

## **Cristian Buşoi: Personalised medicine key to treating serious health conditions**

Written by Martin Banks on 1 December 2017 in News  
News

Romanian MEP Cristian Buşoi told a conference that personalised medicine has become the “dominant therapy” for treating cancer and other serious health conditions.



**Cristian Buşoi** | Photo credit: European Parliament audiovisual

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The EPP group deputy was speaking at the first annual congress held by the European Alliance for Personalised Medicine (EAPM), which ran until 30 November.

Entitled, ‘Personalising your health: A global imperative’, the congress was being held in Belfast with the collaboration of the Estonian EU Council presidency and in association with Queen’s University Belfast and Visit Belfast.

The opening session dealt with the theme of 'Growth in personalised medicine - the promise for future generations'.

Seizing on this, Buşoi, a keynote speaker, said, "Action is necessary at a cooperative and EU level - in gaining new insights into diseases, personalised medicine is already becoming the dominant therapy for cancer and a host of other afflictions."

The MEP added, "Quality assurance needs to be further developed to respond to patients requirements. And affordability is the most crucial issue - can we 'afford' to beat cancer?"

Concerning the regulation of medicines in the EU, which is an integral part of personalised medicine, Dublin's Health Products Regulatory Authority chief executive Lorraine Nolan said, "I think we have a really good reputation in terms of regulations of medicines within the EU. We're viewed as open and progressive. Tough, but fair.

"Much has changed in the regulatory mindset - regulators are working to ensure that they stay abreast of the latest innovations. "

This was a theme that was expanded on by European Organisation for Research and Treatment of Cancer Director General Denis Lacombe, who noted, "New regulations should be good news. The European Commission has adopted a directive in order to pave the way for a pan-European research area. The principle is fine, the implementation is the problem."

Mark Lawler, Chair of Translational Cancer Genomics, Queen's University Belfast, said, "We must look at how to realise the promise of the patient-centred approach. Better methods of treatment and treatment education need to help the person at the level of the person."

Further comment came from Desmond Schatz MD, of the UF Diabetes Institute, who said, "There is a sense of urgency and a call for action on diabetes - understanding the disease is key to personalised medicine treating it.

"Diabetes is the epidemic of the 21st century - at present, there are 415 million sufferers, with 620 million projected by 2040. Treatment requirements are not being met by current methods."

Addressing the issue of diabetes, Peter Meeus, head of Region Europe, Shire, London, said, "With 415 million people living with the condition globally, and costing health-care systems about \$465bn annually, it's no surprise that much of the health-care world has its eyes on diabetes and the damaging effect it can have both economically and to the individuals who live with it."

The congress heard that with the world's population increasing and people living longer, models of treatment delivery are rapidly changing, and many of the decisions behind those changes are being driven by data.

Ewan Birney, director, European VBioinformatics Institute, Cambridge, said, "The bulk of our work [in genomics deployed standards] is done by tactical volunteers across the world. But there is still much to do, particularly concerning policy, and the regulation and implementation of science, and this is where Big Data truly comes into its own."

But Ruth March, of ETH Zurich, added a note of caution, warning, "The implementation of science is frequently like a post-code lottery, as to whether patients will receive the correct tests or not."

Her colleague Ernst Hafen added, "With my strong interest in human genetics and personalized medicine, I believe that an individual's control over his or her personal health data will be a key asset

for better and more effective health care, and the growth of big data posits legal, ethical and societal issues about health data ownership - it is very important to find commercial models permitting owners, not third parties, to benefit from personal data assets.”

## About the author

Martin Banks is a senior reporter for the Parliament Magazine

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