

Over time, FEAM has developed into a network bringing together academies of medicine and medical sections of academies of sciences from across Europe. Its membership reflects a wide range of health systems, clinical cultures, and scientific traditions, which strengthens the relevance of its work by ensuring that advice reflects both shared European challenges and the practical realities faced by health professionals in different national settings. Throughout this evolution, FEAM's mission has remained consistent. It aims

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to provide high quality scientific advice on health related issues of European relevance, with a strong emphasis on clinical insight, public health impact, and ethical responsibility.

FEAM's credibility is rooted in the nature of its membership and in the way the federation operates. It brings together institutions which share a long tradition of scientific rigor, professional responsibility, and public service, including long standing academies such as the Royal National Academy of Medicine of Spain. FEAM does not seek to replace the voices of its member academies, but to articulate them collectively at European level, drawing strength from their authority and diversity. Its contributions to policy debates are grounded in the expertise of its members and in working methods which emphasise careful analysis, peer exchange, and clarity, allowing European decision makers to engage with medical perspectives which are both independent and informed by practice.

Through regular interaction with European institutions, including the European Commission and the European Parliament, FEAM ensures that medical perspectives are present in discussions which increasingly shape national health systems. Its involvement in the Science Advice for Policy by European Academies framework provides a structured channel through which medical expertise contributes to the Scientific Advice Mechanism of the European Commission. This role reflects FEAM's position as a trusted interface between national academies and European decision makers, ensuring that collective medical knowledge informs policy development in a coherent and constructive manner, without blurring the respective responsibilities of science and politics.

Within the broader European science and policy ecosystem, FEAM acts as a bridge between medical science and decision making. It translates scientific knowledge into policy relevant insights, while also bringing policy questions back into expert discussion within academies. This two way function distinguishes FEAM from professional associations focused on specific disciplines and from research consortia centred on project delivery. FEAM addresses strategic and cross cutting issues, with particular attention to long term implications for patients, clinicians, and health systems, as well as to the ethical dimensions of health policy choices.

In addition to its advisory work, FEAM has developed the Annual Lecture as a flagship moment for reflection and dialogue at European level. Conceived as more than a formal event, the Annual Lecture provides a space where senior clinicians, researchers, policymakers, and stakeholders can engage with major health challenges which sit at the intersection of science, medicine, and policy. Topics are selected for their European relevance and long term importance, often at moments when policy debates are intensifying but scientific

consensus or clinical perspective remains insufficiently visible. By combining scientific depth with policy relevance, the Annual Lecture reinforces FEAM's role as a convening platform and gives concrete expression to its mission.

Over time, the Annual Lecture has contributed to strengthening FEAM's visibility and credibility within the European policy environment. It allows FEAM to articulate its priorities in a public and structured manner, while fostering dialogue rather than confrontation. For member academies, it offers an opportunity to contribute to a shared European platform while maintaining strong national identities, and it illustrates how collective medical expertise can enrich policy discussion without becoming prescriptive.

In recent years, FEAM has contributed to several major European debates which illustrate both the opportunities and the challenges of science informed policy. Artificial intelligence and digital health provide a clear example. European institutions have invested significant political and financial capital in digital transformation, through regulation, research programmes, and industrial strategies. At the same time, the integration of digital tools into clinical practice raises questions which extend beyond technical performance or regulatory compliance. FEAM's engagement in this area reflects concern that policy frameworks risk advancing faster than evidence of clinical benefit, safety, and usability, and that insufficient attention is paid to how these tools affect professional responsibility and patient trust.

From a medical perspective, artificial intelligence must be assessed in real clinical settings, with attention to outcomes, workflow integration, and unintended effects. FEAM has therefore emphasised the need for robust validation, ongoing monitoring, and clear accountability frameworks, particularly as automated systems become embedded in routine care. European policy discussions increasingly address transparency and explainability, yet clinicians remain responsible for decisions affecting patients. FEAM highlights the importance of clarifying how responsibility is shared between developers, institutions, and professionals, without undermining clinical autonomy or patient safety.

FEAM also draws attention to the challenge of deployment. Many digital solutions demonstrate promise in controlled environments but fail to scale due to organisational constraints, lack of training, or misalignment with care pathways. From FEAM's perspective, digital health policy must address these systemic factors if European investment and regulation are to translate into meaningful improvements in care.

The One Health agenda illustrates another area where European policy ambition and medical reality must be carefully aligned. One Health has gained political visibility through strategies addressing antimicrobial resistance, prepar-

edness, climate adaptation, and food systems. While the concept is now firmly established in policy language, its implementation often remains fragmented, with medical consequences treated as downstream effects rather than central drivers of decision making.

FEAM's contribution to One Health debates is grounded in the clinical and public health implications of interconnected risks. Zoonotic outbreaks, environmental degradation, and antimicrobial resistance translate directly into clinical burden, diagnostic uncertainty, and pressure on health systems. FEAM therefore argues for stronger integration of medical expertise into One Health governance structures, and for sustained investment in prevention, surveillance, and early detection, rather than reliance on crisis driven responses.

Education also plays a key role. FEAM supports the integration of One Health perspectives into medical education and continuing professional development, recognising that future clinicians will increasingly confront health challenges shaped by environmental and societal change. From a policy perspective, this requires coordination across sectors and long term commitment, rather than isolated initiatives.

Health systems resilience has emerged as a central theme in European debates following recent crises. Initiatives addressing preparedness, coordination, and supply security have generated valuable momentum, yet FEAM observes a tendency to frame resilience primarily in technical or logistical terms. From a medical standpoint, resilience is equally about people and institutions. Workforce shortages, burnout, and declining attractiveness of health professions represent structural risks which no emergency framework can compensate for.

FEAM therefore places strong emphasis on workforce planning, training capacity, and professional wellbeing as core components of resilient health systems. It also draws attention to the cumulative impact of regulatory and administrative burden on clinical practice. European policies, even when well intentioned, can contribute to complexity at the frontline. FEAM advocates for policy design which considers how new requirements affect care delivery, professional time, and patient interaction, recognising that resilience depends as much on trust and engagement as on infrastructure.

Medicines policy represents another area where European political priorities and clinical realities intersect directly. Shortages, unequal access, and medication waste have brought medicines policy back to the forefront of European debate, reinforced by concerns around geopolitical vulnerability and sustainability. Initiatives aimed at securing critical medicines and revising pharmaceutical legislation reflect an ambition to strengthen European capacity and strategic autonomy.

FEAM's engagement in this area is shaped by the clinical consequences of policy choices. Shortages affect treatment decisions, continuity of care, and patient outcomes, particularly for vulnerable populations and chronic conditions. FEAM contributes by highlighting how supply disruptions translate into clinical risk, and by supporting approaches which balance innovation incentives with affordability, availability, and responsible use. Medication waste introduces an additional dimension, linking sustainability with access and efficiency, and FEAM supports evidence based strategies which involve clinicians, pharmacists, and patients.

Health data governance has become one of the most complex and politically sensitive areas of European health policy. Initiatives such as the European Health Data Space promise improved care, more efficient research, and better public health intelligence, while raising questions around privacy, quality, and governance. FEAM approaches these debates from a clinical perspective, emphasising that data quality is a determinant of patient safety and scientific validity, not a technical detail.

Clinicians are central to data generation and interpretation, yet they are often marginalised in governance discussions. FEAM argues that meaningful professional involvement is essential, both to ensure data reliability and to maintain patient trust in secondary data use. At the political level, FEAM recognises the tension between accessibility and protection, supporting frameworks which enable responsible data use while respecting confidentiality, proportionality, and ethical boundaries.

Across all these priorities, FEAM maintains a strong commitment to scientific integrity as a guiding principle. European health policy increasingly operates under public scrutiny and political pressure, where uncertainty can be perceived as weakness. FEAM defends the role of honest scientific communication, including acknowledgement of limits and uncertainty, as a condition for trust between science, policy, and society.

FEAM's governance and working methods are designed to support this mission. The federation operates through committees and working groups aligned with its strategic priorities, drawing on experts nominated by member academies to ensure high scientific standards and diversity of perspectives. Outputs follow structured processes, including internal review and peer exchange, with careful attention to balance and clarity. The Secretariat plays a central role in coordination, editing, and institutional continuity, while governance bodies provide strategic oversight and direction. With this structure, FEAM aims at increasing the number of bottom up projects while remaining as active on top-down initiatives to broaden the impact of its work on targeted topics.

Looking ahead, FEAM aims to strengthen its role as a European reference point for medical science advice. This involves deeper and more

sustained engagement with European institutions, closer collaboration among member academies, and continued investment in communication which remains accessible without compromising scientific rigor. Europe faces complex and interconnected health challenges, and effective policy depends on credible scientific input. Through cooperation, expertise, and professional responsibility, FEAM stands ready to contribute to European health policy in the service of patients, clinicians, and societies across Europe.

CONFLICT OF INTEREST

The author of this article declares that there is no conflict of interest of any kind regarding the content of this work.

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