

Morning Health Care: Exit strategy — DG SANTE on cancer — Belgian doctors unhappy

by [Carlo Martuscelli](#)

Apr 23, 2020, 7:15 AM

Press play to listen to this article

0:00 / 25:55

Voiced by Amazon Polly

MORNING HEALTH CARE

By Carlo Martuscelli

With Sarah Wheaton, Judith Mischke, Ashleigh Furlong, Jillian Deutsch, Carmen Paun and Ian Geoghegan

SNEAK PEEK

- Study suggests that lockdowns can be eased without too much pain.
- ‘Cancer still a priority,’ DG SANTE’s deputy director general says.
- Belgian doctors have an axe to grind with the health minister.

Welcome to Thursday’s Morning Health Care! Open your Czechbook and help your local boozer — that’s the aim of the ‘Zachraň hospodu!’ campaign. For non-Czech speakers, that means save the pub, and [Radio Prague International](#) reports that loyal barflies in the central European country are doing just that by buying “vouchers” and providing liquidity to businesses under lockdown. The vouchers can be redeemed for drinks when things start back up again. I’ll raise my glass to that.

Get in touch: cpaun@politico.eu, jdeutsch@politico.eu, swheaton@politico.eu, cmartuscelli@politico.eu, jmischke@politico.eu, afurlong@politico.co.uk and hfessenden@politico.eu. Tweet us [@carmenpaun](#), [@deutschjill](#), [@swheaton](#), [@carlomartu](#), [@AnotherEUJourn](#) and [@ashleighfurlong](#)

DRIVING THE DAY

THE MIDDLE PATH: There's a lockdown exit policy "sweet spot" that minimizes coronavirus deaths while averting economic catastrophe. That's the hypothesis in a [paper](#) authored by Andrea Ichino, a professor of economics at the European University Institute, Carlo Favero from Bocconi University and Aldo Rustichini of the University of Minnesota. They plan to submit it for peer review.

Relax restrictions too much and the COVID-19 death toll quickly mounts. But a prolonged total lockdown could wipe as much as a quarter off the economy without significantly saving more lives compared to milder measures, the academics write.

Maths and modeling: Ichino explained that the modeling is based on the neighboring Italian regions of Lombardy and Veneto. They represent two extremes, with Lombardy the hardest hit in the country by the coronavirus while Veneto has so far escaped relatively unscathed. The academics then classified the population hypothesizing that, based on age and occupation, different groups have different R0 numbers — a measure of how many people one person with the coronavirus goes on to infect.

Easy does it: According to their modeling, Ichino said that a complete lifting of lockdown measures would be extremely dangerous. "It's true that it would reduce economic damage, but it would have a huge cost in human lives," he explained. A mixed approach could yield an optimal outcome.

For him, the key is looking at age as one of the criteria for lifting restrictions. Letting those below the age of 50 get back to work, while leaving older workers in high risk occupations — such as health care or schooling — at home would keep infections under control while allowing the economy to crank back up.

Age before industry. "So far, the conversation about exiting lockdown hasn't looked at age as a factor, instead prioritizing industry sectors," Ichino explained. He believes this has been an oversight. The three study authors have written an [editorial](#) in the Corriere della Sera newspaper on their findings.

CORONAVIRUS TESTING

SPAIN PLANS ANTIBODY TESTING CAMPAIGN: Spain is planning to roll out antibody testing on a large scale to determine what portion of the population has contracted coronavirus. The health ministry [said](#) it will collaborate with regional authorities on the study involving over 36,000 households. Antibody tests aim to establish who has had the disease and has since developed an immune response to it.

THOUSANDS TO PARTICIPATE IN SURVEILLANCE STUDY: The U.K. has kicked off a massive study to assess the current rate of infection in the country, with 25,000 people expected to be involved in the pilot phase and up to 300,000 in total over the

next year. Announced today, the study will involve both swab testing for the virus and antibody testing to ascertain whether someone had the virus. The U.K. has come under intense pressure in recent weeks over its testing regime, with many calling out the government for changing strategies and for carrying out far fewer tests than other countries, such as Germany.

COMMISSION

NEW HEALTH PROGRAM COMING IN MAY? That's the suggestion from an [internal note](#) on the recovery plan nabbed by POLITICO. The last line mentions the Commission's plans to present a new proposal for the Health Program next month.

HOW COVID IS CHANGING SANTE'S AGENDA: On both process and substance, the coronavirus pandemic is affecting the Commission's health plans, DG SANTE Deputy Director General Martin Seychell said Monday — in remarks that take on greater significance given those May plans.

Cancer: Europe's Beating Cancer Plan "remains a priority," he said during a Zoom session sponsored by the European Federation of Pharmaceutical Industries and Associations (EFPIA), and so far the Commission feels vindicated in its push to take a holistic approach to prevention and care. But "COVID has had an enormous disruptive effect" on the health system broadly, such as delaying screenings or cutting off access to treatment. (Another speaker, Melanoma Patient Network Europe founder Bettina Ryll, cited reports that cancer referrals have dropped by 70-80 percent.) The Commission's recovery plan may need to address these issues, Seychell said, with concerns that the "indirect effects of COVID...could eventually be much bigger than the direct effects."

The lockdowns have thrown a "spanner in the works" when it comes to involving citizens in designing the cancer plan, Seychell added. Responses to the consultation on the plan are coming in at a regular clip, but the Commission will need to "find a way to kind of catch up on the lost time," he said.

Pharmaceutical strategy: The pharma component of the industrial strategy has become "even more important," Seychell said. The pandemic highlights the need to "ensure greater security of supply," as well as recovering Europe's status as a "hub for innovation," he added. "There are some clear signs of the direction which we should be heading," Seychell concluded, though sadly, he did not offer details about that direction.

****As the world looks for a way out of the coronavirus lockdown,** some experts are drawing on lessons learned in the early years of the AIDS epidemic, when the development of tests able to identify carriers of the infection revolutionized the way

society dealt with the virus. [Read more on this in the latest edition of POLITICO Telescope: The New AIDS Epidemic.](#)**

VACCINES

VACCINE PRICE-TAG WILL BE HUGE: Experts estimate that the cost of developing a vaccine for COVID-19 will run into billions of euros, and it's not clear if the European Union is willing to pay. The Coalition for Epidemic Preparedness Innovations (CEPI) reckons it will take \$2 billion to develop a successful vaccine – and that excludes manufacturing costs. And while the EU has been funding a number of projects, it lags some way behind the U.S. in total spent. Jillian has the full story [here](#), or down below.

Intransparent meeting: The EU has ponied up for one vaccine, backing an €80 million loan for Germany's CureVac. But the company didn't list itself in the EU's Transparency Register until weeks after it had a videoconference meeting with Commission President Ursula von der Leyen; a no-no. Scroll down for the [full article](#).

NO FREE LUNCHES: The International Association of Mutual Benefit Societies (AIM) asked that any EU public funding for a vaccine be tied to accessibility clauses to ensure people can get them if they eventually come to market. "Intellectual property (IP) deserves a specific attention as they maintain prices high, which mechanically prevents access," notes the [position paper](#) written by the umbrella body representing mutual benefit societies. Other demands include full reimbursement for an eventual vaccine and the possibility of EU joint procurement on a voluntary basis.

PHARMA

THE SHOW MUST GO ON: Despite the headwinds, pharma business continues. A group of companies that includes the venture arms of Pfizer and Merck KGaA among others have pledged [a total of €10 million](#) to fund FoRx Therapeutics AG, a biotechnology company focused on cancer research. The company will target vulnerabilities in cancer cell DNA replication to develop new drugs.

S&D'S SHORTAGES LEAD: Croatian MEP Romana Jerković will be the Socialist and Democrats' shadow rapporteur for the opinion "Shortage of medicines: how to address an emerging problem." Jerković, who joined the Parliament in February, said in a [press release](#) that it's "imperative to increase R&D investment so that Croatian and European drug manufacturers can secure the production of essential medicines, and by way of innovation stay competitive in the European and global markets."

CORONAVIRUS THROWS UP QUESTIONS: There's still plenty we don't know about SARS-CoV-2, and knowledge for policymakers is power. Look out in your inboxes later today for our colleagues' deep dive into these gaps in our knowledge.

****EU capitals and European commissioners are pushing competing plans for a reboot of the bloc's economy** hit by the coronavirus crisis, and the EU budget is right at the heart of it. EU leaders are meeting today via video-conference for a "strategic discussion" on the next long-term budget. **Don't miss developments with EU Budget Pro, [request a trial today](#).****

AROUND THE BLOC

DOCTORS IN BELGIUM FILE COMPLAINT AGAINST DE BLOCK: An association of doctors in the southern Belgian town of Mons has filed a complaint with the Order of Physicians in Flanders and Brussels against Health Minister Maggie De Block in her capacity as a doctor, according to [Belgian media](#).

The doctors took issue with comments De Block made in the early days of the coronavirus outbreak, including her assertion that the virus was a "little flu," and her more recent statement that wearing a face mask does not "make sense scientifically." In a tweet in early February, De Block also called doctors warning about the threat of coronavirus "drama queens," according to the report.

Reopening plans: Meanwhile, French language newspaper [Le Soir had a leak](#) of the Belgian government's draft lockdown exit strategy. Shops where social distancing is possible would reopen. Citizens could meet with family or close friends, though this would be limited to one night a week and the same group of around 10 people. Parks and playgrounds would reopen and certain outdoor sports would be allowed again. Restaurants and bars would remain closed, however. Belgium's National Security Council, which brings together experts and the different governments in the country, will decide its exit strategy on Friday.

REGULATORY RAMP-UP: France's drug regulator [announced](#) that it has significantly upped the pace of regulatory approvals for clinical trials. The Agence Nationale de Sécurité du Médicament et des Produits de Santé said that since the start of the coronavirus outbreak it has assessed clinical study requests in seven days on average, compared with the 60 days specified by normal guidelines. A total of 52 requests to go ahead with studies were made in the period, with 19 relating to hydroxychloroquine and chloroquine.

ROMANIA TO START USING CONVALESCENT PLASMA TREATMENT: The Romanian health ministry [published guidelines](#) Wednesday for collecting, testing, processing and distributing plasma from people who have recovered from COVID-19 to use in treatment for patients with severe infection. Donation by those recovering will be voluntary. The beneficiaries will be patients hospitalized in intensive care units with a fast progression of COVID-19 and who are to be put on a ventilator or who have been mechanically ventilated for less than 10 days. They would have to give their consent before receiving plasma transfusion, according to the ministry.

POLISH VIRUS CRACKDOWN HITS COMMUTING HEALTH STAFF: Poland's border measures, now in place for nearly a month, were meant to stymie the spread of the coronavirus. But they have led to labor shortages for its neighbors in critical areas such as health care and food. Several doctors in the German federal state of Brandenburg, among others, were left with two options: stay home in Poland unable to work, or live on German hospital grounds or in hotels separated from family for weeks. More [in the story](#) by Zosia and Judith.

WHAT WE'RE READING

South Korea finds patients who test positive post-recovery from coronavirus barely infectious, [Reuters](#) reports.

Surging demand for COVID-19 tests and potential treatments have helped offset the financial hit from the pandemic for Switzerland's Roche, the [Wall Street Journal](#) reports.

A mysterious blood-clotting complication is killing coronavirus patients, from the [Washington Post](#)

Researchers at an Italian hospital managed to isolate the coronavirus in a person's tear, according to [ANSA](#).

Australia is pushing for the World Health Organization to have powers similar to those of nuclear weapons inspectors to enter countries, with the aim of averting future pandemics, from the [Sydney Morning Herald](#).

[Axios](#) looks at the Chinese lab at the center of the coronavirus controversy.

The [Financial Times](#) wrote an in-depth piece looking at what contact tracers do.

A study shows that analysis of waste water can be used to detect the presence of coronavirus in the population, from [La Repubblica](#).

An exodus of thousands of Eastern European home nurses has left Germany in the lurch, reports [Delfi](#).

POLITICO PRO STORIES

Coronavirus vaccine could cost more than Europe's willing to pay

— By Jillian Deutsch

As countries race to develop a coronavirus vaccine, the price tag is going to be huge — and Europe doesn't have the deepest pockets.

It took the threat that U.S. President Donald Trump could be trying to lure CureVac, a German biotech firm, to the U.S. [before the European Commission said it would](#) lend the company €80 million to try to produce a successful coronavirus vaccine in Europe.

That's just a drop in the bucket of what will be needed to get any one of the dozens of vaccine developers over the finish line. Each stage of vaccine development comes with a hefty price tag, and there are more than 70 candidates in development.

What's it going to cost? "Oh, billions — billions and billions and billions," said Duane Schulthess, managing director of consultancy Vital Transformation. "We're talking about a prophylactic vaccine for the entire population of the planet."

After a candidate vaccine is developed, it first has to go through animal testing before even beginning human trials to test safety, which is followed by larger-scale tests to prove effectiveness. The vaccine then needs to be approved by regulators and produced on a vast scale — potentially billions of doses.

The Coalition for Epidemic Preparedness Innovations (CEPI), a foundation that finances research, estimated it will take \$2 billion to get a successful vaccine for the coronavirus — not including manufacturing costs. Bruegel, an economic think tank, [wrote that](#) "public budgets for these efforts need to be multiplied up several times over."

The Commission is hosting a pledging conference May 4 to raise money for a vaccine as well as diagnostics and therapeutics for the entire world. It's working with other vaccine funders including the Wellcome Trust and CEPI to raise \$8 billion to put toward this goal.

When asked by POLITICO, the Commission declined to say whether it would itself finance more vaccine projects.

Work hard for the money

British vaccinologist Sarah Gilbert is leading an effort to develop a shot at the University of Oxford made from a chimpanzee virus, which will become the first to enter clinical trials in Europe. Funding has, at times, been a challenge, she said.

Early on, Gilbert's team received £2.5 million from the U.K.'s national science funders, which helped get things in order for clinical trials: "But then we needed more."

"It's an unusual situation, trying to raise funding," she said, noting that as soon as she writes a grant application, the project has advanced further. To get through the rest of the (more expensive parts of the) process, Gilbert's team was this week given another £20 million after the team's announcement that it would get to clinical trials; the U.K.

government said it was also making £22.5 million available to a separate vaccine project at Imperial College in London.

Experts say that, overall, Europe does a good job of funding earlier research phases, which are often done by smaller biotech companies or research institutions. But things get more expensive as the vaccine moves along: Because of this, it's common to see larger life science companies take over later in the development.

“Europe is great at basic science,” Schulthess said, referring to early-stage research. “But when it comes time for the rubber to hit the road, and you start needing hundreds of millions of dollars to start moving into late-stage clinical research, you can't really raise those sort of dollars or euros in Europe.”

In 2019, 80 percent of Europe's mature biotech companies were acquired by larger American firms.

Even for those vaccines that enter clinical trials, only 20-40 percent are successful, Bruegel wrote. That means many millions will go toward clinical trials that show a vaccine is not safe or effective.

Jeremy Farrar, the director of the Wellcome Trust, said the key here is that countries need to invest in multiple vaccines — all the way to manufacturing at-scale and at-risk — because there's no guarantee which vaccines will work and where they'll come from. “That's not a usual way of working,” he said.

“That's why we're going to need a global coalition that's willing to work in a different way,” he said.

Meanwhile, Bill Gates said he is going to “waste” billions to build large manufacturing plants to produce a vaccine as soon as it's ready — even if that means producing millions of doses that don't end up being used.

“I think before the next pandemic, we need to think about how we're better prepared to be able to respond rapidly,” Gilbert said.

No gold diggers

The Commission hasn't been penny pinching.

In January, it gave money to 18 research projects, including €3 million to OPENCORONA in Sweden, and €2.7 million to Prevent-nCoV in Denmark, both vaccine developers, and another €3 million to a project that helps vaccine research.

It also gave €1.3 billion between 2014 and 2020 to global health initiatives, including [€200 million](#) to Gavi, the Vaccine Alliance (a global partnership between funders and

industry), a Commission spokesperson said.

Meanwhile, the EU has a partnership with the pharma industry specifically focused on drug development. The Innovative Medicines Initiative (IMI) receives close to €230 million a year from the EU, and it recently added €45 million specifically for the coronavirus — but this money explicitly did not go toward vaccines. IMI said this was because other funding organizations are working on vaccines and it didn't want to duplicate their efforts.

However, the EU has so far put much less than the U.S. into helping vaccine developers.

Johnson & Johnson, for example, committed \$1 billion with the U.S.'s Biomedical Advanced Research and Development Authority (BARDA) to develop its vaccine. BARDA, in turn, has helped fund another vaccine project from Sanofi, a France-based pharmaceutical company using technology from GlaxoSmithKline (GSK).

Europe doesn't have a BARDA-like institution, a government agency established by the U.S. to plow funding toward emergencies.

David Loew, head of vaccines at pharmaceutical company Sanofi, said Europe needs to set up more public-private partnerships to make it less risky for pharmaceutical companies to enter the vaccine race.

“A vaccine is already a big endeavor, because you're putting a lot of money at risk, and you don't know if it's gonna work,” Loew said. “I think Europe could help by building these public-private partnerships.”

Can't buy me vaccines

There is a great deal of uncertainty about how much money a company is going to recoup even if it's the lucky one to develop the vaccine first.

Often at the request of governments during health emergencies, pharma companies drop their daily work to search for a specific vaccine. They did this successfully for Ebola; but that's not always the case — researchers didn't get a vaccine against Zika or the (different) coronaviruses that caused SARS and MERS before the outbreaks died down and the public moved on. Companies have felt burned in the past.

MSD, which developed a vaccine against Ebola, said it wouldn't continue developing vaccines against further strains, according to [STAT](#).

Many companies have jumped in to find a vaccine against the new coronavirus, risking huge sums if it fails to get through safety and efficacy tests. Companies like Janssen, a

subsidiary of Johnson & Johnson, are scaling up production to make millions of doses before they've been tested.

But even though the potential market would be huge and a company could score major reputational gain if it's successful, Bruegel said companies are prone to under-invest. "These returns on a COVID-19 vaccine might not be sufficiently interesting for private drug companies, compared to the high cost and risk," the think tank wrote.

Many civil society groups worry that if a big pharma company is the winner, it will sell its vaccine at high prices, putting it out of reach for developing countries.

[Sixty-one health groups](#) wrote to the European Commission last month demanding that any research using public money should include an affordability clause. "Given the public health urgency, we cannot allow a 'business as usual' approach in which market dynamics dictate price setting at the expense of rapid access," the letter reads.

Most experts agree that if we want a vaccine, governments will have to invest big money — and also that it's worth their while to do so. "The health, human and economic cost of COVID-19, which would be avoided if there was a vaccine, is difficult to appreciate," Bruegel wrote.

Sarah Wheaton contributed reporting.

Von der Leyen talks with CureVac broke transparency rules

— By Cristina Gonzalez

European Commission President Ursula von der Leyen held a videoconference with German biotechnology company CureVac in March without following the proper rules for Commission officials meeting with industry organizations.

The March 16 virtual meeting took place amid [uproar over reports](#) that U.S. President Donald Trump tried to woo CureVac to the U.S. and win exclusive rights to its experimental coronavirus vaccine for Americans. Later that day, the Commission [announced](#) it would back an €80 million loan from the European Investment Bank for CureVac "to scale up development and production of a vaccine against the coronavirus in Europe." ([CureVac](#) officials and [the White House](#) denied the allegations.)

The videoconference was organized "on the understanding that CureVac would, as a justified exception, register subsequently in the Transparency Register," said a Commission spokesperson — a status that the Commission's own rules require of organizations before they are allowed to meet with top officials.

At the time of the March 16 meeting, CureVac was not registered. CureVac only [registered](#) in the EU's Transparency Register on April 17, a month after the meeting took place. "The Commission confirms that CureVac did this," said the spokesperson.

The Commission also confirmed that European Investment Bank Vice-President Ambroise Fayolle took part in the meeting, as did Commissioner Mariya Gabriel, though the meeting [had yet to appear](#) as of Wednesday on Gabriel's website. The list of meetings is [supposed](#) to be updated within two weeks of it taking place.

The meeting took place "in the context of an unprecedented crisis," the Commission spokesperson said.

The CureVac meeting was the only meeting von der Leyen [lists](#) in March and April with outside interest representatives, as of Wednesday.

The spokesperson confirmed that the president "also exchanged [views] with other industry and business leaders in recent weeks, in the context of her work to tackle the coronavirus pandemic. All e-meetings will be put on the Transparency Register in due time."

CureVac previously received EU support in 2014: a grant of €2 million from the Commission's Framework 7 research and innovation program.

Sarah Wheaton contributed reporting.