MedTech Europe
from diagnosis to cure

EU Sustainable Prosperity and Competitiveness:

Recommendations for implementing the EU Green Deal in Healthcare

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Executive Summary

MedTech Europe envisions a future where healthcare systems are environmentally and financially sustainable, equitable and resilient to future crises. In this future:

- The improved link between climate, sustainability and health across all political areas has led to health systems that are better at preventing diseases, minimising interventions, optimising the patient pathway and increasing the number of healthy life years of European citizens.
- The healthcare sector has embedded sustainability across operations, innovations and supply chain.
- A competitive medical technology industry is providing safe, innovative, and sustainable solutions for ever better patient outcomes.
- Such modernised healthcare systems serve patients within an overall resource-efficient, digitally enabled and competitive economy that fuels Europe's sustainable prosperity and competitiveness and leverages the EU Green Deal to drive benefits for people, planet and business.

Currently, the barriers to such a future remain manifold. They include a fragmented regulatory framework, inconsistent definitions and standards, a lack of harmonised tools and methodologies, missing safer alternatives, financial, technological and clinical limitations, staff and skills shortages, overall system inefficiencies and increased strains on complex global supply chains besides geopolitics.

In our view, transitioning to net zero in the healthcare sector requires embracing sustainability holistically, meaning continuously improving performance while maintaining the highest health and safety standards to satisfy patients' healthcare needs.

In the light of the European Commission's announced EU Sustainable Prosperity and Competitiveness Plan, **MedTech Europe issues ten recommendations for a patient centric EU Green Deal implementation in healthcare and the building of more sustainable, equitable and climate resilient healthcare systems within a Europe that is attractive for medical technology innovation:**

1. **Accelerate the roll out of renewable energies and smart clean energy infrastructures:** continuous access to renewable energies and heat in sufficient quantities and affordable prices are a precondition for decarbonising healthcare, including the medical technology sector.
2. Create the right structure to **foster collaboration and partnerships among all healthcare actors to drive system change** and continuously improve the social, environmental, and economic performance of healthcare systems.
3. Leverage the **transformational synergies of the Green and Digital agendas** to increase overall system efficiencies and sustainability performance.
4. **Truly harmonise rules to complete the European single market**, the EU's strongest asset and pre-requisite for a high level of environmental protection and a competitive medical technology industry in Europe.
5. Boost **a sustainable finance framework to support research & innovation** for the development and use of e.g., alternative, sustainable and safe materials, efficiency technologies, sustainable packaging, circular products or business models, preventive care, digital twins, green software or AI models.
6. Promote **value-based procurement** in a public sector that leads by example: relevant, harmonised and holistic standards and guidelines for sustainable public procurement should be promoted to drive systemic change and enable tangible benefits for all.
7. **Remove regulatory, financial, administrative and other barriers to sustainability in existing legislation** (e.g., regarding electronic Instructions for Use (e-IFU), or incentives in EU and national health budgets). Reporting requirements should be streamlined so that they are workable and fit for purpose. In

particular, ensure that **future environmental legislation is consistent with sector-specific regulatory requirements** and enhances the sustainability performance of medical technologies both, from a life cycle and care continuum perspective.

8. Develop **realistic, patient centric and economically viable transition pathways** that allow for sufficient time to transition for medical technology manufacturers, including their manufacturing supply chains, so that patients and practitioners can rely on uninterrupted access to medical technologies during the transition to net-zero.
9. Enable **circularity of medical technologies as part of the future Circular Economy Act** by removing political and regulatory barriers and setting the right financial incentives at European and national level.
10. Ensure **safe and sustainable design policies for transitioning to sustainable chemicals and materials** by simplifying chemical assessment processes, ensuring better consistency, coherence with sectoral legislation and optimising patient outcomes.

1. Introduction

MedTech Europe envisions a future where healthcare systems are environmentally and financially sustainable, equitable and resilient to future crises. An increased focus on the link between climate, sustainability and health across all political areas means that health systems have become better at preventing diseases and increasing the number of healthy life years of European citizens. Also, the healthcare sector has embedded sustainability across operations, innovations and supply chain. A thriving medical technology industry is one that provides safe, sustainable, innovative solutions in a modern, resource-efficient, digitally enabled and competitive economy with ever better patient pathways for all. Europe has succeeded in fuelling its sustainable prosperity and competitiveness including through leveraging the EU Green Deal to drive benefits for people, planet and business. Prioritising patient safety, reducing infections and investing in medical technology, is essential for delivering net zero care, as minimising the need for healthcare interventions significantly reduces its overall environmental footprint and subsequently, has the most significant impact on sustainability goals.

However, considerable collective action is required to achieve this vision. Currently, healthcare systems are facing many challenges: staff shortages, resource and supply constraints. Globally, if healthcare were a country, it would be the world's fifth-largest emitter of CO_2, accounting for over 5% of global emissions, more than the aviation or shipping sectors[1]. 71% of health care's climate footprint is attributable to Scope 3 emissions (production, packaging, transport, and disposal of goods and services that healthcare purchases)[2][3] to which medical equipment represent a meaningful percentage of the total carbon footprint of the healthcare system. In Swiss primary practices[4], for example, medical consumables produced 5.5% of overall CO2eq emissions, while in-house laboratory and X-rays contributed less than 1% each. Preliminary results of a German project indicate that medical products constitute 22% of the carbon footprint of University Hospital Heidelberg[5]. The WifOR-Institute's SEE-Impact Study[6] also shows that the MedTech industry's environmental and social footprint occurs primarily in the global supply chain.

[1] The 2022 report of the Lancet Countdown on health and climate change: health at the mercy of fossil fuels - The Lancet
[2] Health Care Without Harm, 2019
[3] B1728-delivering-a-net-zero-nhs-july-2022.pdf (england.nhs.uk)
[4] What is the carbon footprint of primary care practices? A retrospective life-cycle analysis in Switzerland | Environmental Health | Full Text (biomedcentral.com)
[5] 10_Symposium2022_KLiOL_AH_V4.pptx (live.com)
[6] Please see SEE Impact Study of the German MedTech Industry - WifOR Institute

The growing climate crisis also intensifies inequities in healthcare, disproportionally impacting underserved and marginalised populations, broadening existing health disparities, and forcing vulnerable people into even more precarious positions.

Given the negative impact of climate change on public health, communities and society, all actors in the healthcare eco-system must urgently increase their efforts to drive systemic and sustainable change across healthcare, while ensuring safe, affordable, efficient and effective care for patients. In the transition to net-zero healthcare systems, the timely availability of lifesaving and life-improving technologies and prevention of negative health and safety impacts for patients and users remain key.

As medical technology manufacturers, we feel the responsibility to contribute to a joint effort to decarbonise the healthcare sector both by ensuring our operations, supply chains, and the way that we innovate and design our products and services are environmentally and socially sustainable, and by continuing to bring our innovative products to the market while ensuring they meet the highest safety standards.

To achieve this common goal, it is important to consider that the medical technology industry covers over 2 million different medical technologies[7], and that investments in sustainability are only possible in an economic environment that is competitive for companies and incentivises innovation. Europe is attractive for its innovative medical technology research ecosystem, its efficient and accessible healthcare system, and its growing efforts towards value-based healthcare. However, the European region indeed has work to do if it is to retain its historic place as the global 'epicenter' of medtech innovation. One of Europe's many strengths is its unrivalled innovation creation as the medical technology sector in Europe files a patent every 30 minutes: this is a testament to the commitment of the medtech sector to save lives and help people manage and improve their health. At the same time, Europe faces the challenge of bridging its top-tier innovation creation and managing an often slow innovation launch. Coupled with tough competition from other regions of the world, Europe's international competitiveness gap is widening.

During the new political term 2024-2029 it is indeed key to focus on the EU's prosperity and competitiveness to fuel Europe's attractiveness for medical technology innovation. The implementation of the European Green Deal must support these ambitions by creating the right enabling framework – at political, regulatory, and financial level.

2. Adopting a system approach to building sustainable healthcare systems in the net-zero transition

Medtech Europe vision

To reach ambitious sustainability goals, healthcare systems and those supporting them will need to take an integrated end-to-end approach and address sustainability from a holistic, whole system and clinical pathway perspective, to improve environmental sustainability whilst continuing to equitably meet the needs of patients.

[7] There are more than 2.000.000 medical technologies, categorized into more than 7,000 generic devices groups 1, available in hospitals, community care settings and at home. Medical technologies can be everyday objects such as sticking plasters, syringes, surgical masks, and latex gloves, as well as spectacles, wheelchairs, COVID-19 tests and medical apps. Medical technologies also include total body scanners, gene mutation tests, implantable devices such as heart valves and pacemakers, and replacement joints for knees and hips. Please see medtech-europe--facts-figures-2024.pdf (medtecheurope.org)

What industry is doing and what we want to do

There is no one-size fits all solution to decarbonise healthcare. Solutions are multifaceted, multilayered and cross sectoral. For example, industry is increasingly focused on decarbonising operations and logistics, investing in clean energy and sustainable materials, introducing eco-design principles in product development and implementing circular practices where possible and viable for patients. However, focusing on the carbon footprint of specific products alone will not be enough to create overall sustainable healthcare systems.
These efforts also need to include collaborations with companies in the manufacturer's supply chain and other actors in the system, including users, healthcare providers, disposers as well as payers, hospitals and labs, to address carbon emissions arising during the use and other life cycle phases. For example, that may include addressing energy efficiency practices in the instructions for use, training of healthcare professionals, considering carbon emission reduction when co-creating tools for workflow management in healthcare organisations or the transition of hospitals and healthcare providers to renewable energy to reduce emissions in the use phase.
It will also require collaboration beyond the healthcare sector to the wider ecosystem, such as with the energy or waste management sector and societal groups, in particular patients' organisations.

The barriers

The barriers to climate resilient, sustainable healthcare systems are manifold. Climate change impacts risk putting increasing strains on the availability of and access to medical technologies considering ever more complex global supply chain challenges, fragmented policy frameworks, overall system inefficiencies, workforce shortages, financial constraints, health budget austerity, regulatory barriers and geopolitical complexities, all of which are to increase the risks to the safety and health of patients.
Further barriers include cybersecurity and data privacy concerns, challenges related to shifting to the cloud, 'new' being specified in tenders, a focus on Capital Expenditure (CapEx) instead of Operational Expenditure (OpEx) in budgets thereby preventing the uptake of as-a-service or the lack of awareness on how to take action, etc.
While healthcare systems are increasingly starting to have detailed plans for reaching net-zero and while healthcare professionals would like to play a part in helping their hospitals to recognise the need for clinical pathways to be reassessed with sustainability in mind, they cite a lack of time, resources, education and support to be more proactive in this area.[8]

Recommendations

- **A more holistic view of the carbon footprint along the care pathway** can provide an incentive to improve patient outcomes and overall environmental sustainability. We advocate for applying an approach in line with value-based healthcare where same-day-discharge, reduction of days of hospitalisation and improved outcomes may translate into an overall reduction of the carbon footprint compared to the performance of devices along the patient pathway.
- The Sustainable Healthcare Coalition (SHC) has created **guidance to evaluate the environmental (climate, water and waste) impact of different care pathway modules using three key metrics**: greenhouse gas emissions (climate impact), fresh water use and waste generated.[9] Applying this framework to the clinical pathway for anastomotic leaks demonstrated that reducing one anastomotic leak, for example, could result in an average climate saving of 1303 kg CO2-eq (equivalent to 5 return flights from London to Rome), a water saving of 1803 m3 (equivalent to 17 times the annual water use

[8] https://impact.economist.com/sustainability/resilience-and-adaptation/healthcare-professional-and-climate-change
[9] https://shcoalition.org/sustainable-care-pathways-guidance/

of an average European household) and a waste saving of 123 kg (equivalent to almost 3 times the monthly waste generation of an average European individual).[10]

- **Greater consideration and investment are needed into how clinical pathways can be redesigned to improve sustainability.** Healthcare practitioners are already aware of the impact of climate change on the health of the populations they serve and understand that many changes are necessary to make the system more sustainable. However, they need help and support to make the proposed changes to clinical pathways. This includes **incentivising the introduction of dedicated sustainability teams and managers in hospitals** who then become the point of contact for discussion and consultation with manufacturers on this topic. Incentivisation should already start with the purchase of sustainable products.
- **Manufacturers of medical technologies also need to be one of the stakeholders around the table when countries and regions are putting in place their roadmaps towards net-zero health systems**.
- We stand available to support hospitals to embrace a more holistic approach to environmentally sustainable healthcare. For example, in the Netherlands, researchers are leading a project to accelerate the adoption of circular interventions in hospitals and aim to develop circular, safe and scalable strategies.[11] Such initiatives are to be applauded and replicated.

3. Fostering a patient centric Circular Economy

MedTech Europe vision

A circular economy is a system where materials never become waste and nature is regenerated. In a circular economy, products and materials are kept in circulation through processes like maintenance, reuse, refurbishment, remanufacture, recycling, and composting. The circular economy tackles climate change and other global challenges, like biodiversity loss, waste, and pollution, by decoupling economic activity from the consumption of finite resources. It aims at decoupling growth from the use of natural resources by using these resources more effectively.[12] The strong focus in Europe to maintain robust social security systems and equitable healthcare access can be further enhanced by improving resource efficiency and circularity in the sourcing, production, distribution, management and disposal of medical devices, which can reduce negative impacts on emissions, resource scarcity and biodiversity. This can be realised by fully leveraging a structured approach to "the five Rs" of "Reduce, Refuse, Reuse, Renew and Recycle".

What industry is already doing and what we want to do

Innovation in medical devices to improve patient outcomes in respect of applicable regulations sits in our DNA. Circularity of medical technologies means maximising the lifetime value of products and solutions while minimising the use of materials and resources and eliminating waste. Manufacturers do this through circular product design, smart digital solutions, innovative service models, and responsible (end-of-use) management of materials and products. Circular practices include, but are not limited to:

- designing products and packaging to use less materials, use them longer or use again (e.g., sustainable materials, disassembly, recycling)
- preserving material value during manufacturing and partnering with suppliers to deliver circular solutions (e.g., reusable supplier packaging)

[10] https://doi.org/10.1016/j.sopen.2023.07.001
[11] https://www.rsm.nl/news/detail/15537-grants-for-research-on-circular-hospitals-and-waste-free-freight-transport/
[12] What is a circular economy? | Ellen MacArthur Foundation

- introducing innovative business models that can incentivise material efficiency across value chains (e.g., telemedicine, remote monitoring, subscription, lease)
- optimising use of products and packaging (e.g., upgrading to new clinical functionality or extending lifetime) ensuring products, components, parts, and packaging can be recirculated responsibly after use (e.g., reuse, refurbished and parts recovered)
- processes such as remanufacturing, refurbishing, or reprocessing.

The medical technology sector is an active player in international and regional standardisation bodies driving the development of harmonised and own initiative standards.

The exact opportunities for circularity depend on the type of product, business models, and criteria, such as the value of the material used across multiple life cycles. For example, a critical shift would be moving away from the concept of end-of-life to end-of-use and take this into consideration in the trade-offs between customer needs, costs, safety and environment. Circular practices can only be implemented successfully when they meet the needs of customers, users (patients and healthcare professionals), and healthcare systems and where there is transparency across the whole circular pathway as to what happens to the product/waste. Different manufacturers and healthcare delivery organisations are in different phases of their journey towards circularity, ranging from experimentation and piloting to implementation at scale for specific products.

The barriers

Regulatory barriers:
EU chemicals legislation can prevent the re-use of used/recovered parts and components in new products because they may contain (traces of) restricted substances. The Medical Devices Regulation and New Legislative Framework / Blue Guide present barriers to refurbishment of equipment, parts, components, and materials with patient contact if containing trace elements of concern placed on the market outside of the European Union, as well as to the re-use and reprocessing of medical devices. The report of the recent study of the Austrian Health Institute carried out on behalf of the European Commission on article 17 of EU Regulation 2017/745 on Medical Devices (MDR)[13] confirms that 17 out of 30 European countries do not allow reprocessing of medical devices in their country. Decisions in three further countries are pending.
Policy barriers:
Some national legislations do not allow the purchase of refurbished equipment via public procurement, e.g., in Spain or Portugal, or does not incentivise take-back programmes. In addition, traditional procurement processes prioritise ownership of medical equipment, which can lead to increased use of virgin materials and costs. Trade agreements need to facilitate market access to third countries to create a global market for refurbished devices and components (also to make refurbishment a more attractive business case for manufacturers).
Fragmented definitions and standards:
Definitions are not aligned across legislation (e.g., taxonomy, ESPR, MDR) and international/European standards are currently not available or not sufficiently aligned on key aspects of circular economy (e.g., definition as well as process steps of refurbishment).

[13] The study on the implementation of Article 17 of Regulation (EU) 2017/745 on medical devices on the EU market, carried out by the Austrian GÖG on behalf of the European Commission can be found here; please see also the related interactive dashboard.

A lack of harmonised metrics, tools and methodologies suitable for use in our sector:

Currently, there are cross-sector standards addressing Life Cycle Analysis (LCA) and Carbon Footprint of a Product (CFP) calculations (namely ISO 14044 and ISO 14067). Medical devices and IVDs are complex devices, often combining the use of accessories, reagents and unique use instructions. This complexity adds uncertainty to the calculations of LCA and CFP.

There is currently no universal methodology across MedTech manufacturers, and a comparison made using Life-Cycle-Assessments (LCAs) can be misleading of the actual environmental performance of a device in a healthcare setting. Also, while LCA can be a helpful tool to identify environmental hot spots or low hanging fruits for action to move forward, LCAs are not a reliable tool for the comparison of products between different producers.

While there are many initiatives, such as Circular Transitions Indicators (CTI) Corporate Sustainable Reporting Directive (CSRD) proposing circularity metrics, there are not yet globally harmonised metrics to measure circularity and the ones currently under development are not detailed enough to be applied at product level. There are also multiple shortcomings when it comes to measuring emissions and, in particular, avoided emissions of circular practices. For example, certain initiatives require accounting for life-time emissions at point of sale, which can disincentivize investments to improve performance of current installed base and design for long life. Currently, a harmonised standard on circular product design is under development in Europe and it requires attention and backing from the European Commission to guarantee harmonisation of processes across industries around circular product design.

Regarding standardisation, we also see a proliferation of groups developing standards, in particular, in areas such as circular economy and climate change, that often cover overlapping activities and are more in competition with each other than actually helping manufacturers. This requires more resources from industry to be able to follow all these groups and barely any time is left for effective and active contribution. A more effective process would be for the European Commission to agree on a package of standards through issuing "standardisation requests".

Financial barriers in health systems:

The move to single-use devices is driven by staff shortages and financial constraints of hospitals, as re-processing is more costly and resource-intensive. Financing, procurement and budgeting rules may also pose barriers to the introduction of innovative circular business models (also linked to barriers to value-based healthcare) or innovative access models, such as online platform that facilitate the sharing of medical equipment between hospitals. Also, many hospitals have CAPEX budgets instead of OPEX, which makes adopting as-a-service models challenging. Procurement processes that favour capital purchase may also create financing challenges for healthcare organisations. The high upfront costs of purchasing new equipment can be a barrier for many healthcare providers, especially those with limited budgets. Alternative financing solutions, such as leasing, could provide healthcare providers with more flexible options to acquire and use medical equipment, thus expanding access to healthcare.

Technological and clinical barriers:

Often medical devices, particularly those implanted into patients or used in surgery where they make direct contact with a patient's body, are not suitable for recycling at the end of their use because they are considered "bio-hazardous" materials that require direct disposal, often by means of waste incineration, according to waste management regulations imposed by Member States and that may vary across countries. Due to the definition of the "bio-hazardous" waste there are missing solutions of a hygienically controlled collection within hospitals. Currently, all solutions need a lot of resources to manage waste effectively while maintaining high standards of safety and compliance. There is a need for a logistical solution to implement appropriate waste management in healthcare. The technology to treat the waste (disinfection, sterilisation, etc.) as well as possibilities to at least create valuable recycling material flows are already available. What is currently missing is the procedural link between all these single process steps within the waste management sector, which could also convince authorities to allow these kinds of value-adding processes and make it

affordable for all involved parties. Given their often unknown provenance and purity level, the use of recycled materials, in the manufacture of medical devices is currently very difficult, and doesn't come with a clear guidance framework on expectations/ patient safety/ biocompatibility considerations from regulators.

A lack of circularity expertise:

There is still a lack of expertise and knowledge needed to adopt circular models, including those related to procurement and financing. Providing training and support to healthcare providers on circularity and sustainable practices can help build capacity and enable more widespread adoption of these models.

Data fragmentation:

The fragmented nature of healthcare systems in Europe can result in limited data access, which makes it difficult to design effective recycling or sharing schemes. Access to quality and comprehensive data from different sources and systems is crucial in supporting decision-making, tracking products and materials, and ensuring patient safety.

The case study of single use instruments:

- Over recent decades, there has been a move away from reusable metal instruments and washable items to single-use devices and materials in healthcare. This trend was supported by clinical studies that demonstrated the improvement of patient outcomes, in particular, for infection control, as well as patients' and healthcare professionals' safety, predictable performance, ease of use and lower cost of plastics, which drove demand from the healthcare sector.
- The use of single-use materials and products in healthcare has become the focus of attention in discussions on sustainability in healthcare given the high volume of waste produced by hospitals. However, studies comparing reusable and single-use products often do not consider the sterilisation/disinfection process needed which has an environmental impact.
- Considering the subsequent significant impact on cost, we encourage further investigation on specific product categories. When taking this into account, some single-use options are less costly and more sustainable.[14] We recommend that any consideration of the use of reusables or single-use devices is supported by evidence of both, patient outcomes and improved environmental sustainability at the same time. Any return to reusable instruments needs to also take above mentioned reasons for the shift to single use instruments into account.

Recommendations for enabling the circular transformation for competitiveness

For a patient-centric approach, we recommend the following:

- **Circular design including sustainable materials**: support the development of aligned definitions and standards, for example, on circular design and the ability of materials to enter the technical and biological loops in a circular economy; also, definitions under the sector specific Medical Device Regulation and circular economy related definitions (reprocessing, refurbishment) are not aligned.
- **Recycling:** monitor opportunities for applying chemical recycling to produce new virgin materials overcoming the challenges of mechanical recycling related to material purity and ensuring that they are properly disassembled and disposed of in an environmentally friendly and responsible manner, according to harmonised waste regulations.
- **Use of recycled materials**: researchers and government regulators to begin focused work with industry partners to develop a clear guidance framework on expectations/ patient safety/ biocompatibility considerations from regulators. This would enable the pathway towards reuse of materials in an

[14] https://www.health.belgium.be/sites/default/files/uploads/fields/fpshealth_theme_file/reducing_sup_in_medicine_and_healthcare.pdf

acceptable manner that is considered and clear in terms of the approach that should be taken when introducing recycled materials while protecting patient safety.

- **Legislative & regulatory review**: review the New Legislative Framework as well as applicable sectorial legislation, such as the Medical Device Regulation, applicable safety standards (e.g., Biocompatibilty ISO 10993-1) and chemicals legislation to support circularity and, specifically, reuse, refurbishment and reprocessing of medical equipment.
- **Policy review:** review national purchasing and procurement policies to incentivise manufacturers' circular practices, including reuse, remanufacturing/refurbishment, recycling and leasing as well as take back programmes where suitable and remove barriers to collecting systems from public and private institutions.
- **Measuring circularity:** support the development of aligned metrics and methodologies to determine the footprint of different medical technologies, including collaborative projects between manufacturers and users, where appropriate, to look at the impact per patient outcome.
- **Invest in R&D:** evaluate suitability and use of certain resources. For example, the application of renewable or biodegradable materials may not be suitable for the healthcare industry, depending on the use case.
- **Organisation and financing of health systems:** review financing, budgeting and organization of health systems to support the introduction of value-based and circular business models and sustainable purchasing practices**;** move to value-based procurement and apply the MEAT principles.
- **Implementation of waste collection processes:** support and incentivise (e.g. via appropriate funding mechanisms) the introduction of waste collection processes in hospitals and the waste management sector to suitably treat and, if possible, recycle bio-hazardous medical waste. Quality standards for secondary raw materials should be developed.

4. Sustainable and safe by design policies: Transitioning to sustainable substances and materials

MedTech Europe vision

In boosting innovation for chemicals that are safe and sustainable by design, patient outcomes and the safety/performance of medical products should not be compromised. Regulations that seek to accelerate the green transition in this area should be compliant with sectoral regulations and standards. A more streamlined, efficient and harmonised approach to chemical assessments would avoid duplication and unnecessary burden. Medical technology companies need the appropriate support and time to research, identify, develop and test new chemicals and sustainable, available and affordable materials for products and their packaging. Where safe, affordable and effective alternatives are not identified, there should be a mechanism where we can continue to use these materials and substances, while managing the risks, until further advances in technology produce viable alternatives that also pass the stringent regulatory approval process under the sector specific regulatory system set by the MDR and the In Vitro Diagnostics Medical Devices Regulation (IVDR)[15].

[15] Regulations (EU) 2017/745 and (EU) 2017/746

What industry is already doing and what we want to do

The medical technology sector fully shares the ambition of the EU Chemicals Strategy for Sustainability to boost innovation for chemicals that are both safe and sustainable by design. Medical technology manufacturers in Europe are committed to the highest standards of chemical risk management measures and are working with our suppliers to continuously improve the performance, safety and efficacy of our products and processes. At the same time, we must ensure the timely availability of affordable lifesaving and life-sustaining technologies in accordance with applicable sectorial legislation to satisfy patients' health needs. Industry is also engaging intensively in research and development of the use of safer alternative substances and materials in medical technologies.

The barriers

Predictability, legal and planning certainty: environmental regulatory changes related to chemicals and materials usually evolve at a quicker pace compared to the regulatory approval process implemented in accordance with the sector specific medical technology legislation, MDR and IVDR.
Redesign challenges: Finding and implementing safer alternatives that are fit for purpose in individual medical technology applications is a challenge. Any suitable and safer alternative needs to be available in sufficient quantities to fulfil the requirements of new regulatory initiatives. Any alternative also needs to qualify against the sector specific stringent safety requirements. In medical technology applications, alternatives not only have to be fit for purpose, but to also meet the rigorous safety, performance and quality requirements mandated under our sectoral legislation, adding further complexity to the process.
Supply chain complexities: Medical technologies differ vastly in terms of complexity. It is not uncommon for routinely used devices to have hundreds and thousands of components. Supply chains can be up to 30 tiers from materials to the final device. This adds complexity in identifying the use and then substitution of substances, all the more as today there is no workable regulatory obligation to disclose information regarding the substances present in provided products, components and materials.
The availability of suitable, safer and economically viable alternatives in sufficient quantities to fulfil the requirements of new regulatory initiatives can also be a challenge.
Uncertainties stemming from the REACH-MDR/IVDR interface (Annex I, section 10.4.1, compliance deadlines, redesign realities).

These complexities, long design and testing periods as well as strict sectoral legislation often imply that the medical technology sector requires longer transition times than other, non-regulated industries.

Recommendations for transitioning to safer alternatives

- Design **realistic transition pathways to safer alternatives** in medical technology applications:
  The restriction of substances used in validated medical technology should allow for realistic and appropriate transition and it should only apply to new products - and not on existing ones - to enable a smooth transition and alignment with the development cycle of new medical devices. This derogation should also include their manufacturing processes, imports, and supply chain so that potential alternatives can be identified and validated for suitability from a technical and regulatory perspective in accordance with the MDR/IVDR. Where there are no alternatives, derogations are necessary to ensure that patients and healthcare practitioners can continue to access the necessary medical technologies.
- Because of the need to meet rigorous patient safety, performance and quality requirements, **the process of finding alternatives cannot be a one-size-fits-all for all uses and all industries**. Even when an alternative is available from a chemical perspective, it may not be a substitute from a patient safety/quality/performance

perspective. Recognising the diversity of industries and their unique challenges in substituting hazardous substances is crucial, including from a patient perspective.

- Establish **better consistency between chemicals regulations such as REACH and other horizontal and vertical EU legislation**, including the sector-specific regulatory framework, as well as other EU legislation, such as the RoHS Directive, Occupational Health and Safety legislation, the Ecodesign Directive/new ESPR initiative or the new Batteries and Packaging Regulations.
- **Shaping REACH should pursue these objectives by implementing a four-point action plan**:
    - Designing realistic transition pathways to safer alternatives in medical technology applications.
    - Improving REACH restriction and authorisation, including a workable extended Generic Approach to risk management (GRA) and implementing the new Essential Use Concept (EUC)[16].
    - Increasing overall regulatory coherence of REACH with other relevant EU legislation.
    - Ensuring workable information requirements for registrants, downstream users as well as article manufacturers and their supply chains.
- **Seek international alignment**

5. Tapping into the synergies of the green and digital transitions

MedTech Europe vision

As healthcare workforce shortages continue to compound the strain on hospital capacity across the EU, many healthcare leaders are rethinking how and where they deliver care – from hospital to home. European healthcare systems no longer only deliver care in traditional hospital facilities alone but will increasingly leverage resources when and where they are most needed. This will increasingly require open and safe eco-systems for data. Financial pressures also require healthcare organisations to find effective solutions to maximise existing resources, while lowering costs and on-site maintenance personnel. Instead of a traditional model where a hospital may purchase and own technology outright, an increasing number are considering cloud-based technologies and the Software-as-a-Service (SaaS) model for their healthcare IT solutions.
Digitalisation enables remote monitoring, enhance diagnosis and (minimal invasive) treatment while reducing the need of physical resources. Thus, it can support the shift from resource-intensive clinical facilities to networked lower-cost settings and the home, thereby also expanding access to care.

What industry is already doing and what we want to do

Digital tools and software enable companies and healthcare providers to 'dematerialise', delivering maximum value with minimum resources. Artificial Intelligence can also support resource efficiency in healthcare systems, for example by improving workflow management in hospitals or decreasing energy consumption for certain procedures. Telemedicine and remote monitoring reduce CO2 emissions through a reduction in patient travel to surgeries and medical clinics as a result of the possibility of attending digital appointments and get digital access to test results and medical reports. This can reduce the need to travel to a clinic for a face-to-face visit or to pick up printed results or reports[17]. It can also reduce the need for travel by field service engineers and the need of in-hospital or in-office visits for tests etc. and its corresponding travel

[16] Please see Communication on essential uses of chemicals - European Commission (europa.eu) adopted on 22.04.2024

[17] Holmner A, Ebi KL, Lazuardi L, Nilsson M. Carbon footprint of telemedicine solutions--unexplored opportunity for reducing carbon emissions in the health sector. PLoS One. 2014 Sep 4;9(9):e105040. doi: 10.1371/journal.pone.0105040. PMID: 25188322; PMCID: PMC4154849; Cravo Oliveira, Tiago & Barlow, James & Gonçalves, Luis & Bayer, Steffen. (2013). Teleconsultations reduce greenhouse gas emissions. Journal of health services research & policy. 18. 10.1177/1355819613492717.

emissions. Telemedicine can also bring in virtual expertise to hospitals, providing support to staff and patients.

The barriers

Software development and use also generate emissions. The next years will see a significant jump in the global carbon footprint of the overall ICT sector[18], with 14% of greenhouse gas emissions attributable to ICT by 2040. Training a state-of-the-art medical AI model on a large database of medical images may correspond to the typical carbon footprint of a European citizen[19]. Embracing digital sustainability principles, such as shifting to the cloud and adopting Green Software practices, plays an important role in reducing the energy use of digital health solutions. This includes the development of sustainable artificial intelligence (AI) solutions with more resource-efficient programming languages, helping to reduce energy consumption and needed hardware. Efforts to develop standards, tools and best practices for the development of green software are on-going in the broader software industry.

The last years have seen the adoption of a high number of new EU legislations impacting digital health, including the Data Act, the Artificial Intelligence Act, the European Health Data Space Regulation as well as cybersecurity requirements. It is important that this legislative framework is implemented in a coherent and consistent manner, as part of an open digital ecosystem based open standards and interoperability.

Recommendations for enabling the transformation

- **Gather more evidence and robust data at European level** on the net environmental impact of digital solutions on healthcare systems, and develop standardised metrics, for example building on the work of the European Green Digital Coalition.[20]
- **Support digital innovation enabling environmental impact reduction**, including in data analytics applications, Artificial Intelligence, telemedicine, remote monitoring and up-take of green cloud in healthcare; use digital tools to increase efficiencies in logistics and workflows in healthcare settings.
- Back up upcoming requirements on the digital product passports by **clear and thorough methods and standards** on how to obtain data in the very complex supply chain and avoid disproportionate requirements.
- **Expand the scope of Commission Implementing Regulation (EU) 2021/2226** to enable the use of Electronic Instructions For Use (eIFU) for all medical devices.
- Support **dissemination of best practices** on green software and AI model development and implementation in the medical technology industry.

[18] The real climate and transformative impact of ICT: A critique of estimates, trends, and regulations. The real climate and transformative impact of ICT: A critique of estimates, trends, and regulations - ScienceDirect
[19] Truhn, D., Muller-Frances, G., Kather, J.K. (2023) The ecological footprint of medical AI. European Radiology https://doi.org/10.1007/s00330-023-10123-2
[20] Home - European Green Digital Coalition

6. A sustainable financing framework for research, innovation and implementation

MedTech Europe vision

The suggested fifth freedom of the single market in the Single Market Report of Enrico Letta embeds research and innovation drivers at its core[21], also and especially in the healthcare sector. An integrated European eco-system for sustainable financing incentivises effective private and institutional investments in the green transition. EU funding accelerates the industry's efforts and supports the green transition for medical technologies and the broader healthcare sector. This can be achieved through support for research and innovation, and through funding to healthcare delivery organisations to green their infrastructure and operations. This approach is already partly reflected in transition pathways co-created with other sectors[22].

What industry is already doing and what we want to do

Innovation is a key enabler to achieving sustainability in healthcare. Members of MedTech Europe are continuously engaging in finding more sustainable solutions while simultaneously improving clinical performance and effectiveness. MedTech Europe is also a proud founding member of the Innovative Health Initiative, a public-private partnership under the Horizon Europe Programme, which funds health innovation across sectors and disciplines.

The barriers

The green transition requires mobilisation of substantial investments, both private and public. However, fragmented finance and fiscal rules and burdensome state-aid rules make it difficult for investors to engage at the needed scale. For example, the EU Taxonomy is, in general, a good starting point for more harmonised benchmarking. However, the indicators are not adapted to the healthcare sector and currently make it difficult or even impossible for manufacturers of medical device to report, e.g. aligned circular activities – potentially leading to less investment in medical technology companies.

In the current Multiannual Financial Framework, health and green funding is scattered across several programmes, sometimes with overlapping objectives. For example, the Recovery and Resilience Facility is a powerful tool and an essential part of Europe's recovery from COVID-19.
However, while the Facility included concrete targets to combat climate change, no detailed guidance was provided to member states and healthcare delivery organisations how to use these funds in their efforts towards net-zero health systems.
Horizon Europe is important for establishing a competitive European industry by funding outstanding research and supporting R&I activities at a broad range of Technology Readiness Levels.
However, industry participation is stagnating beyond the public-private partnerships (such as the Innovative Health Initiative).
Here, EU policymakers should be careful to balance open science and IP obligations with commercial interests and keep the administrative and reporting burden to a necessary minimum.

[21] Much-more-than-a-market-report-by-enrico-letta.pdf (europa.eu)
[22] Transition pathway - European Commission (europa.eu)

Recommendations for enabling the transformation

The European Union plays a crucial role **in creating a supportive environment** that enables the rapid transition, deployment and **scaling of sustainable solutions in healthcare**. These efforts need to be supported by sufficient **funding and investment support**, such as the following:

- Earmark funding and unlock financing for the green transition of the medical technology sector under the announced Competitiveness Fund as well as new initiatives on decarbonisation and clean technology, such as the envisaged proposal for an Industrial Decarbonisation Accelerator Act or the new EU Life Sciences Strategy
- Further develop the EU Taxonomy to take into account the characteristics of medical devices and the healthcare sector
- Introduce a European scheme to boost and integrate national tax incentives for investment in sustainable innovation
- Streamline state-aid processes and reduce the administrative resources required for Important Projects of Common European Interest (IPCEIs)
- Promote research and innovation for more sustainable medical technology development, such as the development and use of alternative materials besides emission control during the transition phase, circular products or business models
- Developing a life cycle assessment methodology linked to product category rules is a powerful tool to address healthcare products. Although there is a strong push for the application of PEF (product environmental footprints) in Europe, these have the limitation of not being suitable to address complex products, such as healthcare products. Standards able to address LCA and PCR should be supported and the development of sector specific standards for healthcare should be encouraged
- Support the development of circularity indicators[23]
- Invest in hospitals and other healthcare delivery organisations – for example, via the Cohesion or European Regional Development Funds - for greening their infrastructure and operations, including portfolio analysis, investment in sustainable, circular and more energy-efficient equipment, as well as recycling, and waste management infrastructure, including safe, scalable and sustainable waste disposal technologies
- Digital solutions to reduce carbon footprint, including generation of evidence for their benefits in reducing healthcare's environmental footprint. In particular, governments should promote the development of standards to harmonise ways to quantify, e.g. avoided emissions accomplished from digital solutions so as to be able to compare outcomes from non-digital solutions
- Capacity building for purchasers of medical equipment, including training to support the application of Green Public Procurement criteria
- Road-mapping and the harmonised implementation of environmental policies and regulations at the level of Member States and where possible, alignment with countries outside Europe

[23] Material Circularity Indicator | Ellen Macarthur Foundation

7. Reporting requirements that are workable and fit-for-purpose

MedTech Europe vision

Harmonised regulatory efforts to provide reliable Environmental, Social and Governance (ESG) information to stakeholders are needed to create a level playing field. Mandatory sustainability reporting standards should contribute to high quality, consistent and comparable reporting, thus accelerating the transition to a sustainable economy. Reporting obligations on healthcare delivery organisations also prompts action to accelerate their sustainable transition.

What industry is already doing and what we want to do

MedTech Europe members are investing resources to prepare for compliance not only with the Corporate Sustainability Reporting Directive (CSRD) and European Sustainability Reporting Standards, often building on existing efforts and experience with ESG reporting, but also the new Corporate Sustainability Due Diligence Directive (CS3D) and its new requirement on establishing climate transition plans at corporate level.

The barriers

- The parallel implementation of CS3D, CSRD and EU Taxonomy and resulting administrative burden and resource needs can create a barrier. Coupled with other environmental regulations, this can have an impact on the quality of implementation as well as create a competitive disadvantage for the European Union.
- Misalignment between the Disclosure Requirements in the European Sustainability Reporting Standards (ESRS) and the Sustainable Finance Disclosure Regulation (SFDR)
- In (sometimes very) complex supply chains of products including hundreds or thousands of components, collecting high-quality, reliable, data from suppliers (especially beyond the first tier of suppliers) remains a challenge.
- Various Technical Screening Criteria (TSC) in the second EU Taxonomy Delegated Act go beyond the EU legislation, which might impact eligibility and alignment reporting (example: chemicals).
- No convergence at global level, e.g. with International Sustainability Standards Board (ISSB), standards in jurisdictions around the world, such as new laws in the State of California.
- We have seen several instances where well-intentioned horizontal legislation (e.g., EU Deforestation Regulation, Carbon Border Adjustment Mechanism) introduces quite extensive data collection and reporting requirements for medical technologies despite the very low volumes of materials used or despite conflicts with the Medical Devices Regulation (e.g., regarding specific requirements for paper used for Instructions for Use of medical devices).

Recommendations for enabling the transformation

Ensuring harmonised reporting requirements for value-based healthcare is paramount, as they serve as vital tools informing green procurement decisions and driving a sustainable transformation of healthcare systems. However, the current fragmented landscape of reporting standards is too burdensome, impedes effective coordination and hinders the realization of sustainability goals in healthcare systems. These barriers need to be mitigated by:

- Introducing **flexibility for reporting periods**, such as different than calendar year
- As regards ESRS: **keep sector-specific requirements/standards to a minimum** to avoid unnecessary reporting burden. Mandate standardisation organisations to develop standards with terminology that is

understood and supported across product sectors and thereby facilitate the understanding and reporting of ESRS requirements

- **Harmonise reporting standards and language**: Seek alignment with the ISSB for the existing and future IFRS S-standards, including producing one set of sustainability information reflecting requirements of both frameworks
- Ensure **reasonable timelines for CS3D, CSRD and taxonomy implementation**, also with other legislation and initiatives (e.g., OECD guidelines)
- **Review the EU Taxonomy Delegated Act on Circular Economy** with a view of specific characteristics of the medical devices sector
- Ensure that **horizontal data reporting and due diligence requirements** do not impact the medical technology sector disproportionally and **introduce de-minimis-thresholds** where necessary and suitable
- **Reduce duplication in reporting requirements**, both at product and organization level and across EU and Member States
- Ensure an **effective implementation** of reporting legislations, such as the CSRD by providing sufficient guidance to the industry

8. Green public procurement: a public sector that leads by example

MedTech Europe vision

Introducing common EU Green Public Procurement (GPP) criteria into medical technologies and services public procurement can facilitate the reduction of the environmental impact of our sector. Public procurement can help facilitate the trade-offs that healthcare purchasers have to make between environmental performance, clinical effectiveness and cost for every specific product or solution purchase, and it allows the room for innovation and collaboration that strict market access requirements do not. As we see more and more healthcare providers applying circular or green procurement criteria when buying medical technologies and services, we encourage the creation of a standard approach to GPP. By providing industry partners and suppliers with clear guidance to improve the sustainability of their products and operations, we believe public procurement guidelines can help drive systemic change and enable tangible economic and social benefit.

What industry is already doing and what we want to do

As an industry, we are willing to collaborate with all stakeholders involved in procurement decisions and focus on the most impactful actions and the appropriate guidelines for tender submission since the effective improvement of the carbon footprint of healthcare is not limited to products.

Medical technology companies are investing significant resources in more sustainable manufacturing processes as part of their sustainability strategies. Those efforts are often vetted by international certification programs. Many of the organisations that certify these schemes are also notified bodies under MDR and already have resource constraints. Yet, the fragmented recognition of such standards makes their evaluation in procurement processes very difficult. Often certifications are requested to be done at the local affiliate/distribution level hence undermining the overall efforts of the manufacturing and logistic process where the greater environmental impact lies.

From a product perspective, our sector is exploring opportunities for reducing the environmental footprint of products and packaging within the well-defined safety and quality requirements deriving from our sectorial regulations. Furthermore, we currently lack a systematic approach to sustainability in our sector that

considers all aspects of a technology in determining its environment impact. Quality and clinical outcomes are indeed an important sustainability driver: by limiting unnecessary intervention, reducing complications, hospital stay and or commuting time to and from healthcare facilities, we would expect this contribution to be recognised in the overall environmental performance of our technologies and services.

The barriers

There is insufficient alignment of all relevant regulation timelines, such as ESPR (i.e., companies are being asked for LCA information well ahead of a regulatory mandate).
Fragmentation due to different requirements at local level require significant efforts from manufacturing companies to compile procurement dossiers. A standard approach would help focus resources into driving significant changes rather than focusing on administrative requirements.

Recommendations for enabling the transformation

- Support the creation of **European standards and guidelines in full alignment with global standards** and using synergies stemming from CSRD, CS3D and other legislative instruments.
- Have a holistic approach in defining environmental requirements for products, parts, packaging.
- Gather **more evidence and robust data at European level** on the greatest area of impact for the healthcare systems. A regular assessment of the medical technology sector in the EU is required for better management and political support.
- Ensure the **alignment of procurement requirements with the timelines of upcoming legislations**.
- Apply **MEAT principles** (moving beyond "buy cheapest") and proper weighing in of sustainability criteria in tendering.
- The **use of LCA's should be used to identify emissions hotspots** so that manufacturers are able to work on reductions, not be used for comparison of products for procurement or assessment decisions.

9. Partnerships for sustainable healthcare systems

MedTech Europe vision

Decarbonising healthcare is a system challenge. No single company can solve all the issues on its own. We need joined forces not only within the medical technology industry but also with other companies who are either also affected or able to overcome the barriers. The mission is to **collaborate across sectors and borders** to achieve the sustainability targets of the Green Deal.
Partnerships in the medical technology field are crucial for driving innovation, accelerating product development, and improve patient outcomes in the healthcare industry.

What industry is already doing and what we want to do

The medical technology industry joins forces in MedTech Europe and with local trade organisations to discuss regulatory and sustainability evolvements. Regular dialogues with other healthcare system actors and stakeholders are held and continuously encouraged. MedTech Europe is also fostering global cooperation with its peer organisations at global level.
There are also complementary non-profit organisations, such as PHSSR (Partnership for Health System Sustainability and Resilience) who support the sustainable improvements in the sector. All these initiatives conduct research, work on recommendations and try to standardise the position of the healthcare sector. Stakeholder engagement is one of the main goals of all of these.

The barriers

A lack of dialogue and insufficient transparency between all parties is one of the key barriers to build trusted partnerships. Besides, EU competition law still constrains collaboration potentials in the sustainability area. Priorities and targets have to be closely aligned. Fairly and clearly formulated agreements for the protection of intellectual property and negotiating agreements related to the intellectual property ownership must be defined to avoid conflicts and reduce the fear of losing power of potential partners. The same is relevant in terms of data privacy and security.
Due to the regulatory requirements initiatives can be too time-consuming and costly which makes undertakings unattractive from the outset.

Recommendations for enabling the transformation

- Promote and encourage **collaborative action** for sustainability at all levels.
- To enable the transformation stakeholder should be willing to **combine resources** (e.g., financial) and expertise to fasten innovation and solving problems/issues that are arising from Green Deal regulations (e.g., such as finding alternative for critical PFAS applications and emission control pathways during the transition). Collaboration and sharing best practices not only on development level leads to more comprehensive and user-friendly solutions. In the transition to safer substances, security of supply of existing substances (e.g., PFAS) is key to prevent supply shortages of medical technologies.
- **Create networks** to improve the market access and make solutions available to a broader range of patients. These networks should not be built exclusively within the healthcare sector. A diverse perspective on the industry and skills from other industries can help to see solutions that are not available yet.
- Share information with stakeholders to stimulate partnerships and the joining of forces. A more standardised picture could lead to a more harmonised market also in terms of the expectations from customers.
- Ensure **effective coordination** between different EU policy activities and funding programmes by nominating a champion for sustainability of the medical technology sector in the European Commission's Directorate General for Health and Food Safety.
- The medical technology sector is eager to collaborate with all stakeholders in the value chain to measure the carbon footprint for scope 3 and focus on the most impactful actions. Recognising that the effective improvement of the carbon footprint of the healthcare sector is something that producers cannot do by themselves.[24]

10. Leveraging the EU internal market as catalyst for system change

MedTech Europe vision

MedTech Europe envisions a reinforced fully functioning EU internal market, the EU's strongest asset and catalyst of both, a high level of environmental protection and a competitive medical technology industry in the EU. Sustainable products circulate freely from one Member State to the other and thereby access to

[24] Positive case study: Erasmus hospital study (measure scope 1 and 2, scope 3 is addressed collaboratively)

medical technologies for patients and health practitioners is improved. Supply inputs, such as raw materials, for the manufacturing of medical technologies can be sourced across national borders thereby reducing costs. A fully functional internal market is a powerful crisis management tool supporting security of supply, as the COVID-19 pandemic has also evidenced.

What the industry is already doing and what we want to do

The medical technology industry promotes the harmonisation of legislation presented under the EU Green Deal and its implementing legislation in support of a high level of environmental protection and cost efficiency for the healthcare system.

Barriers

MedTech Europe observes an increasing trend of fragmentation, especially regarding Green Deal product related requirements due to an increasing number of often conflicting national measures in parallel to EU regulation. The sector's regulatory system also sees "gold-plating", i.e. the addition of specific local requirements at national level, which further increase barriers to a fully functional internal market serving patients needs.

Recommendations

- Reducing administrative burden, removing trade barriers and fostering an enterprise-friendly environment to unleash full economic potential in Europe.
- Preserving the **integrity of the Single Market** and supporting its completion and enforcement, since essential to relaunch Europe's competitiveness and its ability to succeed the green and digital transition.
- Strengthening **monitoring, implementation and enforcement of Single Market principles** will be key to put an end to market barriers resulting from divergent national measures. Effective enforcement must be guaranteed, and infringements sanctioned.
- **Upholding the Single Market principles across all policies and legislations** requires political ownership of these principles across all EU institutions of the European Commission's services, European Parliament's Committees as well as Council of the EU formations and national Ministries, ensuring an effective consultation of all relevant services in all phases of a legislative process.
- Strive for **significant improvements over the short- and mid-term to the EU MDR and IVDR**, boosting efficiency and overall fitness for leveraging sustainability and digital health technology innovation.
- Boost **an EU internal market for waste** in support of the circular economy.
- Provide **timely guidance on how to understand and implement various EU legislations.**
- **Promote industry-driven consensus standards** in support of the green transition.
- Act as a **guardian of the EU Treaty** when national action runs counter the functioning of the EU internal market.

Conclusions

Building resilient and sustainable health systems requires a robust, competitive, and innovation-driven medical technology industry.

MedTech Europe, on behalf of the medical technology industry, stands ready to leverage the #PowerOfMedtech in transforming lives and healthcare ecosystems, in order to support Europe's prosperity and competitiveness for the future.

This holds true for a successful implementation of the existing EU Green Deal in the healthcare sector as well as our commitment to contribute to a workable design of the new initiatives announced in the Political Guidelines of Commission President von der Leyen, such as the Clean Industrial Act, Industrial Decarbonisation Act, the new Circular Economy and Chemical Industry Acts, the Life Sciences Strategy, new Climate Adaptation and Climate Resilience measures or the upcoming EU Water Resilience Strategy.

About MedTech Europe

MedTech Europe is the European trade association for the medical technology industry including diagnostics, medical devices and digital health. Our members are national, European and multinational companies as well as a network of national medical technology associations who research, develop, manufacture, distribute and supply health-related technologies, services and solutions.
www.medtecheurope.org.

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