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2024-2029

ПЪЛЕН ПРОТОКОЛ НА РАЗИСКВАНИЯТА	DEBAŠU STENOGRAMMA
ACTA LITERAL DE LOS DEBATES	POSĚDŽIO STENOGRAMA
DOSLOVNÝ ZÁZNAM ZE ZASEDÁNÍ	AZ ÜLÉSEK SZÓ SZERINTI JEGYZŐKÖNYVE
FULDSTÆNDIGT FORHANDLINGSREFERAT	RAPPORTI VERBATIM TAD-DIBATTITI
AUSFÜHRLICHE SITZUNGSBERICHTE	VOLLEDIG VERSLAG VAN DE VERGADERINGEN
ISTUNGI STENOGRAMM	PEŁNE SPRAWOZDANIE Z OBRAD
ΠΛΗΡΗ ΠΡΑΚΤΙΚΑ ΤΩΝ ΣΥΖΗΤΗΣΕΩΝ	RELATO INTEGRAL DOS DEBATES
VERBATIM REPORT OF PROCEEDINGS	STENOGRAMA DEZBATERILOR
COMPTE RENDU IN EXTENSO DES DÉBATS	DOSLOVNÝ ZÁPIS Z ROZPRÁV
TUARASCÁIL FOCAL AR FHOCAL NA N-IMEACHTAÍ	DOBESEDNI ZAPISI RAZPRAV
DOSLOVNO IZVJEŠĆE	SANATARKAT ISTUNTOSELOSTUKSET
RESOCONTO INTEGRALE DELLE DISCUSSIONI	FULLSTÄNDIGT FÖRHANDLINGSREFERAT

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jeudi - Déardaoin - četrtek - giovedì - ceturtdiena - Ketvirtadienis - csütörtök - Il-Ħamis
donderdag - czwartek - Quinta-feira - joi - Štvrtok - Četrtek - torstai - torsdag

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Единство в многообразието - Unida en la diversidad - Jednotná v rozmanitosti - Forenet i mangfoldighed - In Vielfalt geeint - Ühinenud mitmekesisuses
Ενωμένη στην πολυμορφία - United in diversity - Unie dans la diversité - Aontaithe san éagsúlacht - Ujedinjena u raznolikosti - Unita nella diversità
Vienoti daudzveidībā - Suvienijusi įvairovę - Egyesülve a sokféleségben - Magħquda fid-diversità - In verscheidenheid verenigd - Zjednoczona w różnorodności
Unida na diversidade - Unită în diversitate - Zjednotení v rozmanitosti - Združena v raznolikosti - Moninaisuudessaan yhtenäinen - Förenade i mångfalden

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TORSdag DEN 3. APRIL 2025
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NELJAPÄEV, 3. APRILL 2025
ΠΕΜΠΤΗ 3 ΑΠΡΙΛΙΟΥ 2025
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TORSdag DEN 3 APRIL 2025

4-0002-0000

PRÉSIDENCE: YOUNOUS OMARJEE
Vice-Président

1. Ouverture de la séance

4-0004-0000

(La séance est ouverte à 9h00)

2. Positions du Conseil en première lecture (article 64 du règlement)

4-0006-0000

Le Président. – La Présidente a reçu du Conseil ses positions en première lecture concernant les trois dossiers suivants:

– le champ d'application des règles applicables aux indices de référence, l'utilisation dans l'Union d'indices de référence fournis par un administrateur situé dans un pays tiers et certaines obligations d'information;

- l'instrument pour le développement et la croissance des régions frontalières dans l'UE – BRIDGEforEU;
- les statistiques du marché du travail concernant les entreprises.

La Présidente a également reçu les raisons qui ont conduit à leur adoption ainsi que les positions et avis de la Commission. Les titres complets seront publiés dans le procès-verbal de la séance d'aujourd'hui. Le délai de trois mois dont dispose le Parlement pour adopter ces positions commence donc demain, le 4 avril 2025.

3. Plan d'action européen sur les maladies rares (débat)

4-0008-0000

Le Président. – L'ordre du jour appelle à présent le débat sur la déclaration de la Commission concernant le plan d'action européen sur les maladies rares [2025/2637(RSP)].

4-0009-0000

Olivér Várhelyi, Member of the Commission. – Mr President, honourable Members, I'm pleased to address you today on such an important topic, one which the EU has long recognised the importance of, and this is reflected in the significant actions we have taken to support our citizens, including through research and development of new treatments, as well as access to diagnosis and treatment and better patient care.

In the EU, we estimate that around 30 million people live with a rare disease. So while rare diseases are rare, patients living with them are not. This is why the Commission has been active in addressing rare diseases for many years now. A strong European health union helps to improve the health of all of our citizens, no matter where they live, no matter their disease or complex condition. Our work on rare diseases is underpinned by a strong EU framework based on the Commission communication on rare diseases, the Council recommendations on action in the field of rare diseases and the Cross-Border Healthcare Directive.

On this strong foundation, the Commission is supporting the Member States through targeted and concrete actions that can make a real difference for rare-disease patients. The 24 European reference networks are a truly European success story. They bring together knowledge of healthcare providers, researchers and patient organisations from across Europe and leverage the collective expertise for patients' care. The European reference networks are unique and in that, they are a prime example of European solidarity and innovation, allowing expertise to travel rather than patients. We have now strengthened their work with the EU4Health funding, worth EUR 77.4 million, which will run until 2027.

Today, the primary challenge is that the potential of European reference networks is not fully realised because they are not yet well integrated into the national healthcare systems. We have therefore launched the joint action Jardin for integrating these networks into the national health care systems, with an additional EUR 18.7 million until 2027. This joint action also promotes the development of national plans for rare diseases. It brings together all stakeholders in the area of rare diseases, and will be pivotal in shaping union policies and supporting Member States.

We're also working to improve access to safe and more effective orphan medicines. The Critical Medicines Act that I presented during the last plenary includes the possibility for Member States to

collaboratively procure medicines other than those on the list of critical medicines. These include, for example, medicines for rare diseases.

Moreover, the revision of the pharmaceutical legislation promotes the development of treatments for rare diseases, not to mention the impact of the European Health Data Space on research, which will be transformative for rare diseases. The European Health Data Space will draw on the work of the European Platform on Rare Disease Registration to address the issue of fragmentation of rare disease patients' data across Europe.

Looking more widely, having more competitive pharmaceutical, biotech and medical device sectors will also support action on rare diseases. In the Biotech Act, I will explore helping scientists to bring their products from the laboratory to the factory and onto the markets faster. This act should help us create a new, world-leading biotech industry, and that will lead on prevention and develop new personalised medicine.

Another major area of action is, of course, research. The Commission has supported research on rare diseases with EUR 5.2 billion during the last 25 years. Just recently, we launched a new seven-year research partnership: the European Rare Diseases Research Alliance (Erdera) for better prevention, better diagnosis and better treatment of rare diseases.

So, honourable Members, we have a comprehensive framework on rare diseases which steers our dedicated work and activities. We are also working with all stakeholders in a joint action, which helps pave the way for future improvements to our common framework as needed. If we want to make a real impact for people with rare diseases, I ask you to support this work for these actions that are starting to bear fruit.

4-0010-0000

Tomislav Sokol, u ime kluba PPE. – Poštovani predsjedavajući, povjereniče, kolegice i kolege, u Europskoj uniji rijetke bolesti pogađaju između 27 i 36 milijuna ljudi, među kojima su brojna djeca. Pritom se procjenjuje da postoji između šest i osam tisuća vrsta rijetkih bolesti, a mnoge od njih još uvijek su neistražene. Iako je upravo ovo područje u kojem Europska unija može učiniti najviše, još uvijek nemamo sveobuhvatan europski plan za rijetke bolesti. Vrijeme je da to promijenimo.

Po uzoru na europski plan za borbu protiv raka, potreban nam je i europski plan za rijetke bolesti s jasnim ciljevima, definiranim rokovima, mjerilima i osiguranim financijskim sredstvima. Od 2017. godine Europske referentne mreže transformirale su skrb i istraživanje rijetkih bolesti. One su vjerojatno najznačajnija inovacija u zdravstvu i istraživanju rijetkih bolesti u Europi, ako ne i u svijetu, a sada je vrijeme da ih dodatno financijski ojačamo kroz znatno veća ulaganja iz europskog proračuna. Podaci govore da je 86 % pacijenata s rijetkim bolestima u EU spremno putovati preko granica da bi dobili bolju medicinsku skrb, pogotovo onu koju ne mogu dobiti na teritoriju svoje zemlje. Stoga, budući europski plan za rijetke bolesti mora koordinirati i uskladiti nacionalne strategije te olakšati prekograničnu zdravstvenu zaštitu, a pogotovo je važno pojednostavniti postojeće europske propise koji reguliraju pravo na liječenje u inozemstvu. Kao dio široke zdravstvene inicijative, moramo pojednostavniti ta pravila o prekograničnoj zdravstvenoj skrbi, ali i olakšati provođenje kliničkih ispitivanja u EU, naravno bez ugrožavanja sigurnosti pacijenata, jer znamo da su danas klinička ispitivanja koncentrirana u nekoliko najvećih država članica i pacijenti iz onih manjih im vrlo teško mogu dobiti pristup.

Ulaganja u istraživanje, inovacije i razvoj ključna su da bismo mogli razumjeti rijetke bolesti i osigurati dostupnost inovativnih tretmana u Europskoj uniji. Zato je ključno stvoriti okruženje

koje će poticati investicije, koje će poticati ulaganje u inovativnu industriju na teritoriju Europske unije kako bismo bili manje ovisni o uvozu inovativnih lijekova iz trećih država. Ne smijemo dopustiti da u EU postoje pacijenti prvog i drugog reda. Svi europski građani moraju imati pristup kvalitetnoj zdravstvenoj skrbi, bez obzira na to gdje u Europskoj uniji žive. Kolegice i kolege, vrijeme je da Europska unija konačno dobije sveobuhvatan plan za rijetke bolesti. Samo zajedno možemo osigurati bolji život onima koji se svakodnevno suočavaju s izazovima koji rijetke bolesti donose.

4-0011-0000

Vytenis Povilas Andriukaitis, *on behalf of the S&D Group*. – Mr President, dear Commissioner, colleagues, of course, we just listened to what was done in the area of the diseases from 2017 when we launched the European reference network, but now we can tell openly it is not enough. We need urgently, we need urgently to introduce not only a European Union action plan on rare diseases, but to keep in mind to have a strategy on real disease, including much more aspects.

First of all, we need to provide more systemic and uniform approach, bridging gaps and addressing remaining unmet needs and inequalities. Of course we need to focus on national strategies and include national strategies in such strategic plan on a more comprehensive or more harmonised approach.

We need to unite our forces, and we need to think that such European Union strategy would be a second building block of the European health union, because it can help us to make pace with new technologies, new values, new expectations. And of course, we need to also include social aspects of people who are staying with rare diseases – as in cancer survivorship, the same is in the area of rare diseases. We need to include those issues also in our strategy.

4-0012-0000

Ondřej Knotek, *za skupinu Pře*. – Pane předsedající, pane komisaři, přestože se jim říká vzácná, tato onemocnění se týkají 30 milionů Evropanů a vzácných onemocnění známe více než 6 000. Je tedy evidentní, že tato oblast vyžaduje užší spolupráci členských států, ale i nástroje celoevropského rozsahu – přeshraniční péče, sekundární využití dat, moderní metody financování pro dražší transformativní terapie, zjednodušení regulační legislativy, především zdravotně-technologického posouzení, a zřízení kontaktního místa pro podporu startupů a malých firem. Výzkum, vývoj a výroba na území Evropy těchto vzácných onemocnění a jejich terapií vyžaduje konkurenceschopné nastavení podmínek pro inovativní firmy. V neposlední řadě nezapomínejme na pacienty, patientské organizace a jejich iniciativy, které vedou také k vývoji terapií pro některá vzácná onemocnění. Pane komisaři, vítáme, že jsou vzácná onemocnění Vaší prioritou a máte naši podporu pro realizaci komplexního plánu pro tuto důležitou oblast, které se v Evropě musíme věnovat.

4-0013-0000

Michele Picaro, *a nome del gruppo ECR*. – Signor Presidente, signor Commissario, onorevoli colleghi, le malattie rare rappresentano una delle sfide più complesse per la salute pubblica, colpendo quasi 30 milioni di persone nell'Unione europea, di cui 2 milioni in Italia.

È in questo contesto che l'Unione europea necessita di un quadro normativo solido per promuovere le politiche che sostengono lo sviluppo dei farmaci orfani; la revisione del pacchetto farmaceutico, che si avvierà a breve, sarà un'opportunità per garantire che l'Unione europea resti a lungo un luogo competitivo a livello globale per gli investimenti.

Un aspetto fondamentale da considerare nel processo legislativo è l'esclusività di mercato per i farmaci orfani che, con i suoi dieci anni di protezione, garantisce la stabilità necessaria per l'innovazione. Come anche è cruciale un allineamento tra la direttiva e il regolamento sull'esclusiva di mercato per i medicinali orfani, per assicurare una protezione equa dei farmaci orfani, in particolare per quelli che attendono l'autorizzazione prima dell'entrata in vigore del nuovo regolamento.

Con questo approccio l'Unione europea non lascerà indietro nessuno e farà la differenza per milioni di persone che aspettano risposte.

4-0014-0000

Stine Bosse, *for Renew-Gruppen*. – Hr. formand! Forestil jer en mor, der hver nat vækker sit barn for at sikre, at han stadig trækker vejret. En far, der bruger mere tid på at navigere i et kaotisk sundhedssystem end på at lege med sin datter. Eller et forældrepar, som kastes rundt mellem forskellige læger og sygehuse, og som bruger flere år på at få den rigtige diagnose. I Danmark kan man føle sig helt alene med sin sjældne diagnose, men i Europa lever 36 millioner borgere med en sjælden sygdom.

Så hvorfor er det, at vi ikke gør mere sammen på det her område? Stod det til mig, arbejdede vi meget tættere sammen i EU, delte data, delte erfaringer og ekspertise med hinanden. Gennem samarbejde på tværs af landegrænser kan vi sikre, at de bedste læger, de bedste forskere og de bedste løsninger når frem til patienter, der har allermest brug for det. Så kære kommissær Várhelyi; tak for at gå i gang. Jeg forventer mere, og vi vil selvfølgelig kæmpe for, at alle 36 millioner europæere får et bedre liv.

4-0015-0000

Tilly Metz, *on behalf of the Verts/ALE Group*. – Mr President, Commissioner, for me, there are around 30 million reasons why we need to take bold action now: 30 million children and adults across Europe every day have to fight. The fight is mostly very unequal as diagnosis takes years, patients have limited treatment options, specialists may not be anywhere close and treatments are very expensive. They have to fight because they live with rare diseases, which are mostly genetic and concern children.

Rare diseases are not rare if we look at them all together. That is exactly where the EU added value is. This is why a European action plan on rare diseases is needed and is needed now. A plan including adequate funding, coordinated research and a shared European vision for national actions. An ambitious plan that also addresses the shortcomings of current pharmaceutical monopolies making treatments unaffordable.

The story of Caplacizumab – a medicine for a blood disorder – clearly shows that the current monopolistic model is not fit for purpose. A Belgian public university funded research for Caplacizumab. Now Belgium pays EUR 5 000 per dose because the medicine was monopolised by Sanofi.

From a purely business perspective, governments only de-risking early research and giving up control makes sense. But from a public health perspective, it is a failure. That is why it is time for the public to take bold action on medicines along the whole life cycle, and bring joint procurement to life. Otherwise, the lack of treatment options will always be a fight for patients.

4-0016-0000

Catarina Martins, *em nome do Grupo The Left*. – Senhor Presidente, Senhor Comissário, nós não podemos continuar a deixar abandonados os pacientes com doenças raras.

As doenças raras afetam 36 milhões de cidadãos da União Europeia, 8 % da população. Estamos a falar de um espectro de cerca de 7 000 doenças, a maioria delas crónicas, incapacitantes ou mesmo mortais. 95 % não têm tratamento específico e o diagnóstico é muitas vezes tardio (em média, demora cinco anos). E, depois de todo o sofrimento até se chegar a um diagnóstico, a probabilidade de a terapia ter um custo inabarcável para a pessoa doente e a sua família é muito alta.

Como se já não bastasse sofrer de uma doença rara, ainda é preciso ter sorte sobre o país onde se vive ou nasce. O acesso a diagnósticos atempados, a medicação e tratamentos específicos depende de uma lotaria geográfica.

Vejamos, os testes de despiste em recém-nascidos, que são fulcrais para a deteção e o tratamento atempados, variam entre a testagem de apenas duas patologias, como na Roménia, ou 49, como na Itália.

O acesso a medicamentos órfãos e tratamentos inovadores depende da rapidez com que cada Estado-Membro aprova os medicamentos a nível nacional, após a autorização da EMA, mas também do investimento dos Estados em investigação e cuidados especializados e, claro, da vontade e do interesse da indústria farmacêutica em comercializar estes produtos. E a indústria farmacêutica só nos dá provas de que não é de confiança.

É tempo de um Plano de Ação Europeu para as doenças raras, um plano que seja multidisciplinar e abrangente, que reforce a capacidade pública e promova a partilha do conhecimento, inovação, técnicas de diagnóstico inovadoras e também o acesso a medicamentos e tratamentos inovadores a todos os portadores de doenças raras, sem exceção.

E é tempo de criar um fundo europeu que financie o acesso aos tratamentos e cuidados, independentemente do país onde os doentes nasçam e vivam, e imponha regras à indústria farmacêutica.

4-0017-0000

Christine Anderson, *im Namen der ESN-Fraktion*. – Herr Präsident! Millionen Menschen in Europa leben mit seltenen Krankheiten – sie verdienen unser Mitgefühl, unseren Respekt und brauchen aber auch Hilfe. Der Ruf nach einem zentralen EU-Aktionsplan klingt deshalb gut. Doch ist er das am Ende wirklich? Die Kompetenzverteilung zwischen der EU und den Mitgliedstaaten ist kein Selbstzweck. In den EU-Verträgen ist eindeutig geregelt, dass die Gesundheitspolitik den Mitgliedstaaten zugewiesen ist. Dort, auf nationaler Ebene, ist diese auch sehr viel besser aufgehoben – denn je näher am Bürger, desto besser.

Warum also sollte die EU bei seltenen Krankheiten die Koordinierung übernehmen? Koordinierung läuft immer auf Kontrolle und Diktat hinaus. Wer unter dem Vorwand, Kranken und Schwachen helfen zu wollen, mehr Macht nach Brüssel ziehen will, der handelt eben nicht für das Volk, sondern gegen das Volk.

Meine Damen und Herren, wahre Hilfe kommt nicht aus der Bürokratiehöhle der EU. Nein, sie kommt aus den souveränen Staaten, die Verantwortung für ihre Bürger übernehmen und tatsächlich in deren besten Interesse handeln. Dabei sollten wir es doch einfach belassen.

4-0018-0000

András Tivadar Kulja (PPE). – Tisztelt Elnök Úr! Két név: Zente, Adin. Két magyar gyermek, akik története bejárta a magyar médiát. Ők is ritka betegségben szenvednek, mint 30 millió társuk Európában. Ők szerencsések voltak: közösségi összefogás segítségével hozzájutottak az életmentő gyógymódhoz.

Azonban nem mindenki ilyen szerencsés. Beni, Dominik: fiatal, életvidám, öt éves gyermekek, akik halálos izomsorvadásban szenvednek. Olyanban, amire van terápia, de az mégis elérhetetlen Magyarországon. A szüleik pedig nap mint nap úgy kelnek fel, hogy ha nem sikerül összegyűjteniük a több százmillió forintot, akkor gyermekük nem éli meg a felnőttkort.

A magyar kormány pedig nem segít rajtuk. Nemhogy nem segít, hanem egy alapítványba szervezte ki az életmentő, egyedi méltányossághoz kötött gyógyszerek engedélyeztetését, hogy a törvények alól kibújva gyermekek életén spóroljon.

Ezért összehangolt cselekvésre van szükség, közös megoldásra. Ha egy tagállam nem tud vagy nem akar segíteni a ritka betegségben szenvedő gyermekeknek és felnőtteknek, mi akkor is segítsünk nekik.

Az európai referenciahálózatokra építve biztosítanunk kell a kutatások és gyógyszerfejlesztések felgyorsítását, szakemberek képzését, centrumok építését és a határon átvélő kezelések biztosítását. Ehhez pedig egy bizottsági akciótervre, a Parlament elhivatottságára és a tagállamok közös munkájára van szükség. Az új történetek szóljanak a közösen megmentett gyermekek életéről.

4-0019-0000

Romana Jerković (S&D). – Mr President, dear Commissioner, dear colleagues, for 94 % of European patients living with rare diseases, there is still no dedicated treatment available. And that's a fact. But until now, Commissioner, we've seen progress only on paper: just new recommendations, new communications, new platforms. But patients cannot be treated with PowerPoint slides. And we really hope that you can change that.

On the other side, however, how can we be sure that the Commission will prioritise rare diseases, when we have seen the EU4Health programme suffer budget cuts? How can we address rare diseases effectively while reducing funding for diagnosis, research and cross-border collaboration?

Dear colleagues, we do indeed need concrete and measurable action that is truly European in scale. We need binding targets for diagnosis and treatment access. We need full integration of the European Reference Networks international system, because no Member State can tackle rare diseases alone. No one! Above all, we need sustainable funding and political ambition to drive innovation in medicine. We have, Commissioner, 30 million reasons for that.

4-0020-0000

Gerald Hauser (Pfe). – Herr Präsident, Herr Kommissar! Alles, was bisher gesagt wurde, brauche ich nicht wiederholen. Sicherlich notwendig, aber Herr Kommissar, wir haben in der EU 450 Millionen Einwohner, und unsere Gesundheitssysteme kollabieren. Das ist das riesengroße Problem.

Wir haben erst jüngst im Gesundheitsausschuss gehört, dass allein im Jahr 2022 1,2 Millionen Ärzte, Pflegepersonal und Hebammen gefehlt haben. Wenn wir jetzt also Mediziner für die seltenen Krankheiten benötigen – die müssen ja auch irgendwo herkommen. Das heißt, wir müssen schauen, dass wir zusätzliche Ärzte bekommen.

Die Antwort der Europäischen Union, in die Digitalisierung zu gehen und zu sagen, wir werden bis zum Jahr 2027 16 Milliarden Euro in die Digitalisierung stecken, wird das Problem nicht lösen. Denn die Menschen wollen von Menschen behandelt werden und nicht von Maschinen.

Bitte, Herr Kommissar, schauen Sie, neben der Notwendigkeit, seltene Krankheiten zu beseitigen, doch bitte primär auch darauf, dass die Menschen zukünftig ein leistungsstarkes, faires Gesundheitssystem haben, wo sie keine Zusatzversicherung benötigen, und dass wir keine Mehrklassengesellschaft haben. Das muss prioritär sein.

4-0021-0000

Francesco Torselli (ECR). – Signor Presidente, signor Commissario, onorevoli colleghi, negli ultimi vent'anni sono stati investiti in Europa più di 3 miliardi di euro nella ricerca sulle malattie rare ma, ciononostante, il 95 % di queste ancora oggi non hanno una cura specifica.

L'Italia, il paese da cui vengo, è il primo paese in Europa e il secondo nel mondo per presa in carico di pazienti attraverso il sistema sanitario nazionale ma, senza l'aiuto dell'Unione europea, questo sistema rischia di saltare.

L'Europa deve sviluppare una strategia comune nel campo della ricerca; deve riconoscere la disabilità delle persone affette da malattie rare per poter fornire aiuti; deve contribuire ai costi delle cure, che spesso sono esorbitanti.

Mi permetta, Commissario, una provocazione: iniziamo a chiamarle "malattie frequenti", invece che malattie rare. Perché in Europa sono 36 milioni le persone colpite, la metà della popolazione di Francia e Italia, il doppio della popolazione di Belgio e dei Paesi Bassi. Pensa che abbia senso ancora oggi chiamarle malattie rare?

4-0022-0000

Vlad Vasile-Voiculescu (Renew). – Domnule președinte, domnule comisar, stimați colegi, în Europa de astăzi, un copil diagnosticat cu o boală rară are șanse complet diferite la viață, în funcție de țara în care s-a născut. În unele state membre, pur și simplu nu există resursele necesare pentru diagnostic sau tratament – uneori, tocmai pentru că vorbim de boli rare și neexistând experiența necesară. Nu poate exista. Iar familiile sunt lăsate să lupte singure.

Avem nevoie urgentă de un plan european de acțiune pentru bolile rare, unul care să permită accesul real la tratament în alte state membre, acolo unde există expertiza necesară. Europa, împreună, poate face de multe ori ceea ce statele membre, separat, nu vor putea niciodată. Cer, așadar, Comisiei Europene să colaboreze cu Parlamentul și cu toate părțile implicate pentru a construi acest plan, pentru că Uniunea Europeană nu înseamnă doar libertatea de a călători, ci și libertatea de a primi tratamentul potrivit la timp, indiferent unde locuiești. Haideți să construim! Avem deja o fundație solidă, avem Directiva privind asistența medicală transfrontalieră, avem Regulamentul privind coordonarea sistemelor de securitate socială. Haideți să construim împreună pe această fundație! Viața acestor copii nu poate aștepta.

4-0023-0000

Ignazio Roberto Marino (Verts/ALE). – Signor Presidente, signor Commissario, onorevoli colleghi, le malattie rare sono diverse da tante altre malattie perché le altre malattie di solito vengono rapidamente diagnosticate e poi, quindi, avviate a un processo di cura.

Nelle malattie rare il paziente non sa di che cosa soffre e vaga da un ospedale all'altro, da un medico all'altro, in modo disperato e brancolando nel buio, a volte nella ricerca di una diagnosi e di una cura che non arriva.

Questa mattina mi è sembrato che la maggior parte degli interventi concordassero sulla necessità di agire: ecco, Commissario, 5,2 miliardi in 25 anni non sono ovviamente sufficienti, e lei lo sa bene.

Il piano biotech è certamente innovativo e importante, ma non basta. È necessario che uniamo i nostri sforzi e li uniamo in maniera davvero transnazionale, per affrontare un problema che riguarda tutti i nostri cittadini.

Insomma, dobbiamo fare uno sforzo comune, e questo sforzo non può avvenire senza risorse. Come si dice: *no money, no mission*.

4-0024-0000

Ondřej Dostál (NI). – Pane předsedající, vážení kolegové, vážený pane komisaři, problémem pacientů se vzácnými onemocněními je dostupnost a úhrada léčby. Takzvaná transparentní směrnice měla zaručit, že o tom, které léky se uhradí, rozhodnou státy ve férovém procesu dle předem známých kritérií s možností soudního přezkumu.

Česká republika si k tomu formálně zavedla úřední systém rozhodování, který je složitý jako egyptologie a zhruba stejně relevantní vůči tomu, co pacienti na konci dne dostanou. To v reálném světě záleží na neveřejných dohodách mezi farmaceutickým byznysem a plátcí a na korupčních bonusech, které dávají farmaceutické firmy nemocnicím. Když se tito hráči nedomluví, pacienti lék prostě nedostanou. Můžou se soudit, ale bohužel než vyhrají, bývá často pozdě.

První krok k nápravě je zjistit na základě tvrdých dat, co se v členských státech skutečně děje a co pacienti skutečně dostávají, a pak začít vymáhat pravidla a práva pacientů, která už dávno platí. Toto je nadstranický úkol a budu vděčný za jakoukoliv součinnost vážených kolegů i pana komisaře.

4-0025-0000

Adam Jarubas (PPE). – Panie Przewodniczący! Panie Komisarzu! Choroby rzadkie dotyczą miliony osób w Europie, a tylko 6% z nich ma terapie i nie w każdym państwie. Ponad 6000 chorób jest w ogóle bez żadnych terapii. Te dramaty, niepewności, wieloletnie diagnozy - średnio 5 lat, brak danych utrudnia badania. Rzadkość uniemożliwia korzyści skali i czyni te terapie bardzo drogimi. Odpowiedzią może być Europa. Pandemia pokazała, że współpraca jest skuteczniejsza od nakręcającego ceny konkurowania o ograniczone zasoby. Wykorzystując europejską skalę, wspólne zakupy, jakie zaproponowano w akcie o lekach krytycznych, możemy obniżyć koszty, na przykład pożegnać społeczne zbiórki na ratowanie dzieci. Razem w Unii możemy zebrać więcej danych. I tu ukłony dla polskiej prezydencji za zakończenie pracy nad europejską przestrzenią danych zdrowotnych. To ułatwi także wykorzystanie sztucznej inteligencji.

Potrzeba zharmonizować w Unii standardy badań przesiewowych, w tym noworodków. Musimy wzmacniać i włączać w opiekę transgraniczną europejskie sieci referencyjne, edukując lekarzy z ich wykorzystania, by skończyć z geograficzną loterią zdrowia, nierównym dostępem do doświadczonych specjalistów. Musimy zabezpieczyć właściwe finansowanie w budżecie po 2027 roku w programach You for Health, Horyzont Europa, w polityce spójności czy na cyfryzację. W komisji SANT właśnie zakończyliśmy publiczne konsultacje zainicjowane w Dniu Chorób Rzadkich. Cieszy udział ponad 4 tysięcy osób i aż 60% indywidualnych pacjentów, którzy powinni być w centrum naszego zainteresowania.

4-0026-0000

Nicolás González Casares (S&D). – Señor presidente, señor comisario, debemos abordar las enfermedades raras de modo necesariamente europeo, en este problema más que en cualquier otro. Afectan al 7 % de la población y hay 8 000 enfermedades diferentes. Muchas familias no encuentran soluciones y muchas de estas enfermedades aparecen con el nacimiento.

Necesitamos un catálogo europeo mínimo obligatorio de cribado de enfermedades raras en el nacimiento. Esta es una necesidad imperiosa: una cartera europea de cribado neonatal. Además, un europeo debe tener la posibilidad de tratar estas enfermedades raras, independientemente de que en su país haya o no solución. Necesitamos esta solución europea. Tenemos los recursos.

Hoy es un día importante, es un día de hablar también del populismo y del antieuropeísmo, y de que eso no llegue a la respuesta europea. Los medicamentos de enfermedades raras no deben ser sometidos a aranceles. Tenemos otras soluciones, como apostar por la innovación en Europa en la legislación farmacéutica. Señor comisario, es el momento de demostrar que usted se baja del barco del antieuropeísmo, del barco de la anticiencia, y se sube a un barco europeo de ciencia e innovación. Es el momento.

4-0027-0000

Marie-Luce Brasier-Clain (Pfe). – Monsieur le Président, Monsieur le Commissaire, à l'heure actuelle, 7 000 maladies rares sont identifiées en Europe, touchant 36 millions de personnes. Ces maladies sont chroniques, invalidantes, voire mortelles, et la plupart ne font pas l'objet de traitements spécifiques. Quant aux coûts des thérapies disponibles, ils sont exorbitants.

En Europe, le délai moyen de diagnostic d'une maladie rare est de près de cinq ans. Les solutions sont connues: un dépistage plus précoce – 70 % des maladies rares se déclarent pendant l'enfance –, une meilleure formation des professionnels et une meilleure sensibilisation des jeunes, car beaucoup d'entre eux retardent les consultations médicales et ignorent les antécédents familiaux de la maladie.

Ce plan d'action européen est souhaitable tant qu'il aide à réduire les disparités entre États, à mieux partager les connaissances, à stimuler la recherche-développement et à améliorer l'intégration socioprofessionnelle des patients, et tant qu'il encourage la production de médicaments orphelins, qui ne survivraient pas sans financement public.

Mais tout le succès de cette politique repose sur des politiques nationales appuyées par la Commission et pas l'inverse. J'ajoute, chers collègues, qu'il y a, en Europe, une autre maladie rare qui frappe la démocratie: c'est celle qui persécute des opposants politiques de premier rang. Hier, l'AfD en Allemagne, le candidat roumain Georgescu, le maire d'Istanbul, et aujourd'hui Marine Le Pen. Et vous donnez des leçons de démocratie?

4-0028-0000

Le Président. – Je vous remercie de bien vouloir rester sur le sujet.

4-0029-0000

Billy Kelleher (Renew). – Mr President, the issue of rare diseases and how we, as a society, support people living with them should be a priority for us all. Fragmentation of services and supports results in one thing: poor outcomes for people with rare diseases and the families supporting them. We need to come together as a Union and address the bottlenecks in terms of developing new medicines and treatments, improving diagnosis and especially securing diagnosis at a far earlier point.

A simple but effective change will be a rollout of a gold standard neonatal testing scheme, or a heel test, across the 27 Member States. There shouldn't be a postcode lottery when it comes to neonatal testing. We must urgently address the unmet medical needs and inequality in patient journeys. We must pool our resources and, crucially, our expertise. Rare diseases, by their nature, are rare. Not every country or region can have a clinical centre of excellence for every type of rare disease.

Europe needs to become what it once was: a hub of innovation and research. We must come together to ensure that we can conduct proper clinical trials. We have the skills, the resources and the values to really make an impact in addressing rare diseases. But we must do it working collectively.

4-0030-0000

Diana Iovanovici Șoșoacă (NI). – Domnule președinte, voi vorbi în limba română. Dacă 8 % din bolile din Europa sunt boli rare, înseamnă că nu mai sunt boli rare, ceea ce înseamnă că încep să se generalizeze. Cele mai multe dintre bolile rare sunt din spectrul cancerului.

În urmă cu o săptămână, partidul S.O.S. România pe care îl conduc a făcut o conferință în Parlamentul României despre cancer. Conform cercetărilor, până în 2050, 75 % din populația globului va avea cancer. Acesta este lucrul care trebuie să ne îngrijoreze.

În România, tratamentele pentru cancer nu sunt gratuite. Bolnavii mor pe capete. 95 % din bolnavi mor cu zile. Ministrul Sănătății, Rafila, spune că nu îl interesează, că nu este problema lui, că nu este problema lui să se ocupe de bolnavii de cancer. Dacă ai nevoie de analize, te programează peste șase luni. În cancer, șase luni înseamnă moarte.

Nu avem spitale, nu avem bani, nu avem medici, nu avem medicamente. Aceasta este România din Uniunea Europeană. Așa că, vă rog, faceți o strategie de aici ca să poată să vă asculte și ministrul din România.

4-0031-0000

Rosa Estaràs Ferragut (PPE). – Señor presidente, señor comisario, las enfermedades raras afectan a millones de personas: entre veintisiete y treinta y seis millones en la Unión Europea; tres millones en mi país, España. Muchas de estas enfermedades se manifiestan en la infancia y pueden ser potencialmente mortales. Causan un sufrimiento significativo porque habitualmente son complejas, crónicas y degenerativas. El 95 % de estas enfermedades raras no tienen tratamiento aprobado y el 50 % no tienen tampoco diagnóstico aprobado. De hecho, se puede tardar una media de seis años en identificarlas.

Necesitamos sin ninguna duda, señor comisario, este plan europeo sobre las enfermedades raras para poder apostar por mucha más investigación, un mejor acceso al diagnóstico temprano — esto es fundamental— y también a los medicamentos huérfanos, que son aquellos que pueden curar estas enfermedades.

Generan mucho impacto económico y, por lo tanto, también habría que abordar esta vertiente. Y la atención a los cuidadores: las familias y los cuidadores, en un porcentaje altísimo, en más del 65 %, son mujeres y, por lo tanto, se convierten en muy vulnerables. Es un reto no solamente sanitario; es asimismo un reto económico, pero también social.

Hemos de trabajar también para que no se discrimine a los pacientes. En la nueva Estrategia Farmacéutica para Europa se priorizaron las enfermedades raras porque representan una enorme necesidad médica no cubierta. Por lo tanto, animo al comisario a priorizar este plan europeo sobre las enfermedades raras para conseguir una Europa de la salud mucho más fuerte.

4-0032-0000

Nikos Papandreou (S&D). – Mr President, Commissioner, it sounds like a conundrum, 30 million rare diseases, as that doesn't sound so rare, but we know what we mean. Per disease it's very rare, but in total it's not. This leads naturally to one point I want to make – something that sounds technical: cross-border clinical trials, as that way we pool the few per country, but that also fits into our European vision of countries working together, with health systems connecting more, universities doing more research. And given the tariffs that were announced yesterday, which don't include pharma yet, but include reshoring of American companies like Eli Lilly, we need to make European solutions for our human problems, and then we'll solve problems not just for Europe, but for all of us.

4-0033-0000

Margarita de la Pisa Carrión (Pfe). – Señor presidente, Comisión, señorías, la vida es el principio de todo y, sin ella, no podemos hablar de derechos. Hoy quiero dar la voz a más de treinta millones de europeos que padecen enfermedades raras, cuyo derecho a vivir y hacerlo dignamente está en juego.

España ocupa el puesto veintisiete de treinta y tres países europeos en acceso a medicamentos huérfanos, con un tiempo medio de aprobación de 517 días y un diagnóstico que tarda una media de cinco años. Muchos pacientes no cuentan con este tiempo.

Utilicemos los recursos en investigaciones bien orientadas, que permitan conocer en profundidad estas enfermedades y, así, responder con nuevas herramientas terapéuticas y nuevas esperanzas. Es aquí donde la dimensión europea puede marcar una diferencia. Pongamos el foco en el paciente, garantizando sus cuidados. Apoyemos a las familias.

Los gastos son a veces inasumibles. Hay personas que necesitan atención 24/7. Jordi Sabater, que lleva diez años con ELA, denuncia que, en el Estado español, a quien no puede cubrir sus cuidados, la única opción que se le ofrece es la muerte, en lugar de ayudas para vivir. La salud debe ser una inquietud transversal de los grupos políticos, donde se espera que trabajemos juntos, especialmente desde Europa.

4-0034-0000

Μιχάλης Χατζηπαντέλα (PPE). – Κύριε Πρόεδρε, αγαπητοί συνάδελφοι, αυτή τη στιγμή υπολογίζεται ότι υπάρχουν περίπου 6 000 με 8 000 σπάνιες παθήσεις, οι οποίες προσβάλλουν περίπου 30

εκατομμύρια Ευρωπαίους πολίτες. Πίσω από κάθε περίπτωση κρύβεται μία ανθρώπινη ιστορία. Ενήλικες και παιδιά αναζητούν απεγνωσμένα διάγνωση και περιμένουν τη θεραπεία.

Για τις μικρότερες χώρες της Ένωσης, όπως η Κύπρος, το πρόβλημα είναι ακόμα μεγαλύτερο. Απαιτείται άμεσα δράση σε ευρωπαϊκό επίπεδο. Κύριε Επίτροπε, οι ασθενείς σε μικρές χώρες δικαιούνται το ίδιο επίπεδο θεραπείας όπως και σε μεγαλύτερες χώρες που έχουν περισσότερα περιστατικά και τεχνογνωσία.

Η δημιουργία και ενίσχυση εθνικών μητρώων σπάνιων παθήσεων στο πλαίσιο των ευρωπαϊκών δικτύων αναφοράς είναι απαραίτητη για την αποτελεσματική καταγραφή, παρακολούθηση και διαχείριση σπάνιων νοσημάτων σε εθνικό και ευρωπαϊκό επίπεδο. Πρέπει να αξιοποιήσουμε τη συλλογική μας δύναμη για την προώθηση της πρόληψης, της έγκαιρης διάγνωσης, της ισότιμης πρόσβασης σε υψηλής ποιότητας υγειονομική περίθαλψη, καινοτόμες θεραπείες και κοινωνικές υπηρεσίες. Μαζί μπορούμε να αλλάξουμε την πραγματικότητα.

4-0035-0000

Marta Temido (S&D). – Senhor Presidente, Senhor Comissário, caros colegas, foi há quase três décadas que o Parlamento e o Conselho adotaram um programa de ação em matéria de doenças raras — doença de Fabry, de Duchenne, de Behçet ou — especialmente presente no meu país, Portugal — doença de Corino de Andrade, patologias que representam pequeno número de casos na sociedade, mas colocam grandes dificuldades aos doentes, às famílias e aos sistemas de saúde nacionais.

Por isso é tão necessário o novo Plano de Ação Europeu e que ele melhore agora o que já foi criado: a Plataforma Europeia para o Registo de Doenças Raras, as Redes de Referência Europeias, a autorização de medicamentos órfãos ou a capacitação de organizações de doentes.

Mas não esquecemos o muito que falta fazer: mais de 95 % das doenças raras não têm qualquer tratamento disponível no mercado e o tempo médio de diagnóstico são 5 anos. Por isso, neste mandato temos de acelerar o diagnóstico e o tratamento de doenças raras na União, mas temos sobretudo de comprar em conjunto, negociar em conjunto medicamentos órfãos.

4-0036-0000

Viktória Ferenc (PFE). – Tisztelt Elnök Úr! Ma egy olyan fontos témáról beszélünk, amely becslések szerint az EU-ban 30 millió embert érint, mégis gyakran háttérbe szorul a közbeszédben.

Képzeli-e, milyen érzés lehet egy olyan diagnózissal szembesülni, amelyről alig hallott valaki, és amelyre alig van elérhető kezelés. A ritka betegségekről van szó. A tagállamok mellett az Európai Unió felelőssége, hogy az ezzel élők is időben hozzájussanak a diagnózishoz és a megfelelő kezeléshez.

Éppen ezért támogatjuk a Bizottság ritka betegségekre vonatkozó cselekvési tervét. Ez nem csupán egészségügyi, hanem szociális kérdés is, hiszen a diagnózis fizikailag és mentálisan is megviseli mind az érintetteket, mind azok családtagjait.

Kiemelten fontosnak tartom az európai referenciahálózatok megerősítését és bővítését is. A tavaly lezajlott magyar elnökség is prioritásként kezelte a témát, elősegítve az európai szintű párbeszédet és az érintettek jobb ellátását.

A Bizottságot arra kérem, hogy támogassa a tagállamokat diagnosztikai és ellátási kapacitásaik további fejlesztésében.

(A felszólaló hajlandó válaszolni egy kékkártyás kérdésre)

4-0037-0000

András Tivadar Kulja (PPE), kékkártyás kérdés. – Örülök, hogy itt az Európai Parlamentben legalább szóban támogatják a ritka betegségben szenvedőket. Ugyanakkor szeretném megkérdezni, hogyha ez az Önök kormányának valóban fontos, hogy segítsenek a ritka betegségben élő pácienseknek, akkor miért szervezték ki egy állami szervből egy átláthatatlan alapítványba az egyedi méltányosságok elbírálását? Miért szervezték ki egy olyan alapítványba, amelynek nem kell megfelelnie a törvényi előírásoknak, amik eddig vonatkoztak ezekre a kérelmekre? És miért van az, hogy már most rengeteg család kapott elutasító választ ettől az alapítványtól? Miért csinálták ezt?

4-0038-0000

Viktória Ferenc (PFE), kékkártyás válasz. – Szeretném felhívni a figyelmét, hogy ebben a vitában ez az első kék kártya, és szeretném azt is kifejezni, hogy nagyon szomorú vagyok, hogy az Önök delegációja arra használja ezeket az európai parlamenti vitákat, hogy kampánycéllal támadják a magyar kormányt. Egyrészt arra szeretném felhívni a figyelmét, hogy itt az Európai Parlamentben inkább a megoldásokról kellene beszélnünk.

Magyarországon 5–8 ezer ember szenved ritka betegségekben, ezek közül körülbelül, az 5–8 ezer ember között 6–7 ezer betegséget diagnosztizáltak. Tehát nagyon összetett kérdésről van szó, és arra szeretném Önt bátorítani, hogy kövesse figyelemmel, szoros figyelemmel Magyarországnak a második nemzeti tervét, amit a ritka betegségek kezelésére dolgoz ki.

4-0039-0000

Letizia Moratti (PPE). – Signor Presidente, signor Commissario, onorevoli colleghi, le malattie rare colpiscono l'8 % della popolazione europea, 36 milioni di persone; circa 7 000 tipi diversi di malattie, la maggior parte delle quali croniche, invalidanti o potenzialmente letali che compromettono la salute e la qualità della vita dei pazienti; fino al 95 % di queste malattie non dispone di trattamenti specifici e le terapie disponibili hanno costi esorbitanti.

L'Unione ha proposto iniziative che dobbiamo sviluppare: la ricerca con Orizzonte Europa; le reti di riferimento europee, che riuniscono specialisti e centri di ricerca in tutta Europa per migliorare la diagnosi e il trattamento; la piattaforma europea per la registrazione delle malattie rare. Ma per una sfida così grande servono risposte più forti.

Tra queste, partenariati pubblico-privati per potenziare ricerca, innovazione e trasferimento tecnologico; serve un quadro normativo che favorisca gli investimenti; occorre ora, con urgenza, una strategia europea organica, che superi la frammentazione che esiste in questo momento e che dia realmente la possibilità a tutti i pazienti di poter avere accesso ai trattamenti, indipendentemente dallo Stato di provenienza.

4-0040-0000

Estelle Ceulemans (S&D). – Monsieur le Président, chers collègues, entre 27 et 36 millions de personnes sont diagnostiquées comme souffrant d'une maladie rare dans l'Union européenne. Un chiffre largement sous-estimé.

Même quand ils sont diagnostiqués, c'est un véritable parcours du combattant pour ces malades et pour leurs proches, car peu de traitements sont adaptés ou accessibles financièrement. La

recherche et le développement de médicaments et de traitements adaptés n'intéressent pas les industries pharmaceutiques car ils ne sont pas jugés rentables, ce qui entraîne de fortes inégalités sociales et de santé, voire un risque létal pour les malades. C'est totalement inacceptable!

Il est urgent que la Commission propose enfin un plan d'action clair pour les maladies rares, qui fasse de la recherche et du développement de thérapies innovantes et adaptées une priorité de la politique pharmaceutique européenne et qui inclue la création d'un instrument de solidarité financier européen pour assurer l'accès à des traitements adaptés. La solidarité avec les patients atteints d'une maladie rare, c'est aussi tout le sens et la force de notre projet européen.

4-0041-0000

Laurent Castillo (PPE). – Monsieur le Président, Monsieur le Commissaire, mes chers collègues, guérir d'une maladie rare ne suffit pas. Trop souvent, ceux qui ont survécu doivent encore affronter un dernier obstacle: celui du regard des banques, des assureurs et de la société.

Je le dis avec émotion: comme chirurgien, j'ai accompagné des enfants atteints de cancers rares. J'ai vu leur courage, leur combat, leur résilience, mais j'ai vu trop souvent que, même une fois guéris, ils restaient prisonniers d'un passé qu'ils n'avaient pas choisi. Le droit à l'oubli n'est pas un luxe, c'est un droit fondamental. Il est temps que l'Union européenne l'inscrive enfin dans sa législation, pour que ces enfants, devenus adultes, puissent construire leur avenir sans entrave.

Guérir ne suffit pas, pour être libre. Être libre, c'est pouvoir oublier.

4-0042-0000

Leire Pajín (S&D). – Señor presidente, en este debate deberíamos empezar por el lenguaje, porque más que de enfermedades raras estamos hablando de enfermedades que afectan a entre veintisiete y treinta y seis millones de personas en la Unión Europea. Hablamos de entre seis mil y ocho mil enfermedades diferentes, algunas de las cuales pueden afectar tan solo a unos pocos, pero otras pueden afectar a más de 245 000 personas. Aproximadamente, además, el 80 % de estas enfermedades son de origen genético, lo que resalta la necesidad urgente de atención y recursos en investigación y en tratamiento.

Es verdad que hemos avanzado. Hemos coordinado mejor la investigación. Hemos hecho una apuesta por coordinar y tener mejores datos agregados. Pero necesitamos ir mucho más allá. Y, sobre todo, necesitamos acompañar a las familias, darles un mensaje de esperanza, un mensaje de compromiso político de verdad, de acompañamiento a sus circunstancias sociales y a su esperanza de vida.

Por eso creemos que hay que seguir avanzando, creemos que la salud es un derecho inalienable y debemos garantizar que exista igualdad en el acceso de todas las personas, también de las que padecen estas enfermedades.

4-0043-0000

Interventions à la demande

4-0044-0000

Maria Grapini (S&D). – Domnule președinte, domnule comisar, închipuiți-vă că 30 de milioane de oameni bolnavi ar fi ascultat ce ați spus dumneavoastră astăzi. Așa, ne-ați spus că o să fie, o să facem, am cheltuit în 25 de ani 5 miliarde, ceea ce înseamnă mai nimic în cercetare. Credeți că n-ar fi trebuit să ne prezentați aici o situație exactă sau măcar să ne propuneți? Ce veți face ca să

funcționeze tratamentul transfrontalier? Ce veți face ca din cercetare să rezulte totuși medicamente pentru oamenii bolnavi?

Părinții care își cară pe brațe copiii cu distrofie musculară, credeți că mai cred în sloganul nostru că nimeni nu este lăsat în urmă? Cum să facem? Cum să fiți credibil când nu ați venit să ne propuneți nimic? Ne-ați dat niște cifre statistice pe care le găseam.

Vă cer, domnule comisar, veniți în următoarea sesiune și spuneți-ne clar ce faceți ca să faceți prevenție, să identificăm din timp aceste boli rare. Ce facem ca să avem medicamente și acces la medicamente în toate statele membre? Pentru că dacă veți face o situație, veți vedea câtă diferență este. În fiecare zi primesc mesaje să donăm bani pentru a fi tratați acești copii sau aceștia adulți cu boli rare.

4-0045-0000

Alexander Jungbluth (ESN). – Herr Präsident! Ich freue mich heute über dieses Thema, weil das ist tatsächlich eine der wenigen Positionen, wo die Europäische Union einmal etwas Vernünftiges tun kann, nämlich in dieser Zusammenarbeit bei der Bekämpfung seltener Krankheiten. Aber ich möchte auch kurz auf den Kollegen Kulja eingehen, der gerade gesprochen hat, der das Gesundheitssystem in Ungarn ja scharf kritisiert hat.

Und ich sage Ihnen nur eins, Herr Kulja: Ich hoffe sehr, dass Sie nicht auch hier von der CDU lernen. Sie sind ja ein Merkel-Jünger – Ihre Partei –, Sie werden also von der CDU hoffentlich nicht nur lernen, wie man Terror nach Deutschland bringt, wie man es schafft, dass Massenvergewaltigungen nach Ungarn kommen, sondern ich hoffe, dass Sie es auch nicht zu verantworten haben, dass Sie ein marodierendes Gesundheitssystem in Ungarn etablieren werden. Ich hoffe, dass die Ungarn vor Merkel-Jüngern wie Ihnen verschont bleiben.

4-0046-0000

Lukas Sieper (NI). – Signor Presidente, onorevoli colleghi, cari cittadini d'Europa, le malattie rare colpiscono milioni di persone in Europa: spesso sono bambini, spesso mancano cure e spesso chi è malato si sente solo.

L'Europa deve essere la risposta, con un piano di azione europeo per le malattie rare, un piano che unisca ricerca, accesso ai farmaci e solidarietà.

Noi chiediamo più finanziamenti per la ricerca pubblica, regole comuni per un accesso uguale ai trattamenti e una rete europea per aiutare le famiglie e i medici.

Perché una malattia è rara, ma la dignità di ogni persona è uguale.

L'Europa non può lasciare nessuno indietro. Non su questo, mai!

4-0047-0000

Kateřina Konečná (NI). – Pane předsedající, pacienti se vzácnými onemocněními a jejich rodiny často čelí zoufalé situaci – léta nejistoty při diagnóze, nedostupnost účinné léčby nebo její astronomická cena. To je v Evropě 21. století nepřijatelné. Nemůžeme tuto oblast ponechat pouze v rukou trhu a farmaceutických gigantů, pro které jsou často tito pacienti prostě komerčně nezajímaví anebo naopak zdroj extrémních zisků. Zde musí nastoupit princip skutečné evropské solidarity. V minulém volebním období se mi podařilo do vyjednávacího mandátu Parlamentu k farmaceutickému balíčku dostat návrh hromadných nákupů léků pro tato onemocnění. Byla bych

moc ráda, kdybyste jej, noví kolegové, v podzimních trialozích přijali za svůj. Potřebujeme rovný přístup k cenově dostupným lékům pro všechny občany bez ohledu na to, ve které zemi žijí nebo jaké jsou jejich finanční možnosti. Proto tento akční plán nesmí zůstat jen na papíře, pane komisaři. Potřebujeme závazné cíle a mechanismy, dostatečné navýšení veřejného financování výzkumu a vývoje a podporu přeshraniční spolupráce center expertízy.

4-0048-0000

(Fin des interventions à la demande)

4-0049-0000

Olivér Várhelyi, *Member of the Commission*. – Mr President, honourable Members, I want to thank you for this discussion. I'm reassured that we all agree that we need to do more, and we need to do together for fighting rare diseases. And there is no winning of this battle without investing more, without providing more support to our citizens with rare diseases and without getting them the medication and the treatment they need. As it has been also made in the beginning, we're here together to deliver on this, and we are here to improve the health of our citizens, no matter where they live, no matter what disease they suffer from or what is the complex condition that they have.

Today's discussion has also shown the limits of what we can do. The limits which are called 'budget', the limits of the development in research and the limits when it comes to the availability of medicinal products. And these are the very topics this Commission is already addressing. We have launched significant actions in research. With the Biotech Act, we will not only promote further research, but we anticipate a major scientific breakthrough that will bring treatment, personalised medicine, personalised prevention much faster to our patients.

The Critical Medicines Act, proposed by this Commission, is to address the very problem that we see with rare disease and orphan drugs, and that is that markets are not economically viable because of the size of the population. With the Critical Medicines Act, the joint procurement and the other tools at hand to repatriate production to Europe provides a completely different perspective in addressing shortages related to rare diseases and orphan medicines. This is exactly why the scope of that proposal was extended to these areas.

And finally, I'm very pleased to hear the confirmation about not only the usefulness, but the major added value the European reference network represents. As I said, now is the time to mainstream this and to make it fully a part of the national healthcare systems.

4-0050-0000

Le Président. – Monsieur le Commissaire, j'ai une demande d'intervention pour un fait personnel, sur la base de l'article 180 du règlement, émanant de notre collègue, M. Kulja, à la suite de ce qu'il interprète comme étant une mise en cause personnelle dans l'intervention de M. Jungbluth.

4-0051-0000

András Tivadar Kulja (PPE). – Sajnálom, hogy ilyen személyes támadásokba bocsátkozik az Önök pártja. Szeretném tisztázni, hogy a Tisza nem támogatja az illegális migrációt. Mi az európai határok megerősítése mellett érvelünk, és ezért küzdünk, és ugyanúgy felemeltük a hangunkat, amikor embercsempészeket engedtek szabadon Magyarországon. A magyar kormány kétezer embercsempészt engedett szabadon Orbán Viktor utasítására. Sajnálom, ha Ön esetleg a Fidesztől más információt kapott is, Önt megvezették, viszont a Tisza Párt és én személyesen sosem ... *(az elnök megvonja a szót a felszólalótól)*

4-0052-0000

Le Président. – Je vous demande de bien vouloir rester sur les faits personnels puisque vous avez invoqué l'article 180 du règlement. Il me semble qu'aucun fait personnel n'a été entendu dans votre intervention. Nous en restons donc là.

Le débat est clos.

Déclarations écrites (article 178)

4-0052-5000

Victor Negrescu (S&D), in writing. – More than 30 million people in Europe are living with a rare disease. Behind each number is a life, a family, a daily struggle – and far too often, a lack of access to diagnosis, treatment, and support.

That's why we urgently need a strong and ambitious European Action Plan for Rare Diseases – one that delivers real results for patients, families, and healthcare systems across the EU.

In Romania and in many other Member States, people wait years for a diagnosis. Treatments are either unavailable or unaffordable. This inequality is unacceptable in a Union that promises equal rights and equal opportunities.

We must invest more in research, support cross-border cooperation, ensure access to medicines, and integrate the prevention and treatment of rare diseases into national and European health strategies.

This is about dignity, inclusion, and equity. Europe must act – and it must act now.

4. Création d'une journée européenne des justes (débat)

4-0054-0000

Le Président. – Nous pouvons à présent appeler à l'ordre du jour le débat sur la déclaration de la Commission concernant la création d'une journée européenne des justes [2025/2638(RSP)].

4-0055-0000

Olivér Várhelyi, Member of the Commission. – Mr President, honourable Members, I am very pleased to see that you have included on the plenary agenda today a debate on the occasion of the European Day of the Righteous.

The memory of Europe's history is the common heritage of all Europeans today and also for future generations. Reconciliation with the legacy of the crimes committed by totalitarian regimes requires sharing and promoting this memory. In this context, it is also important to commemorate those who have stood up against crimes against humanity and against totalitarianism.

Our history is marked by dark chapters, in particular during and after the Second World War, the Nazi crimes and the Holocaust, the Soviet occupation, and the crimes committed in Central and Eastern Europe under the totalitarian rule of Communist regimes. We need to remember these dark chapters and their victims, and we need to remember those who stood against them.

The Commission has established 31 August, the date of the Molotov-Ribbentrop pact between Nazi Germany and the Soviet Union, as the official day of the memory of the millions of victims of totalitarian regimes. The Commission encourages the Member States to examine the possibility to adhere to this Europe-wide day in light of their own history and specificities.

Remembrance of the crimes committed by totalitarian regimes is essential for educating younger generations – essential to educate them about the importance of promoting democracy and fundamental rights.

Within its competence, the Commission facilitates the process of remembrance by encouraging discussion and sharing of experiences, as well as promoting joint projects. In particular, the Citizens' Equality, Rights and Values Programme supports remembrance actions reflecting the causes of totalitarian regimes, in particular Nazism, but also Fascism.

Honourable Members, the Righteous Among the Nations were individuals who saved Jews during the Shoah at the risk of their own lives. Next to the World Holocaust Centre, Yad Vashem, a tree has been planted for each of them. These heroes helped Jews in their homes, brought up Jewish children as if they were their own, helped Jews to escape Nazi persecution.

Their actions, and those of many of the righteous standing up against crimes elsewhere, should serve as an inspiration for us today to stand up against injustice in today's world, with the rise in anti-Semitism and hatred.

It is our duty to speak up. The courage of these heroes should inspire us to contribute to a world of justice, common values and respect for all people.

Thank you for your attention.

4-0056-0000

Letizia Moratti, *a nome del gruppo PPE*. – Signor Presidente, signor Commissario, onorevoli colleghi, Schindler, Irena Sendler, Giorgio Perlasca sono solo alcuni tra le donne e gli uomini riconosciuti come giusti tra le nazioni, persone che, con le loro azioni eroiche, hanno rischiato la propria vita per salvare esseri umani dal genocidio nazista della Shoah.

A questi nomi si aggiungono i premi Nobel Mandela per la lotta all'apartheid; Mohammadi per la battaglia per i diritti umani in Iran; Mukwege per la lotta contro gli stupri in Congo.

Oggi, infatti, giusto è chiunque, in qualsiasi parte del mondo, abbia salvato vite umane, combattendo contro i genocidi e difendendo la dignità umana sotto i regimi totalitari.

Più di dieci anni fa questo Parlamento, con il sostegno di tutti i gruppi politici, domandava l'istituzione di una Giornata europea dei Giusti; nonostante ad oggi il 6 marzo sia riconosciuto come Giornata europea dei Giusti da alcune istituzioni e Stati membri, e nonostante la creazione di numerosi giardini dei Giusti, la visibilità della ricorrenza rimane limitata.

L'Unione europea è un simbolo a livello mondiale della promozione dei valori fondamentali e dei diritti umani, della democrazia e della lotta contro i totalitarismi. Il primo passo per combattere i regimi oppressivi è valorizzare la memoria culturale e storica dell'Europa.

In un mondo in cui il linguaggio dell'odio si diffonde con crescente facilità, le storie dei Giusti ci ricordano il valore insostituibile della coscienza e del coraggio perché una società giusta pone le sue fondamenta sulle testimonianze di lotta all'indifferenza e alla paura.

Per queste ragioni chiediamo con forza il riconoscimento ufficiale della Giornata dei Giusti e la diffusione dei giardini dei Giusti in Europa, come elementi per riflettere sul coraggio di chi ha difeso la dignità umana e come strumento educativo e di promozione tra le future generazioni, di consapevolezza e responsabilità rispetto al coraggio morale e alla resistenza all'oppressione.

4-0057-0000

Pierfrancesco Maran, *a nome del gruppo S&D.* – Signor Presidente, signor Commissario, onorevoli colleghi, i giusti sono coloro che, nei momenti più bui della nostra Storia, hanno scelto di non voltarsi dall'altra parte, di provare a fare la differenza.

Anche durante il nazismo e sotto le dittature comuniste c'è chi ha detto no, mettendo a repentaglio la propria vita: un gesto che la comunità deve riconoscere, tramandare di generazione in generazione.

Da qui sono nati i giardini dei Giusti, che stanno fiorendo in tanti luoghi del mondo; un'esperienza che conosco bene, perché questo progetto ha messo solide radici anche nella mia Milano, grazie all'associazione Gariwo.

E oggi ne abbiamo ancora più bisogno, perché va cercato chi si distingue per difendere il bene anche dalle tante ingiustizie e massacri che accadono ora intorno a noi.

Il 10 maggio 2012, in quest'Aula, è stata approvata una dichiarazione di sostegno all'istituzione di una Giornata europea dedicata ai Giusti; quella dichiarazione, lo ricordava poco fa la collega Letizia Moratti, era sostenuta da tutti i gruppi parlamentari e, voglio ricordarlo qui, aveva tra i firmatari e promotori David Sassoli. Fu scelta la data del 6 marzo.

Caro Commissario, il tema è diverso da quello della giornata che ricordiamo il 31 agosto e, in questo dibattito, sono a chiedere che finalmente si dia attuazione a quella dichiarazione, riconoscendo per il 6 marzo in tutta Europa la Giornata dei Giusti.

4-0058-0000

Julien Leonardelli, *au nom du groupe PSE.* – Monsieur le Président, Monsieur le Commissaire, chers collègues, c'est non sans émotion que je prends la parole pour évoquer la mémoire des Justes, ces hommes et ces femmes qui, au péril de leur vie, ont sauvé d'innombrables innocents de la barbarie nazie. Lors de son récent déplacement en Israël, notre président de groupe, Jordan Bardella, a pu honorer leur souvenir, notamment au mémorial de Yad Vashem, et réaffirmer l'importance de préserver leur mémoire, pilier de notre identité.

Il importe plus que jamais de remettre à l'honneur ces milliers de Français et d'Européens qui sauvèrent des juifs et des résistants de la mort certaine qui les attendaient. S'il me fallait évoquer une figure parmi les Justes, au-delà de la commune de Moissac, en France, qui me tient personnellement à cœur, je rendrais hommage à Rolande Birgy, surnommée «Béret bleu», militante historique du Front national en France.

Enfin, je déplore que ce Parlement se réunisse en séance plénière à Strasbourg le 8 mai 2025, méprisant ainsi la mémoire de celles et de ceux qui ont donné leur vie pour que l'Europe et la France soient libres. Pour ma part, je ne siégerai pas ici le 8 mai. Je serai au pied de nos monuments

aux morts honorant la mémoire de ceux qui ont combattu pour notre liberté face à l'Allemagne nazie. Ce qu'ils ont fait nous oblige. Honorons les Justes. Oui, en France, nous le faisons, le 21 juillet. Mais cessons d'ignorer et de piétiner notre propre histoire.

4-0059-0000

Antonella Sberna, *a nome del gruppo ECR*. – Signor Presidente, signor Commissario, onorevoli colleghi, "l'Italia rende omaggio alle vittime, si stringe ai loro cari, onora il coraggio di tutti i giusti che hanno rischiato o perso la loro vita per salvarne altre, e s'inchina ai sopravvissuti per l'instancabile servizio di testimonianza che portano avanti".

Con queste parole il Presidente del Consiglio italiano Giorgia Meloni ha reso onore a tutti coloro che, nei momenti più bui della Storia, hanno avuto il coraggio di scegliere il bene.

Ed è da qui che voglio partire oggi, perché questa dichiarazione racchiude il senso più profondo della proposta che stiamo discutendo: i giusti sono coloro che, di fronte all'orrore della Shoah, dei genocidi, alla brutalità dei totalitarismi, alla violenza cieca dell'odio ideologico e razziale, non hanno voltato lo sguardo altrove.

Sono tutti coloro che hanno difeso la dignità umana sotto il tallone del nazismo e del comunismo; uomini e donne semplici, a volte sconosciuti dalla Storia ufficiale, ma giganti nel cuore dell'umanità.

In un tempo in cui il male torna a manifestarsi con volti diversi, noi dobbiamo affermare che il bene merita memoria, spazio pubblico e riconoscimento istituzionale. È una giornata per coltivare l'Europa dei valori, non solo dei regolamenti.

Io, come mamma, come italiana, sento il dovere di sostenere con forza questa iniziativa, perché ricordare i giusti è anche un modo per dire ai nostri figli che non esiste pace senza memoria, e non esiste civiltà senza responsabilità individuale.

E che l'Europa, se vuole avere un futuro, deve saper coltivare le sue radici e la propria identità.

4-0060-0000

Billy Kelleher, *on behalf of the Renew Group*. – Mr President, I am privileged to be able to take part in this debate. The establishment of a European Day of the Righteous is not only a wonderful idea, it is also long overdue and very necessary to honour, but also to remember and to remind us, and to make sure it reminds us never to repeat the horrors of the past.

This is an idea that has been long in gestation, and we must now deliver. The righteous war, for the main part, ordinary people who did extraordinary things, they did most noble of things. They put themselves at risk to save the lives of others. As has been said, just over 28 000 people have been confirmed with the status of Righteous Among the Nations, 28 000 people who went above and beyond to support their fellow human beings, 28 000 people who stood up for European values of human dignity and decency, 28 000 people who stood up against Nazism and stood up for the Jewish people being hunted and murdered by the most evil and vile people.

From a personal point of view, I'm very proud of the only Irish person to receive the honour, Marie Elisabeth Elmes, from my home city of Cork. She helped save the lives of 200 Jewish children during the Holocaust by hiding them in her car and transporting them to safety in the south of France. Mary Elmes died before she received her due recognition. However, I was

delighted and honoured in 2019 to attend the official opening of a pedestrian bridge in Cork city, named in her honour.

We all owe a great debt of gratitude to everyone who stood up against Nazism, and especially those who risked their lives to save the lives of our Jewish brothers and sisters. It is only right that we, as a Union, have a day to honour them and their good deeds.

4-0061-0000

Catarina Vieira, *on behalf of the Verts/ALE Group*. – Mr President, dear colleagues, the European Day of the Righteous came about in 2012, intended as a way of commemoration, a way to honour the brave people who risked their lives to stand up for democracy and humanity in the dark times of totalitarianism that our continents experienced not too long ago. It is also a day to remind ourselves that we may never allow these tendencies to rise again.

No one could have expected that, just ten years after the creation of this day, we would be confronted with war in our continent, with an authoritarian-leaning President in the White House, and with chilling amounts of anti-democratic forces deeply cemented in European governments and parliaments – in this House too.

This combination is a toxic cocktail posing an existential threat to our democracies and our societies. Against this backdrop, the only way to truly honour the righteous is by echoing their voices today, to speak up, to denounce all forms of totalitarian regimes, crimes against humanity and genocide.

Do it now, as they did back then. Our democratic values fade when we silence the righteous, so we must speak up.

4-0062-0000

Petr Bystron, *im Namen der ESN-Fraktion*. – Herr Präsident, liebe Kolleginnen, liebe Kollegen, sehr geehrter Herr Kommissar! Wir gedenken heute der mutigen Frauen und Männer, die sich im vorigen Jahrhundert den totalitären Systemen entgegengestellt haben – dem Nationalsozialismus, dem Kommunismus. Dieses Gedenken ist sehr wichtig, und wir verneigen uns vor dem Mut dieser Menschen. Sie haben oft ihr Leben riskiert.

Aber warum machen wir dieses Gedenken? Geht es nur darum, ein paar Gärten zu pflanzen? Blumenkränze niederzulegen? Ich denke nein. Und, Herr Kommissar, Sie haben das sehr richtig gesagt. Es geht darum, dass diese Menschen Vorbild für die jungen Menschen von heute sind. Das bedeutet aber auch, dass wir wachsam werden für die totalitären Tendenzen von heute, für die Gefahren für die Demokratie, die heute hier lauern. Dass wir der mutigen Menschen auch gedenken, die sich heute den totalitären Tendenzen entgegenstellen.

Da wäre zum Beispiel Tommy Robinson in England, der jetzt gerade, wenn wir hier diskutieren, im Gefängnis sitzt, in Einzelhaft, einer sehr unwürdigen Behandlung unterzogen wird – neulich musste er sich nackt ausziehen nach einem Besuch –, und wo es von der Gefängnisleitung sogar verboten wird, dass er von Abgeordneten des Europäischen Parlaments besucht wird.

Oder ein Michael Ballweg, der Anführer der außerparlamentarischen Opposition in Deutschland, der gekämpft hat gegen wirklich totalitäres Vorgehen auch der Polizei gegen Demonstranten in der Coronazeit, wo selbst der Beauftragte für Folter der Vereinten Nationen, Professor Melzer, das untersuchen wollte. Michael Ballweg war neun Monate im Gefängnis ohne ein Gerichtsurteil.

Diese Menschen, das sind die Mutigen von heute.

4-0063-0000

Ernő Schaller-Baross (PFE). – Tisztelt Elnök Úr! Mi magyarok jól ismerjük a kommunizmus és a nyilas diktatúra borzalmait. Őseink és mi is emlékezünk arra, hogyan fosztották meg az embereket szabadságuktól, hitüktől és nemzeti identitásuktól.

A kommunista nyilas diktatúra alatt a politikai elnyomás, a kényszermunkatáborok, a titkosrendőrség és a szólásszabadság eltérő módjai mindennapos volt. A hatalom brutálisan elnyomott minden ellenállást.

Az Igazak Napján tisztelettel emlékezünk mindazokra, akik életüket áldozták az emberi méltóság védelmében és a szabadságért folytatott küzdelemben.

Sajnos azt látjuk, hogy a demokratikus értékek még most is veszélybe kerülhetnek Európában. Bizonyos esetekben önkény irányában sodródunk. Európában választásokat törölnék és politikusokat tiltanak el a demokratikus választásoktól.

Ez a nap ezért nem csupán a múlt emlékeztetése kell, hogy legyen, hanem figyelmeztetés is. Európa soha többé nem engedheti meg magának, hogy az önkény irányába sodródjon. Küzdenünk kell a szabadságért, az igazságért, és meg kell védenünk azt, amit a kommunizmus és a fasiszmus áldozatai is védeni próbáltak, a nemzeti önrendelkezést és a valódi demokráciát.

4-0064-0000

Arkadiusz Mularczyk (ECR). – Panie Przewodniczący! Panie Komisarzu! Przemawiam tu dzisiaj, aby oddać hołd i pamięć tym wszystkim, którzy z narażeniem życia sprzeciwiali się niemieckiemu nazizmowi i sowieckim zbrodniom. W Europejskim Dniu Pamięci o Sprawiedliwych wspominamy ludzi, którzy mimo groźba im śmierci wybrali człowieczeństwo ponad strach. Wśród nich było wielu Polaków, moich rodaków, którzy zasługują na wieczną pamięć. Irena Sendlerowa, która uratowała 2,5 tysiąca żydowskich dzieci, Rotmistrz Witold Pilecki, który dobrowolnie oddał się do Auschwitz, aby przekazać światu pamięć o zbrodniach wojennych, czy Jan Karski, emisariusz państwa podziemnego. To dzięki takim ludziom świat nie zapomni. Ale Panie Komisarzu, pamięć nie wystarczy. Musi iść w parze z działaniem na rzecz sprawiedliwości dla ofiar.

Do dzisiaj polskie ofiary II wojny światowej, greckie ofiary II wojny światowej, włoskie ofiary II wojny światowej nie mają drogi sądowej dochodzenia roszczeń, ponieważ państwo niemieckie chowa się za immunitetem jurysdykcyjnym. To jest Panie Komisarzu pana zadanie, zmusić Niemcy do prawdziwego pojednania i zadośćuczynienia za zbrodnie wojenne, których dopuścili się podczas II wojny światowej.

4-0065-0000

Cristian Terheş (ECR). – Domnule preşedinte, dragi colegi, trebuie să aducem un omagiu celor care, în vremuri de teroare şi oprimare, au avut curajul să reziste dictaturii şi să lupte pentru libertate, demnitate şi adevăr, riscându-şi propria viaţă. Motivaţi, de cele mai multe ori de credinţa creştină în a-şi ajuta aproapele, găsim exemple de persoane care şi-au riscat viaţa pentru alţii peste tot în Europa.

România a trecut prin două dictaturi în secolul XX, una fascistă şi alta comunistă. Avem exemple nenumărate de români care şi-au riscat viaţa salvând evrei de la deportare în perioada ocupaţiei

naziste a României. Avem, de asemenea, în perioada comunistă, închisorile României pline de bărbați și femei care au avut curajul să ajute partizani ce luptau împotriva comunismului. Mulți se închinau lui Dumnezeu altfel decât doreau comuniștii, ori ascultau Radio Europa Liberă.

Comemorarea acestor luptători nu este doar un gest de respect față de trecut, ci și o lecție necesară pentru viitor. Tirania și opresiunea pot lua forme noi, dar datoria noastră rămâne aceeași: să apărăm valorile fundamentale ale libertății, democrației și drepturile omului. Să nu uităm niciodată curajul celor care au luptat împotriva fascismului și comunismului și să ne asigurăm că sacrificiul lor rămâne în veac.

4-0066-0000

Interventions à la demande

4-0067-0000

Liudas Mažylis (PPE). – Pirmininke, Komisijos nary, kolegos. Tikrasis žmogiškumas pasireiškia pavojuje. Šią savaitę jau kalbėjome apie milijoną politinių kalinių, kurie to pavojaus nepaisydami garsiai reiškė savo tiesą, už tai yra įkalinami, kankinami ir žudomi. Šiandien – apie tuos, kurie veikia tyliai, bet irgi stato save į mirtiną pavojų, gelbėdami kitus, persekiojamus. Juose glūdi tasai nebūtinai instinktas – gelbėti kitą, žūstantį. Dažnai jie daro tai nesusimąstydami, tiesiog – taip reikia, o neretai taip ir lieka nežinomi. Ar tai būtų Holokausto, genocido aukų, bolševizmo, totalitarizmo kankinių gelbėjimas – gelbėtojų atmintis turi būti ypatingai gerbiama. Atmintis gali suvienyti. Siekiame to.

4-0068-0000

Juan Fernando López Aguilar (S&D). – Señor presidente, señor comisario, fui firmante, en marzo de 2012, de la Declaración que el Parlamento Europeo hizo para establecer el 6 de marzo como el Día Europeo en memoria de los Justos, en memoria de todos aquellos que se sacrificaron en el torturado siglo XX europeo para salvar vidas frente a los totalitarismos nazifascista y estalinista, pero, sobre todo, de aquellos que se sacrificaron para salvar vidas de los genocidios perpetrados por esos totalitarismos que recorrieron el siglo XX, desde el de Armenia hasta el de Camboya, pasando por el de Bosnia o el de Ruanda.

Esa memoria de los Justos nos recuerda también que el genocidio es un crimen internacional del que es responsable la Corte Penal Internacional, como lo es contra los crímenes de lesa humanidad y contra los crímenes de agresión. Resulta, por tanto, triste y una vergüenza que hoy sepamos que Hungría se retira —el único Estado miembro que se retira— del Estatuto de Roma, que sostiene la Corte Penal Internacional, después de la visita de Netanyahu, en flagrante violación de sus obligaciones como Estado miembro de la Unión Europea.

4-0069-0000

Vytenis Povilas Andriukaitis (S&D). – Posėdžio pirmininke, gerbiamas Komisijos nary, kolegos. Neišpasakytai vertinga ši iniciatyva kovo 6 d. paskelbti Europoje Pasaulio teisuolių diena. Esu gimęs 1951 metais Stalino gulaguose. Mano tėvai praleido Stalino gulaguose nuo 1941 iki 1954 metų. Jie buvo įkalinti. Bet aš esu taip pat auklėtas nuostabaus žydų gelbėtojo daktaro Viktoro Kutorgos, kuris savo gyvu pavyzdžiu liudijo, ką reiškia būti gelbėtoju tragiškose aplinkybėse. Šiandien aš stebiu neofašistus, visokius patriotizmu prisidengusius nacionalistus, kurie viena koja gali žengti į naują totalitarizmą. Bet prisiminkime Musolinio fašistus, vokiečių nacius, stalinistus visus. Jie visi yra priešai, kuriems pasaulio teisuoliai primins, ką reiškia būti teisiu.

4-0070-0000

Sebastian Tynkkynen (ECR). – Mr President, European day of the righteous is an opportunity to honour those who have dared to stand against injustice and oppression. Too often, people tend to speak grand words, but hesitate when real actions are needed. This must not be just another symbolic gesture.

Today I want to highlight a group too often forgotten - those brave Russians and Belarusians who risked their lives resisting authoritarian regimes. They are imprisoned, silenced and even murdered for defending human rights and democracy. The tragic death of Alexei Navalny is just one example. We must actively courage these people who dared to stand up against the regimes of Russia and Belarus, the very devils of oppression and control.

4-0071-0000

Petras Gražulis (ESN). – Sveiki. Esu kalbėjęs sovietiniuose lageriuose, buvau persekiojamas, kad gyniau tikinčiųjų teises, siekiau, kad Lietuva būtų nepriklausoma. Teko man pažinoti ir Rusijos disidentus, būti net pas juos namuose. Sacharovą, Solženicyną, Kovaliovą ir kitus. Atgavus Lietuvai nepriklausomybę ir tapus kitai, ne komunistinei, o genderistinei ideologijai vyraujant, vėl esu persekiojamas. Teisiamas Lietuvoje už Švento Rašto citavimą. Oficialiai neuždraustą, bet praktiškai neleidžiamą. Kai buvau įkalintas, Amerikos prezidentas Ronaldas Reiganas, važiuodamas pas M. Gorbačiovą į Maskvą, pareikalavo, kad būtų išlaisvinti politiniai kaliniai, tame tarpe ir aš. Man atrodo, kad aš būsiu nuteistas Lietuvoj, todėl prašysiu prezidentą Trampą, kad jis taip pat reaguotų į tai, kas vyksta Lietuvoj, ne tik Vance'as, ir Europoj, ir gintų žmogaus teises ir žodžio laisvę.

4-0072-0000

Lukas Sieper (NI). – Mr President, dear people of Europe, by recognising the European Day of the Righteous we honour those who did the right thing, not because it was easy, but because it was right. The righteous are those who hid families during the Holocaust, the ones who stood up to dictators, the ones who said 'no' when silence would have been safer.

They remind us that conscience is not a luxury, it is a duty. This duty does not end in books or museums but calls us now to protect those who resist Russia, to defend women who fight for freedom in Iran, to support lawyers who take Trump's government to court right now – not just when it's fashionable, but when it's dangerous.

Because to be righteous today is to carry the legacy of those who have been righteous before us. Let us be worthy of that legacy.

4-0073-0000

(Fin des interventions à la demande)

4-0074-0000

Olivér Várhelyi, Member of the Commission. – Mr President, honourable Members, I want to thank you for this debate. As recalled in your 2012 resolution, we supported the establishment of the European Day of the Righteous.

Remembrance of the good is essential to process European integration. It teaches us and younger generations that everyone can always choose to help other human beings and defend human dignity. The public institutions have a duty to highlight the example set by people who managed to protect those persecuted out of hate.

4-0075-0000

SĒDI VADA: ROBERTS ZĪLE*Priekšsēdētāja vietnieks*

4-0076-0000

President. – Thank you very much, Commissioner. The debate is closed.**5. 110. gadadiena pret armēņiem vērstā genocīda atcerei**

4-0078-0000

Priekšsēdētājs. – Nākamais darba kārtības punkts ir debates par Komisijas paziņojumu par 110. gadadienu pret armēņiem vērstā genocīda atcerei (2025/2639(RSP)).

4-0079-0000

Olivér Várhelyi, *Member of the Commission.* – Mr President, honourable Members, on 24 April, we commemorate the Armenian lives lost during the final days of the Ottoman Empire, starting in 1915. We remember those who were killed. Those who died during deportations or when trying to flee to safety, and those who survived and built a new life elsewhere. Showing great resilience. Paying respect to the victims is part of our imperative to never forget it.

We continue to seek ways to advance and support reconciliation. It is essential that in a spirit of reconciliation, countries are able to face their past through open and frank dialogue. We also encourage meaningful steps, paving the way towards full reconciliation between the Turkish and Armenian societies. We believe in recent years, there is a renewed momentum for moving towards the normalisation of relations between the two countries and nations.

Both sides appointed special envoys, demonstrating their commitment to dialogue. Over the last weeks, we saw a gesture of goodwill through the temporary opening of the Margara-Alican border crossing between Armenia and Türkiye. This not only helps bringing much needed humanitarian aid to Syria, it also shows that bilateral dialogue works, and it gives hope for progress towards the full normalisation of relations.

As a next step, the EU encourages the parties to fully implement earlier agreements, in particular to open the land border for third-country citizens and diplomatic passport holders. We sincerely hope both countries will continue to engage in this process in a spirit of compromise.

This is an opportunity for peace, stability and cooperation in the South Caucasus, setting aside historical grievances. For this reason, the EU continues to support confidence building and people to people contacts between Armenia and Türkiye, including through our bilateral and regional cooperation. These actions, aimed at preparing the ground for the rapprochement of the two countries and of their people.

Dear President, dear honourable Members, this is a moment to remember the past and commemorate the human suffering of the Armenian people 110 years ago. It is a moment to affirm our dedication to preventing such horrific events, but it is also a moment of hope. Hope for normalisation of Armenia-Türkiye relations and hope for normalisation of Armenia-Azerbaijan relations as well. Hope for peaceful, stable, more prosperous and better connected Caucasus.

4-0080-0000

Miriam Lexmann, *on behalf of the PPE Group.* – Mr President, Commissioner, dear colleagues, this month we honour the memory of 1.5 million people – innocent lives lost in one of the darkest

tragedies of the 20th century. Yet the wounds remain open and the struggle for justice is far from over. The genocide led to mass murder, displaced and loss of Christian cultural heritage. The Armenian people still carry the trauma of these atrocities.

The only path to achieve normalisation of relations is to recognise, and work on recognition and reconciliation – on a political level and on a people-to-people level. This is even more important today, and hundreds of thousands of people are displaced in Armenia and from Nagorno-Karabakh, escaping atrocities from the side of Azerbaijan. That has added another layer of hardship.

Recognition and reconciliation need courage – the courage to confront the past and to build a future based on truth. The EU must stand firm in its commitment to historical justice and urge Türkiye to acknowledge this chapter of history. Without recognition, there is no lasting peace, and that peace remains elusive. I call on the Turkish authorities to embrace this process and advance on the dialogue with Armenia.

The Armenian people have always demonstrated extraordinary strength, spirit and resilience. It is high time to pave the way for genuine reconciliation, and bring peace and prosperity to the South Caucasus, and justice to Armenian people in Armenia and around the world.

4-0081-0000

Γιάννης Μανιάτης, *εξ ονόματος της ομάδας S&D.* – Κύριε Πρόεδρε, σε λίγες μέρες θα τιμήσουμε τα 110 χρόνια από τη Γενοκτονία των Αρμενίων. Οι Αρμένιοι, οι Ασσύριοι και οι ελληνικοί πληθυσμοί της Μικράς Ασίας και του Πόντου ήταν τα θύματα μιας συστηματικής και κεντρικά οργανωμένης προσπάθειας εξόντωσης από τους Οθωμανούς. Εκατοντάδες χιλιάδες έχασαν τη ζωή τους και ακόμα περισσότεροι έγιναν πρόσφυγες —μεταξύ αυτών και η οικογένειά μου. Δυστυχώς τα πρόσφατα γεγονότα στο Ναγκόρνο Καραμπάχ, όπου χιλιάδες Αρμένιοι αναγκάστηκαν να εγκαταλείψουν τις πατρογονικές τους εστίες, και η καταστροφή των θρησκευτικών και πολιτιστικών μνημείων τους, είναι η ηχηρή υπενθύμιση ότι χωρίς ιστορική μνήμη το παρελθόν πολύ εύκολα επαναλαμβάνεται. Η Τουρκία αρνείται να αναγνωρίσει τα εγκλήματα του παρελθόντος της. Το Ευρωπαϊκό Κοινοβούλιο έκανε το βήμα και αναγνώρισε τη γενοκτονία των Αρμενίων. Την ίδια αναγνώριση πρέπει να κάνει και με τη γενοκτονία όλων των ελληνικών πληθυσμών της Μικράς Ασίας και του Πόντου, που είχαν αντίστοιχη μοίρα την περίοδο 1913-1923.

4-0082-0000

Pierre-Romain Thionnet, *au nom du groupe PFE.* – Monsieur le Président, c'est dans la conquête que naissent les empires, et c'est dans les massacres, les guerres d'éradication et les génocides qu'ils finissent par mourir. Qu'est-ce que le génocide arménien sinon l'expression d'une suprématie turque au sein d'un Empire ottoman qui ne pouvait plus supporter la diversité de son ensemble? Les Arméniens, comme les Grecs pontiques ou les Assyriens, ont été écrasés dans l'engrenage impérial infernal, celui qui a besoin non pas d'unifier, non pas de rassembler, mais de détruire tout ce qui diffère de l'élément central, tout ce qui pourrait représenter une menace pour son hégémonie.

La négation de l'horreur est un aveu d'échec. En commettant le pire, Ankara a certes anéanti tout un pan de la civilisation arménienne – être arménien aujourd'hui, c'est vivre avec la dévastation déjà accomplie en héritage –, mais l'Arménie vit. Les Arméniens vivent et continuent de faire vivre leur civilisation unique au monde en dépit des projets expansionnistes et révisionnistes de ses voisins. En ce jour de commémoration du génocide arménien, je veux adresser tout mon soutien au peuple arménien et lui dire qu'il trouvera toujours en nous un allié contre ceux qui veulent nier ou oublier.

4-0083-0000

Nicolas Bay, *au nom du groupe ECR.* – Monsieur le Président, mes chers collègues, cent dix ans que le peuple arménien a fait l'objet d'un effroyable génocide de la part de la Turquie, et les bourreaux n'ont jamais reconnu ce génocide. La Turquie et son vassal, l'Azerbaïdjan, rêvent toujours de reconstituer un grand empire ottoman et voient l'Arménie et le peuple arménien comme un obstacle à ce funeste projet. Leur volonté a toujours été, sans interruption, depuis cent dix ans, l'annexion pure et simple du territoire arménien et l'éradication pure et simple du peuple arménien. Nous avons un devoir de solidarité civilisationnelle à l'égard de l'Arménie et des Arméniens.

Alors, bien sûr, le projet d'accord de paix entre l'Arménie et l'Azerbaïdjan constitue indéniablement un espoir. Mais ne péchons pas par naïveté: les dernières exigences, conditions posées par l'Azerbaïdjan montrent qu'il y a sans doute beaucoup d'hypocrisie et de mauvaise foi dans la démarche de Bakou. Il faut aujourd'hui être aux côtés des Arméniens concrètement, c'est-à-dire conditionner l'ensemble des accords politiques, économiques, commerciaux – l'union douanière avec la Turquie, les contrats gaziers avec l'Azerbaïdjan – à la reconnaissance préalable et incontestable par ces deux pays de la souveraineté territoriale de l'Arménie et au respect du peuple arménien.

4-0084-0000

Nathalie Loiseau, *au nom du groupe Renew.* – Monsieur le Président, j'ai un peu plus d'une minute pour vous parler de plus d'un million de morts: les victimes du génocide commis contre les Arméniens par l'Empire ottoman. Sans doute faudrait-il une minute de silence, mais non: du silence, il y en a déjà trop. Ce silence, c'est celui que l'on déplore depuis si longtemps de la part des autorités turques. Dans ce pays, qui se réfère si souvent à son histoire, il est impossible de parler du génocide des Arméniens. Ceux qui s'y risquent sont poursuivis et condamnés. Il est vrai que l'on poursuit et que l'on condamne beaucoup, en Turquie, notamment pour des idées.

Alors que les Turcs manifestent en nombre contre les atteintes aux libertés dans leur pays, je voudrais leur demander de regarder leur passé avec autant de lucidité que leur présent. On peut être un grand pays en ayant commis de grandes fautes, à condition de les reconnaître. L'Arménie est prête aujourd'hui à des relations apaisées avec la Turquie, en dépit d'une histoire tragique, qu'elle n'a pas oubliée. En ce mois de commémoration du génocide commis contre les Arméniens, je forme un vœu, celui que la Turquie regarde son passé en face et construise un avenir harmonieux avec l'Arménie. La Turquie a tout à y gagner, à commencer par son honneur.

4-0085-0000

Markéta Gregorová, *on behalf of the Verts/ALE Group.* – Mr President, dear colleagues, today we remind ourselves of the 110th anniversary of the Armenian Genocide, notably the death of 1.5 million Armenians who were the victims of Turkish radicalisation and unchecked nationalism that led to the genocide.

Remembrance of such horrible events should not be just about the past, but about the lessons we carry forward and confronting the injustices of today and the future. Europe, built on values of peace and dignity, has a duty to uphold these principles and constantly and consistently stand for human rights, demanding the accountability of those infringing these values.

We cannot continue closing our eyes when it is convenient for us and pat ourselves on the back when we cherry-pick the case of suffering we stand up for.

We recently witnessed the forced displacement of ethnic Armenians from Nagorno-Karabakh. And yet, European Member States are still importing oil and gas from Azerbaijan and, together with the Commission, keeping the memorandum of understanding on energy with them – all while Aliyev continues his internal political oppression, crushing any dissenting voices.

We should use this opportunity to reflect on how we act, rather than using mere rhetoric. Let's start with terminating the oil and gas imports from Azerbaijan and supporting the last remaining and standing democracy in the region.

4-0086-0000

Pernando Barrena Arza, *en nombre del Grupo The Left*. – Señor presidente, señorías, se cumplen 110 años del genocidio contra el pueblo armenio. Se calcula que casi dos millones de personas fueron deportadas y masacradas por el Imperio otomano. Turquía entonces, como hoy Israel contra Palestina, siempre ha negado que las masacres de armenios fueran un genocidio pero lo cierto es que se trató de un plan sistemático de limpieza étnica contra un pueblo que padeció, por primera vez en la historia, todo tipo de vulneraciones de derechos humanos individuales y colectivos.

Un siglo más tarde, tenemos la sensación de que la operación que Azerbaiyán llevó a cabo hace un año contra Nagorno Karabaj fue una continuación del genocidio de 1915, una limpieza étnica de toda la población armenia de Artsaj, una limpieza étnica precedida de todo tipo de crímenes de guerra.

El papel de Azerbaiyán no acaba en su inquina contra los armenios. Es un elemento de desestabilización de la región que busca la eliminación de cualquier presencia política o cultural ajena a la tradición turcomana en Asia Central, Irak y Siria. Todo ello como Estado *proxy* de Turquía, auténtico factótum regional, que aspira a un corredor de confianza que le permita acceder a esta zona del Asia central mencionada.

Hoy la enorme tragedia originada por Israel en Palestina oculta otras crisis. Pero no olvidamos que decenas de miles de armenios de Karabaj son ahora refugiados y que Bakú sigue manteniendo veintitrés presos políticos armenios víctimas de juicios farsa y sin ningún tipo de garantía procesal.

Creemos que Europa no puede sacrificar su compromiso con los derechos humanos y legitimar la limpieza étnica azerí contra Nagorno Karabaj y su actitud permanentemente agresiva contra Armenia —por parte de Azerbaiyán, me refiero—.

Armenia tiene derecho a tener un Estado respetado por la comunidad internacional. Esto es aplicable particularmente a Azerbaiyán y la Unión Europea debe implicarse para que así sea. Los europeos tenemos una deuda histórica con Armenia que debemos devolver en términos de solidaridad, compromiso, y ayudando a disuadir a Azerbaiyán y Turquía de cualquier tentación de agresión hoy día.

4-0087-0000

Станислав Стоянов, *от името на групата ESN*. – Г-н Председател, Армения е първата християнска държава в света и неразделна част от европейската цивилизация. Арменският народ, макар и разпокъсан, продължава да пази своя род, корен, език и своята памет, нещо, от което всички европейци трябва да вземем пример и вдъхновение. Арменците остават арменци, независимо къде живеят.

Днешният дебат почита една трагична страница в човешката история, която не бива да се повтаря. Преди 110 години ние, българите, отворихме домовете и сърцата си за търсещите спасение арменски бежанци и техният принос за икономическото и културно развитие на страната ни е огромен. И днес Армения е съхранила своята идентичност и своята вяра, макар и да е изправена пред огромни предизвикателства.

Наш дълг е да се учим от миналото и да градим бъдеще, в което човечеството триумфира над геноцида.

4-0088-0000

Reinhold Lopatka (PPE). – Mr President, dear colleagues, the Armenian Genocide resulted in the murder of over 1 million Armenians and as well countless Assyrians, Chaldeans and Pontic Greeks. We remember the victims of violence, murder and expulsion and honour their memory by reaffirming our commitment to truth, justice and reconciliation.

The recognition of historical truths is not merely an academic exercise. It is a moral imperative for all of us. By acknowledgement of the Armenian Genocide, we take a crucial step toward preventing future crimes against humanity. As history has shown, denial and silence only serve to perpetuate cycles of violence and injustice. It is our duty to ensure that the mistakes of the past are neither forgotten nor repeated.

In 2015, I initiated that the Austrian Parliament adopted a resolution recognising and condemning the Armenian Genocide. The path to reconciliation is neither simple nor swift. It requires courage, transparency and the willingness to confront painful truths. We must call upon to Türkiye to engage earnestly in this process by recognising the crimes committed against the Armenians and other Christians through the Ottoman Empire.

We have to do everything to ensure that this never happens again.

4-0089-0000

Vasile Dîncu (S&D). – Domnule preşedinte, dragi colegi, dragi tineri care vă aflați în tribună, marcăm o zi a memoriei și adevărului, comemorăm Genocidul armean, o tragedie istorică în care peste un milion și jumătate de armeni au fost exterminati în Imperiul Otoman. Acest act nu a fost doar o suferință umanitară profundă, ci și un precedent istoric. Tăcerea lumii de atunci a deschis calea unor crime în secolul XX. „Cine își mai amintește de armeni?“, întreba retoric și cinic Adolf Hitler.

Astăzi avem datoria morală de a nu închide ochii, pentru că aceasta înseamnă justiție și este un semn al angajamentului nostru față de umanitate și față de valorile democratice. Turcia de azi nu moștenește vina pentru faptele comise în urmă cu un secol, dar vina începe atunci când alegi să ascunzi o crimă, nu când alegi să o recunoști. Asumarea trecutului nu este o slăbiciune, ci un semn de forță. Este un semn de curaj politic și de demnitate. Negarea genocidului nu este o opinie, este o formă de complicitate.

Astăzi ne exprimăm solidaritatea pentru poporul armean și reafirmăm angajamentul nostru pentru o lume în care adevărul istoric nu mai trebuie negociat politic.

4-0090-0000

Julie Rechagneux (Pfe). – Monsieur le Président, il y a cent dix ans, un drame immense a eu lieu, l'un des plus sombres du XXe siècle. Cet événement résonne aujourd'hui dans la mémoire européenne comme un avertissement.

Tout a commencé par l'arrestation des figures civiles et religieuses, avant que plus d'un million d'hommes, de femmes et d'enfants ne soient chassés de chez eux et envoyés sur les routes. À travers les étendues arides et hostiles de l'intérieur anatolien, ils ont marché sans fin, sans eau, sans toit, sans retour.

Commémorer aujourd'hui le génocide arménien, c'est reconnaître le préjudice causé à un peuple dont l'histoire est intimement liée à la nôtre. C'est rappeler que l'Arménie, à la frontière de l'Europe et du Caucase, partage avec nous une culture millénaire et une diaspora vibrante, profondément enracinée dans nos sociétés.

En honorant cette mémoire, nous réaffirmons le lien fort qui nous unit à cette nation sœur. C'est en regardant ce passé sans détour que l'Europe peut construire une relation sincère avec son environnement proche, peuplé de nations avec lesquelles elle oublie parfois qu'elle partage tant.

4-0091-0000

Bert-Jan Ruissen (ECR). – Voorzitter, het leed dat de Armeniërs is aangedaan door het Ottomaanse Rijk is onbeschrijflijk. Als Europees Parlement hebben we Turkije meermaals opgeroepen om de historische feiten onder ogen te zien. En ook vandaag, bij deze herdenking, roepen we Turkije op de Armeense genocide te erkennen.

Bij mijn bezoek aan Jerevan enkele jaren geleden heb ik gezien dat de pijn van de genocide nog steeds intens wordt gevoeld. Ondertussen zijn de grenzen tussen Armenië en Turkije hermetisch gesloten en van normale diplomatieke contacten tussen beide landen is al helemaal geen sprake. Wij dringen al langer aan, bij beide landen, op een traject van verzoening. Maar van verzoening kan alleen sprake zijn als er ook sprake is van erkenning — erkenning van het leed dat de Armeniërs is aangedaan. Het wordt tijd dat Turkije ook dat gaat inzien.

4-0092-0000

Helmut Brandstätter (Renew). – Herr Präsident, Herr Kommissar! Der österreichische Schriftsteller Franz Werfel hat den Genozid an den Armeniern sehr gut in seinem Buch *Die vierzig Tage des Musa Dag* beschrieben. Franz Werfel war Jude. Das Buch wurde 1933 in Deutschland verbrannt. Und so wie wir, die heutige Generation der Deutschen, Österreicher und anderer, keine Schuld haben für den Holocaust, aber die Verantwortung, darüber zu reden, daran zu erinnern, so hätte die heutige türkische Regierung, die Menschen in der Türkei, die Verantwortung, darüber zu sprechen, was war, anzuerkennen, was war – dieses Buch *Die vierzig Tage des Musa Dag* zu lesen. Das ist keine Schwäche, ganz im Gegenteil, es ist die Überzeugung, dass wir die Geschichte annehmen, verstehen müssen und alles dafür tun, dass das ja nicht wieder passiert.

110 Jahre später sind ja Menschen in Armenien aber wieder bedroht – sie sind bedroht von Aserbaidschan. Und die gute Nachricht ist: Die armenische Regierung, die armenische Bevölkerung – sie wissen, wo ihre historische Heimat ist. Und einige Zeit unterbrochen eben, aber die historische Heimat ist hier bei uns in Europa. Das ist ein europäisches Land. Die armenische Regierung, die Bevölkerung – sie wollen nach Europa kommen. Und ich finde es sehr positiv, dass sie eben auch diesen Antrag stellen, dass sie in die EU aufgenommen werden wollen. Armenien ist ein Teil von Europa. Vergessen wir nicht das, was war, aber arbeiten wir gemeinsam an einem besseren Europa.

4-0093-0000

Marie Toussaint (Verts/ALE). – Monsieur le Président, en avril 1915, l'État ottoman arrête, déporte, assassine. Plus d'un million d'Arméniens sont exterminés. Ce génocide demeure une plaie non suturable dans la mémoire du peuple arménien et dans la mémoire européenne. Ce qui a été détruit, ce ne sont pas seulement des vies éparses: c'est tout un peuple que l'on a voulu effacer. Il nous faut garder vivant le souvenir contre les fossoyeurs de la mémoire qui nient encore, cent dix ans après le crime, poursuivant ainsi la basse besogne génocidaire.

Cependant, on ne peut pas défendre la mémoire des morts et trahir les vivants. Aujourd'hui encore, l'Arménie saigne. Malgré l'accord de paix, l'Azerbaïdjan continue son blocus et ses bombardements, de même qu'elle continue de faire des prisonniers politiques. Ainsi, 100 000 personnes ont été arrachées à leur terre, le Haut-Karabakh, et aujourd'hui encore elles attendent leur droit au retour. Pendant ce temps, l'Union européenne signait un accord gazier avec l'Azerbaïdjan. Elle parle de paix tout en se trahissant pour du gaz. Elle oublie que les droits de l'homme ne sont pas négociables.

Le peuple arménien souffre de voir l'histoire se répéter sous d'autres formes, avec d'autres mots, mais avec la même impunité. Alors nous avons une responsabilité: pas seulement celle de nous souvenir, mais celle de refuser les compromissions et d'agir.

4-0094-0000

Marina Mesure (The Left). – Monsieur le Président, chers collègues, commémorer le 110^e anniversaire du génocide arménien, ce n'est pas seulement un devoir de mémoire, c'est une exigence de justice. L'histoire du peuple arménien est une plaie toujours vive, une blessure qui interpelle l'humanité tout entière. Les victimes et leurs descendants méritent que leurs souffrances soient pleinement reconnues et que leur histoire continue d'être entendue. Les cicatrices sont profondes. Plus d'un million et demi d'hommes, de femmes et d'enfants ont été exterminés à travers une campagne méthodiquement orchestrée par l'Empire ottoman. Des centaines de milliers d'autres ont dû être contraints à l'exil, déracinés.

Le devoir de mémoire, c'est aussi se souvenir de ceux qui ont tenté d'alerter alors que les puissances européennes se muraient dans le silence. Je pense notamment à Jaurès, qui, à propos des massacres d'Arméniens qui déjà avaient lieu dans l'Empire ottoman à l'époque, déclarait en 1896: «L'humanité ne peut plus vivre avec dans sa cave le cadavre d'un peuple assassiné.»

Commémorer, c'est honorer les victimes et se rappeler la nécessité de combattre, sans relâche, la haine, l'intolérance et l'indifférence, afin que plus jamais ne se répètent de telles atrocités.

Alors que les Arméniens sont de nouveau menacés et que le Haut-Karabakh a subi une épuration ethnique dans l'indifférence des institutions européennes, ces commémorations ont une portée toute particulière. Elles sont l'occasion de réaffirmer notre soutien indéfectible au peuple arménien, aujourd'hui comme hier.

Alors, que ce 110^e anniversaire soit un appel à l'action, un appel à défendre la dignité humaine, à briser l'indifférence et à construire enfin une paix juste et durable, dans la région comme partout dans le monde!

4-0095-0000

Sander Smit (PPE). – Voorzitter, commissaris, 110 jaar geleden vond de Armeense genocide plaats. 1,5 miljoen Armeniërs werden vermoord vanwege hun identiteit en geloof. Ook Arameeërs, Pontische Grieken, Chaldeeën. Dit is geen voltooid verleden tijd. Ook vandaag nog worden christenen, alawieten, jezidi's en andere minderheden in het Midden-Oosten verdreven en afgeslacht. In Nagorno-Karabach wordt ook nu nog, net als in de afgelopen jaren, Armeens christelijk erfgoed systematisch verwoest. Na 1915 zweeg de wereld. Daders bleven ongestraft en nieuwe genocides volgden. Juist, ook hier in Europa.

“Nooit meer” is een opdracht, geen slogan. De EU moet minderheden beschermen en vervolging actiever veroordelen. Dat begint bij erkenning van de genocide door alle lidstaten en door Turkije. Zonder erkenning geen gerechtigheid, zonder gerechtigheid geen vrede en geen verzoening. “Nooit meer” is nu.

4-0096-0000

Evin Incir (S&D). – Mr President, one hundred and ten years have passed since one of the darkest chapters in human history – a genocide that killed and deported millions, with people mass murdered and families destroyed. One of those families was my own great-grandfather's. Many survivors were scattered across the Middle East, Europe and the world, carrying a grief that has pierced through generations. This is not a distant memory. It is a wound still felt today.

Yet even now, nationalistic and autocratic forces, most notably in Turkey, seek to deny this truth. Denials do not erase history; it deepens the pain. We will never forget the Armenian Genocide and we will commemorate its victims each year in this Parliament.

There is still much work to do on memory and reconciliation. The steps taken in recent years, like building memorial sites in cities such as Diyarbakır, must continue. Let us ensure the truth prevails and justice, however delayed, is never silenced. The genocide must be recognised everywhere and by everyone.

4-0097-0000

Paolo Inselvini (ECR). – Signor Presidente, signor Commissario, onorevoli colleghi, cacciati dalle proprie case, fatti marciare per centinaia di chilometri e infine assassinati sui cigli delle strade; uomini, donne e bambini sono stati violentati, percossi e massacrati dai loro aguzzini per odio etnico e religioso.

Ricordiamo oggi il tragico genocidio armeno di 110 anni fa, quando un milione e mezzo di persone vennero massacrate dall'esercito ottomano.

Il genocidio armeno fu, come detto da Papa Francesco, la prima grande persecuzione del Novecento, svolta proprio in una delle culle della cristianità a danno della prima nazione cristiana.

È giusto ricordare questo martirio, ma non è abbastanza. La memoria, infatti, si onora con l'azione e noi oggi dobbiamo agire per continuare a stare al fianco dei fratelli armeni e per proteggere tutti i cristiani in generale. In troppi, infatti, continuano a morire, oggi come allora, semplicemente per la propria fede.

Che il ricordo dei martiri armeni dia il coraggio a un'Europa che deve difendere con orgoglio e senso di responsabilità chi oggi continua a essere perseguitato.

4-0098-0000

Tomislav Sokol (PPE). – Poštovani predsjedavajući, povjereniče, kolegice i kolege, armenski narod, jedna od najstarijih kršćanskih zajednica svijeta, bio je izložen progonu, deportacijama i masovnim stradanjima. Stotine tisuća nevinih muškaraca, žena i djece nestali su zato što su bili kršćani. Spaljivane su crkve, uništavane svjetinje, među njima i katedrala Svete Majke Božje u Arapgiru, sagrađena u 13. stoljeću kao simbol vjere i duhovnosti jednog naroda, pretvorena je u pepeo.

To nije bio samo napad na jedan narod. To je bio udar na kršćanski identitet i temeljne vrijednosti naše civilizacije. Povijesne činjenice o ovom zločinu, koji je odnio između 600 000 i 1,5 milijuna života, dokumentirane su od strane brojnih neovisnih povjesničara i svjedoka tog vremena. Jasno je da se tu nije radilo o pojedinačnim izoliranim incidentima, već o organiziranom i sustavnom pokolju počinjenom od strane Osmanskog Carstva.

U vrijeme relativizacije svih vrijednosti, važno je jasno reći: obrana kršćanskih zajednica nije politički stav, već moralna dužnost. Naša civilizacija duguje svoje korijene upravo tim kršćanskim zajednicama koje su stoljećima svjedočile vjeru unatoč progonima. Dužni smo zato dignuti glas za one čiji su životi i vjera bili naprosto izbrisani iz povijesti. Sjećanje na armenske žrtve nije samo politička gesta. To je čin moralne i duhovne odgovornosti. Ako Europska unija želi biti vjerodostojna u obrani temeljnih vrijednosti, njena politika mora biti dosljedna, bez obzira na to hoće li se to nekome svidjeti ili neće. Povijesna istina ne smije biti talac dnevnopolitičkog pragmatizma.

4-0099-0000

Marcos Ros Sempere (S&D). – Señor presidente, durante siglos, la tierra de lo que hoy conforma la Unión Europea se ha manchado de sangre: sangre de jóvenes fallecidos en guerras. Hasta ahora, nadie podía imaginar que, con mucho esfuerzo, íbamos a construir un proyecto político que nos ha mantenido en paz durante más de setenta años. Si miramos a nuestros vecinos ucranianos, podemos entender fácilmente el enorme valor que eso supone.

Por eso, es importante hoy conmemorar aquí el genocidio armenio. Hay que hacerlo no solo para recordar los trágicos acontecimientos del pasado, también para comprobar que podemos ser más fuertes unidos en la diversidad. Desde el Parlamento Europeo, tenemos que instar encarecidamente a Turquía y a Armenia a no dejar que este tema siga enturbiando sus relaciones y a seguir dando pasos firmes hacia su reconciliación. El futuro más brillante nos espera si estamos unidos y en paz. Y el único camino para conseguirlo es el del entendimiento, el diálogo y la cooperación.

4-0100-0000

Brīvais mikrofons

4-0101-0000

Sebastian Tynkkynen (ECR). – Mr President, up to 1.5 million Armenians were massacred by an empire determined to erase them. Men, women and children were deported, tortured, raped and murdered. Türkiye's refusal to confront its dark history is one example of why its membership in the EU cannot come into question. They may attempt to bury their history, but the truth cannot be silenced.

Just as the Turks sought to destroy Armenians, another empire, the so-called Russian Federation, now threatens Ukrainians. We must ensure that such evil never prevails again. We cannot allow the work of the devil to succeed. Oppressive empires must fall.

4-0102-0000

Petras Gražulis (ESN). – Gebiamieji, mes prisimename prieš šimtą dešimt metų vykdytą Armėnijoje Turkijos genocidą ir tai smerkiame ir reikalaujame, kad Turkija surastų jėgų atsiprašyti, pripažinti padarytus nusikaltimus ir atlygintų bent moralinę žalą. Tačiau šiandien mes matome ir kitus daromus nusikaltimus. Ir Europa tyli. Tarptautinis Hagos tribunolas pripažino Izraelio premjerą Netanyahą darantį nusikaltimus prieš žmogiškumą, išdavė arešto orderį. Gaza visa nušluota. Vaikai badauja, seneliai neturi kur gyventi. Europa taip pat. O tai vyksta šiandien. Europa turėtų būti ryžtingesnė, principingesnė ir labiau užstoti tuos nekaltus žmones. Žinoma, mes smerkiame ir Hamas, jo veiksmus, smerkiame ir reikalaujame, kad būtų atiduoti, grąžinti visi įkaitai. Bet vis tik Izraelis, negali dėl to kentėti visi nekalti Gazos Ruože žmonės.

4-0103-0000

Lukas Sieper (NI). – Mr President, dear colleagues, sometimes when I upload my speeches to social media, I cut them into footage of a full plenary because the emptiness of the real one is a shame to this House. This is going to be one of those speeches.

Dear people of Europe, 110 years ago, the Ottoman Empire began a crime that many still deny today: the genocide on the Armenian people. But it was not foreign historians that said this, it was Ottoman officers and officials themselves who spoke of extermination plans. It was official government telegrams that call for a final removal of the Armenians, and it was Ottoman Kurds in 1919 and 1920 who convicted the main perpetrators of genocide.

We Germans know how hard the path to the truth is, but we also know admitting guilt restores dignity.

So, to our friends in Türkiye, I say: it's not the memory that divides us, it's silence. Have the courage to tell the truth. The Armenians and the Turks deserve it.

4-0104-0000

(Brīvā mikroфона uzstāšanas beigās.)

4-0105-0000

Olivér Várhelyi, Member of the Commission. – Dear President, honourable Members, today the debate shows the importance of remembering history, honouring those who lost their lives. The horrific events of 110 years ago had a traumatic impact on the Armenian society, and have marked the Armenian identity. We will never forget, out of respect for the victims, and we have to make sure that it can never happen again.

But many of you also underlined the importance of reconciliation, of overcoming past grievances and taking steps towards a peaceful, stable and connected future. In this period, I want to use this occasion to encourage Armenia and Türkiye to work together towards a normalisation of their relations.

As EU, we stand ready to provide support for a common future for the entire region.

4-0106-0000

President. – Thank you very much. The debate is closed.

We will resume our plenary at 12:00, with the vote.

Rakstiski paziņojumi (178. pants)

4-0106-5000

Costas Mavrides (S&D), *in writing*. – The Armenian genocide, perpetrated with an organised and systematic plan by the Ottoman Empire, is one of the most heinous atrocities in human history, with 1.5 million ethnic Armenians, among them young, old, women and children, being exterminated in various and repugnant ways.

It's not the only genocide in human history, but the persistent denial of the Armenian genocide by Turkey, particularly by the current neo-ottoman Erdoğan regime, is not only immoral, but is an extension of the original crime and the seed for repeating such crimes, as has been proven in events afterwards and more likely in the future.

Still, recently, we have witnessed the ethnic cleansing of the Armenian indigenous inhabitants in Nagorno-Karabakh by Azerbaijan, with the active support of Turkey, followed by a cultural genocide of any Christian and Armenian heritage in the area. We pray and bow for the memory of the victims and do not forget the crime and the criminals.

Furthermore, the Armenian genocide and such similar crimes against humanity should not only be condemned and taught as events of historical memory, but as a moral lesson for the present and the future.

4-0107-0000

(Sēde tika pārtraukta plkst. 11.14.)

4-0109-0000

IN THE CHAIR: CHRISTEL SCHALDEMOSE

Vice-President

6. Resumption of the sitting

4-0111-0000

(The sitting opened at 12:03)

7. Request for waiver of immunity

4-0113-0000

President. – Dear colleagues, since we have a long vote, I hope that you will take your seats, and let's begin.

The President has received a request from the competent authorities in Germany for the parliamentary immunity of Petr Bystron to be waived. This request is referred to the Committee on Legal Affairs.

8. Verification of credentials

4-0115-0000

President. – On the proposal of the Committee on Legal Affairs, Parliament verifies the credentials of Sirpa Pietikäinen, Andi Cristea and Liudas Mažylis with effect from 1 December, 2 December and 5 December 2024, respectively.

I would like to announce that I will take three requests for points of order, and then we will go to the vote. So a little patience from your side, but it will not be too long, I hope. The first one will be Mr Vistisen, please.

4-0116-0000

Anders Vistisen (Pfe). – Madam President, it's very nice that you can say that even before I said anything. This is a point of order under Rule 188. We have introduced amendments from the Patriots for Europe Group where we wanted not only to pause the very harmful directive we are voting on today, but abolish them altogether. It is a shame that this very, very young legislation that has not even entered into force, that we today cannot vote on taking back that initiative. And it is a shame that the Commission and the majority who adopted it will not allow us to show who is in favour of repealing it and who is not.

But the point of order is in reality also going on the fact that even on the plenary website, the amendments are not shown, and we can see other amendments that have been rejected from the services are shown on the website. So we would like an explanation in our group on why we cannot prove to the people that the Patriots for Europe introduced these amendments. Why have they been taken away from the website? We are looking very much forward to get an answer from the services.

4-0117-0000

President. – Thank you very much. Your amendments were declared inadmissible according to Rule 188(1)(a) of the Rules of Procedure, as they did not directly relate to the text that they sought to amend.

In fact, your amendments were aiming at repealing the directives, while the Commission proposal is only proposing to postpone the date from which the Member States are to apply certain corporate sustainability reporting and due diligence requirements.

They were never published because they were ruled inadmissible. So there you have your answer.

4-0118-0000

Matthieu Valet (Pfe). – Madame la Présidente, mon rappel repose sur l'article 188 de notre règlement. Vous avez jugé irrecevable notre amendement numéro 5 à la résolution sur l'Iran, au motif qu'il était hors sujet.

Pourtant, dans le cadre de cette résolution, nous dénonçons la persécution des femmes dans ce pays, qui est liée à l'application stricte de la charia. L'amendement de mon groupe vise à alerter sur le fait que cette loi islamique est aujourd'hui portée par certaines communautés, dont les Frères musulmans, en Europe, qui prônent un islam politique pour remplacer la loi du peuple.

La France, l'Allemagne, les Pays-Bas, la Belgique ou encore l'Italie sont aujourd'hui en première ligne face à cet islamisme radical porté par ces communautés. Madame la Présidente, craignez-

vous à ce point les fondamentalistes pour dissuader les représentants du peuple dans ce Parlement de s'exprimer démocratiquement sur ce sujet majeur au moyen de cet amendement?

4-0119-0000

President. – Thank you very much. The amendment was declared inadmissible by the President because it was out of the scope of the resolution. And the President's decision is final.

4-0120-0000

Tomasz Froelich (ESN). – Frau Präsidentin! Auch ich berufe mich auf Artikel 188 der Geschäftsordnung. Sie haben meinen Änderungsantrag 2 für unzulässig erklärt mit der Begründung, dass Lukaschenkos Einsatz von Migranten gegen die EU-Außengrenze und Polen keinen direkten Zusammenhang mit dem Text habe. Das sehe ich anders, und ich bitte um Überprüfung. Wenn wir in diesem Text beschließen dürfen, Operationen weißrussischer Geheimdienste und weißrussischen Desinformationskampagnen entgegenzuwirken, dann müssen wir doch erst recht beschließen können, dass wir uns vor Lukaschenkos Migrationswaffe schützen.

Und ich stelle zudem fest: Die Abstimmungsliste war gestern Nacht bereits fertig, und mein Änderungsantrag wurde darin berücksichtigt. Dass dieser heute Morgen gestrichen wurde, irritiert mich. Offenkundig hat mein Änderungsantrag einige in die Bredouille gebracht – gerade die Kollegen von der EVP, die ihm eigentlich zustimmen müssten.

Also ich schätze ja Frau Metsola und das Präsidium wirklich sehr, aber ich muss trotzdem daran erinnern: Frau Metsola ist Präsidentin des Europäischen Parlaments und nicht Präsidentin der EVP – und diese Entscheidung ist parteiisch.

4-0121-0000

President. – Thank you very much. The amendment was declared inadmissible for the same reason as the last one: because it was outside the scope of the resolution. And the President's decision is final.

9. Voting time

4-0123-0000

President. – The next item is the vote.

9.1 *Establishing an EU talent pool (A10-0045/2025 - Abir Al-Sahlani) (vote)*

4-0125-0000

President. – We will begin with the report by Ms Al-Sahlani on establishing an EU talent pool (*see minutes, item 9.1*).

9.2 Granting equivalence with EU requirements to Moldova and Ukraine as regards field inspections and production of seed (A10-0043/2025 - Veronika Vrecionová) (vote)

4-0127-0000

President. – The next vote is on the report by Ms Vrecionová on granting equivalence with EU requirements to Moldova and Ukraine as regards field inspections and production of seed (*see minutes, item 9.2*).

9.3 Estimates of revenue and expenditure for the financial year 2026 – Section I – European Parliament (A10-0048/2025 - Matjaž Nemec) (vote)

4-0129-0000

President. – We now come to the vote on report by Mr Nemec on the estimates of revenue and expenditure for the financial year 2026 – Section 1 – European Parliament (*see minutes, item 9.3*).

I know you will get angry now, but I give the floor to the rapporteur, Mr Nemec, for two minutes, please.

4-0130-0000

– *Before the vote:*

4-0131-0000

Matjaž Nemec, rapporteur. – Madam President, dear colleagues, we are about to vote for the estimates for the 2026 budget of the Parliament. The text in front of you was approved in the Budget Committee and confirms the agreement reached in conciliation. It is very important that this agreement and the resolution are secured.

The basis for the next year's budget ensures a well-functioning parliament with a focus on its core business. The basis for the next budget – we also make sure that this house is equipped for new challenges, such as better cybersecurity and smart use of artificial intelligence.

We also welcome the attempt of this House for simplification and ensuring tangible cost reductions. The budget makes sure that Parliament can meet all of its obligations, yet limiting the overall increase of non-core expenses to less than 2 %. I call on new colleagues to vote in favour of my report, including on the key elements of it, namely amendment 4 on the ethics body. This House must show we are serious when it comes to fighting corruption, dear colleagues. We also ask you to vote in favour of paragraph 33, with a call to establish real equality and to find solutions for our colleagues who are on long-term leave, for example, maternity and paternity for mothers and fathers of this house. So, finally, I call on all colleagues to vote in favour of amendment 2, on APAs' participation in official missions under certain conditions.

And finally, I want to thank you all the colleagues, all the shadows, for good and constructive work on this dossier, so thank you for all the support.

4-0132-0000

– *After the vote on Amendment 8.:*

4-0133-0000

Lara Wolters (S&D). – There's a number of voting machines here that aren't working at the moment, so we need to get this checked.

4-0134-0000

President. – We will send a technician. We will wait a couple of seconds to see. Have you fixed the problem? If not, maybe you should try to go to another seat.

9.4 Prosecution of journalists in Cameroon, notably the cases of Amadou Vamoulké, Kingsley Fomunyuy Njoka, Mancho Bibixy, Thomas Awah Junior, Tsi Conrad (RC-B10-0230/2025, B10-0230/2025, B10-0231/2025, B10-0232/2025, B10-0233/2025, B10-0234/2025, B10-0235/2025, B10-0236/2025, B10-0237/2025) (vote)

4-0136-0000

President. – The next vote is on the joint motion for resolution, tabled by six groups, on the prosecution of journalists in Cameroon, notably the cases of Amadou Vamoulké, Kingsley Fomunyuy Njoka, Mancho Bibixy, Thomas Awah Junior, Tsi Conrad (*see minutes, item 9.4*).

9.5 Execution spree in Iran and the confirmation of the death sentences of activists Behrouz Ehsani and Mehdi Hassani (RC-B10-0220/2025, B10-0220/2025, B10-0222/2025, B10-0224/2025, B10-0225/2025, B10-0226/2025, B10-0228/2025) (vote)

4-0138-0000

President. – We move on to the vote on the joint motion for a resolution, tabled by five groups, on the execution spree in Iran and the confirmation of the death sentences of activists Behrouz Ehsani and Mehdi Hassani (*see minutes, item 9.5*).

9.6 Immediate risk of further repression by Lukashenka's regime in Belarus - threats from the Investigative Committee (RC-B10-0219/2025, B10-0218/2025, B10-0219/2025, B10-0221/2025, B10-0223/2025, B10-0227/2025, B10-0229/2025) (vote)

4-0140-0000

President. – The next vote is on the joint motion for a resolution, tabled by five groups, on the immediate risk of further repression by Lukashenka's regime in Belarus – threats from the Investigative Committee (*see minutes, item 9.6*).

9.7 Amending Directives (EU) 2022/2464 and (EU) 2024/1760 as regards the dates from which Member States are to apply certain corporate sustainability reporting and due diligence requirements (vote)

4-0142-0000

President. – We now come to the vote on the Commission proposal amending Directives (EU) 2022/2464 and (EU) 2024/1760 as regards the dates from which Member States are to apply certain corporate sustainability reporting and due diligence requirements (*see minutes, item 9.7*).

9.8 *Energy-intensive industries (B10-0209/2025) (vote)*

4-0144-0000

President. – We come to the vote on the motion for a resolution, tabled by the Committee on Energy, on energy-intensive industries (*see minutes, item 9.8*).

I will now give the floor to Pascale Piera to move an oral amendment to introduce a new paragraph after Paragraph 1.

4-0145-0000

– *After the vote on paragraph 1:*

4-0146-0000

Pascale Piera (Pfe). – Madame le Président, au nom du groupe Patriotes pour l'Europe, je souhaite présenter, au titre des dispositions de l'article 187 du règlement intérieur, un amendement oral à la résolution sur les industries à forte intensité énergétique.

Aujourd'hui et plus que jamais, chers collègues, la question de la souveraineté alimentaire est au cœur des préoccupations des populations européennes. Pour garantir cette souveraineté, nous devons permettre aux agriculteurs de produire et de se défaire enfin des normes funestes du pacte vert européen.

Dans l'esprit de la résolution présentée et pour soutenir cette cause, qui doit faire consensus, mon amendement appelle à exclure des objectifs de décarbonation de l'Union européenne les secteurs stratégiques contribuant à la souveraineté alimentaire européenne.

4-0147-0000

President. – Ms Piera, you have to read the whole text that you want to put in Paragraph 1. I do apologise, but that's the rule.

4-0148-0000

Pascale Piera (Pfe). – Madame le Président, je viens de le lire. Mon amendement est le suivant: «appelle à l'exclusion des secteurs stratégiques contribuant à la souveraineté alimentaire européenne des objectifs de décarbonation de l'Union européenne;».

4-0149-0000

(Parliament did not agree to put the oral amendment to the vote)

9.9 *Targeted attacks against Christians in the Democratic Republic of the Congo – defending religious freedom and security (RC-B10-0211/2025, B10-0211/2025, B10-0212/2025, B10-0213/2025, B10-0214/2025, B10-0215/2025, B10-0216/2025, B10-0217/2025) (vote)*

4-0151-0000

President. – The next vote is on the motion for a resolution on the targeted attacks against Christians in the Democratic Republic of Congo – defending religious freedom and security (*see minutes, item 9.9*).

I have received a motion to adjourn the vote and will give the floor to Mr Botenga to move the request.

4-0152-0000

– *Before the vote:*

4-0153-0000

Marc Botenga, *au nom du groupe The Left*. – Madame la Présidente, chers collègues, je voudrais demander le report de cette résolution sur la discrimination supposée ou les attaques contre les chrétiens en République démocratique du Congo pour différentes raisons.

D'abord, le titre donne l'impression – on voit bien l'inspiration de l'extrême droite – que, si un chrétien est tué par un groupe terroriste au Congo, c'est grave, par contre, si un musulman ou quelqu'un d'une autre religion est tué par le même groupe terroriste, ce ne serait pas grave. Mais le fond de l'affaire, c'est que cette initiative vient d'une nouvelle selon laquelle on aurait découvert 70 corps décapités dans une église au Congo. Or, je lis aujourd'hui dans la presse congolaise que cette nouvelle serait démentie.

Alors, avant que cette maison n'adopte une résolution potentiellement fondée sur une fausse information – qui, d'ailleurs, n'est même plus dans la résolution, parce que... on n'en sait rien! –, je voudrais demander le report et dire: «Ne divisons pas le peuple congolais sur la base d'une possible fausse information.

4-0154-0000

President. – Thank you very much. Would anyone like to speak against the motion? Yes, Mr Jaki.

4-0155-0000

Patryk Jaki (ECR). – Dear colleagues, I would kindly ask you to vote against this motion. This is, of course, true that the rebels connected to ISIS are not allowing anyone to displace. So not all organisations can get there.

However, that does not change the facts. In the last 15 months, a total of 631 people have been murdered in this part of Africa, including 554 Christians. This was confirmed by US administration, previous administration, I need to say so.

And then they left the last bodies of children and women in the church as a form of statement.

So I kindly ask you to vote against this motion.

4-0156-0000

(Parliament rejected the request)

4-0157-0000

President. – That concludes the vote.

4-0158-0000

(The sitting was suspended at 12:40)

4-0160-0000

PRESIDE: JAVI LÓPEZ
Vicepresidente

10. Reanudación de la sesión

4-0162-0000

(Se reanuda la sesión a las 15:01 horas).

11. Aprobación del Acta de la sesión anterior

4-0164-0000

El presidente. – Están disponibles el acta de la sesión de ayer y los textos aprobados en ella.

¿Alguien desea intervenir al respecto? Nadie.

Se aprueba el acta.

12. Turismo de salud: proteger a los pacientes de la Unión en el extranjero (debate)

4-0166-0000

El presidente. – El punto siguiente en el orden del día es el debate a partir de la declaración de la Comisión sobre el turismo de salud: proteger a los pacientes de la Unión en el extranjero (2025/2640(RSP)).

4-0167-0000

Olivér Várhelyi, *Member of the Commission.* – Mr President, honourable Members, access to healthcare beyond national borders is an issue that directly impacts the well-being of millions of EU citizens. In today's interconnected world, many seek medical treatment outside the country where they live.

However, there is a crucial distinction between cross-border healthcare within the European Union and the EEA and travelling for medical treatments outside the EU. In the first case, patients travel to another Member State to receive medical treatment, with expenses often settled between administrations or reimbursed by them. This is covered by two legal instruments: the Directive on Patients' Rights in Cross-Border Healthcare and the social security coordination regulations.

In contrast, travelling for medical treatments outside the EU involves EU citizens seeking healthcare outside the EU or the EEA, often due to considerations about costs or the availability of certain procedures.

One of the biggest advantages of cross-border healthcare in the EU is patient rights and protections. The EU has established clear legal frameworks which ensure that EU citizens have access to safe and high-quality medical treatment in any Member State. The Directive on Patients' Rights in Cross-Border Healthcare provides a framework for patients to receive reliable healthcare, reimbursement options and access to transparent information about medical providers.

On the other hand, seeking medical services outside the EU does not offer these protections. In many cases, there is little or no legal recourse if something goes wrong and patients may be exposed to unregulated medical practices.

The standardisation of healthcare quality is another key consideration. Within the EU, medical facilities are subject to strict EU health and safety regulations, ensuring that treatments meet standards. Outside the EU, however, healthcare regulations vary significantly. Some destinations may offer high-quality services, but others may lack proper oversight, leading to risks such as misdiagnosis, infection or substandard procedures, and possibly also unfair competition to European services.

Continuity of care is another major advantage of staying within the EU for medical treatment. EU healthcare systems are interconnected, allowing for easier transfers of medical records and follow-up care after returning home.

In the near future, citizens will be able to access their health data electronically wherever they go in the EU, thanks to the European Health Data Space. The European digital identity wallets to be launched by the end of 2026 will support secure access to health data. However, when patients travel outside the EU, medical records may not be easily accessible, making care in emergency situations or follow-up care in the EU more difficult, potentially giving rise to stressful and dangerous medical complications and creating additional costs for the patients.

People should be informed of the advantages provided by the EU legislation about cross-border healthcare. The Commission is carrying out a major awareness-raising campaign on patients' rights in cross-border healthcare. Ten national workshops were held in the EU Member States last year already. More will follow this year. We also count on Member States for raising awareness of the risks of undertaking medical treatment outside European borders.

As we look towards the future of European healthcare, it is essential to strengthen safe, reliable and accessible cross-border medical services within the EU. We are building a strong European Health Union where citizens have the right to receive high quality healthcare, no matter where they live or where they travel in the EU.

4-0168-0000

Tomislav Sokol, u ime kluba PPE. – Poštovani predsjedavajući, povjereniče, kolegice i kolege, prekogranična zdravstvena zaštita omogućava pacijentima unutar EU da potraže liječenje u drugoj državi članici, no pravila koja to reguliraju su i dalje previše složena i nedovoljno iskorištena. Postoje dva pravna okvira koja uređuju ovu mogućnost, kao što je rekao i povjerenik. Direktiva o prekograničnoj zdravstvenoj skrbi i Uredba o koordinaciji sustava socijalne sigurnosti.

Iako su ova pravila na snazi, mnogi pacijenti i zdravstveni djelatnici nisu svjesni prava koja garantira EU. Još veći problem predstavlja dugotrajan i birokratski složen postupak ostvarivanja ovog prava. Uz to, pacijenti prema direktivi, moraju unaprijed snositi troškove liječenja i tek nakon toga tražiti povrat sredstava u svojoj državi, što mnogima predstavlja nepremostivu prepreku. Da bismo riješili ove probleme, nužno je pojednostavniti pravila. Prvi korak bi trebao biti konsolidiranje pravila o prethodnom odobrenju i naknadi troškova za liječenje u inozemstvu, uredba o koordinaciji sustava socijalne sigurnosti. Time bi se postupak naknade troškova učinio transparentnijim i pravno sigurnijim za pacijente.

Također, potrebno je osigurati da se troškovi liječenja generalno financiraju unaprijed, kako bismo spriječili isključivanje pacijenata slabijeg imovinskog stanja. Nadalje, treba omogućiti

pacijentima pravo na drugo stručno mišljenje o tome koji je najbolji zdravstveni zahvat na raspolaganju u cijeloj Europskoj uniji. Također, trebalo bi razmotriti osnivanje posebnog fonda za ujednačavanje na razini EU-a koji bi djelomično pokrивao troškove liječenja u inozemstvu, čime bismo osigurali da države članice koje preuzimaju veći teret financiranja liječenja svojih pacijenata u drugim državama ne budu suočene s nerazmjernih financijskim opterećenjem.

Dodatno, važno je naglasiti da će uspostava europskog prostora za zdravstvene podatke, na čemu sam radio kao izvjestitelj Europskog parlamenta, bitno unaprijediti prekograničnu zdravstvenu skrb pacijenata. Liječnicima će se omogućiti pristup zdravstvenim podacima pacijenata iz cijelog EU-a u elektroničkom formatu, što će omogućiti bržu i učinkovitiju dijagnostiku i liječenje. Kolegice i kolege, došlo je vrijeme za reformu pravila o prekograničnoj zdravstvenoj skrbi. Očekujem da će Europska komisija predložiti njihovu izmjenu kako bi pacijenti koji u svojoj zemlji ne mogu dobiti adekvatno liječenje lakše mogli ostvariti zdravstvenu skrb u inozemstvu.

4-0169-0000

Maria Grapini, *în numele grupului S&D.* – Domnule președinte, domnule comisar, discutăm un subiect pentru care, mi se pare mie, titlul nu are legătură cu realitatea. Eu am fost și ministrul turismului în țara mea. Eu aș prefera să se facă turism medical numai pe ceea ce ține de natură, apă, nămol, aer, dar turismul medical, așa cum îl înțelegem acum din ceea ce ați prezentat dumneavoastră, este un chin pentru pacient. Pacientul ar trebui să aibă cel mai apropiat loc pentru a se trata. Și a spus și colegul meu, să mergi dintr-o țară în altă țară să îți faci tratament înseamnă să completezi niște formulare, să plătești de la tine și să aștepti să îți dea când se va putea. Deci, dacă vrem să facem turism, eu nu i-aș spune „turism”, eu i-aș spune „dreptul pacienților” de a se trata în țara lor, în locul lor, în regiunea lor. Pentru că „turism” înseamnă ceva plăcut, ori pacientul să-l duci pe brațe, să-l duci cu avionul, să-l duci cu salvarea, este absolut neplăcut.

Pentru că am discutat astăzi și de bolile rare. Eu cred că trebuie să ajungem într-adevăr să aplicăm acele directive pe care le avem – dreptul oricărui cetățean european la sănătate, acces la aparate. Nu poți să stai să te duci în altă țară să-ți faci o radiografie. Deci aici avem foarte mult de lucrat și rugămintea mea este acum, la început de mandat, să cereți, Colegiul comisarilor, să avem cu adevărat o strategie pentru tratarea pacienților la ei acasă.

4-0170-0000

Margarita de la Pisa Carrión, *en nombre del Grupo PFE.* – Señor presidente, señor comisario, señorías, el turismo sanitario es una tendencia en auge a nivel internacional. Cada vez más personas viajan al extranjero en busca de tratamientos médicos específicos, desde intervenciones estéticas y odontológicas hasta cirugías especializadas. Al mismo tiempo, la Unión Europea se ha convertido en un destino clave para pacientes de otros países que buscan una atención médica de calidad o legislaciones más convenientes según el caso. España, en particular, se encuentra entre los diez destinos más populares del mundo para este tipo de turismo.

Ante esta demanda en alza, debemos salir de la Unión Europea. Debemos analizar el asunto de forma cauta.

La salud es un tema muy delicado y estas prácticas, si bien pueden ser beneficiosas, conllevan riesgos significativos. Debemos asegurar que los ciudadanos que viajan a países de fuera de la Unión Europea se someten a procedimientos seguros que cumplan unos mínimos estándares de calidad. Existen riesgos de mala praxis con complicaciones posoperatorias que llevan a situaciones realmente desesperadas.

Al mismo tiempo, a la hora de recibir este tipo de turismo, en nuestros países también debemos extremar la atención y la precaución, ya que igual que sí que pueden ser una fuente de prosperidad también pueden impactar de manera muy negativa en la estabilidad de nuestros sistemas de salud. Cada vez más y más, la capacidad de respuesta de nuestros servicios se ve limitada, como puede ser precisamente el caso de España: recortes de personal, reducción de camas, retrasos en citas médicas, listas de espera interminables. Mientras debatimos sobre el auge del turismo sanitario, la realidad es que miles de ciudadanos se enfrentan a diagnósticos tardíos que comprometen gravemente su tratamiento y, en muchos casos, incluso su vida.

No podemos olvidar a los profesionales sanitarios y la precariedad laboral que padecen: sueldos insuficientes, contratos temporales, jornadas extenuantes y una escasez de personal que se agrava por la fuga de talento. A esto se suma la gestión desigual de los servicios, incluso dentro de cada país, que provoca enormes deficiencias en algunas regiones en términos de inversión, recursos y acceso a los tratamientos, como es el caso de las zonas rurales.

Todo esto sucede en un contexto de creciente presión sobre el sistema sanitario. Por un lado, el envejecimiento de la población, que demanda más cuidados y recursos y, por otro lado, la inmigración descontrolada, que ha disparado el número de pacientes incorporados a un sistema ya de por sí saturado. Muchos de estos nuevos usuarios, al encontrarse en situación irregular, no contribuyen a la sostenibilidad del sistema, pero sí generan una demanda adicional que agrava la falta de recursos. Y es que los recursos de cualquier país son limitados. Y no se trata solo de un problema económico. La sobrecarga impide ofrecer una atención de calidad poniendo en riesgo la salud de todos. Esta crisis amenaza el derecho a la atención sanitaria de quienes han sostenido con su trabajo un Estado de bienestar que caracteriza a la Unión Europea y que, irónicamente, es lo que nos hace atractivos para quienes buscan esta asistencia desde el extranjero.

Es urgente revisar el modelo actual. Si no encontramos un equilibrio entre solidaridad y sostenibilidad corremos el riesgo de que la sanidad pública de los Estados miembros, concebida como un derecho universal, se convierta en un sistema colapsado e insostenible. Garantizar un acceso justo y una atención de calidad debe ser una prioridad.

4-0171-0000

Michele Picaro, a nome del gruppo ECR. – Signor Presidente, onorevoli colleghi, ringrazio il Commissario Varhelyi e la Commissione per la risposta fornita e la sensibilità dimostrata nei confronti del fenomeno del turismo sanitario, che coinvolge sempre maggiori settori della medicina, quali la chirurgia estetica e plastica, la procreazione medicalmente assistita, la chirurgia ortopedica e oftalmologica, le terapie innovative e infine il settore più colpito, l'odontoiatria.

I nostri cittadini, spesso attratti da costi più bassi e tempi d'attesa ridotti, si recano in paesi al di fuori dell'Unione europea per ricevere cure sanitarie; tuttavia, accanto a questi apparenti benefici, emergono rischi significativi per la salute: standard igienico-sanitari non conformi, assenza di continuità assistenziale e scarsa possibilità di tutela in caso di *malpractice*.

Tuttavia l'assenza di dati statistici sulle *malpractice* del turismo sanitario non ci impedisce di portare in questa autorevole assise casi concreti e testimonianze di cittadini tornati da questi trattamenti con infezioni gravi, protesi mal posizionate e necessità di interventi correttivi, che conseguentemente ricadono sul sistema sanitario nazionale e spesso sul paziente, che deve sostenere privatamente ulteriori spese.

Non possiamo impedire la libera scelta dei nostri cittadini, ma abbiamo il dovere di proteggerli con strumenti di informazione, di prevenzione e, se necessario, misure regolatorie. In quest'ottica

ritengo opportuno avanzare una proposta concreta alla Commissione: introdurre a livello europeo un meccanismo di certificazione dei paesi terzi che erogano prestazioni sanitarie ai cittadini dell'Unione europea. Tale sistema dovrebbe fornire una classificazione dei livelli di conformità agli standard minimi europei in materia di qualità delle cure, sicurezza dei pazienti, qualificazione del personale, valutazione dei protocolli clinici e tracciabilità dei dispositivi medici.

L'obiettivo è garantire che la libertà di scelta dei cittadini europei in ambito sanitario si fondi su criteri oggettivi e verificabili, riducendo i rischi legati al fenomeno del turismo sanitario e contrastando le situazioni di *malpractice*, attraverso un'informazione trasparente e comparabile.

Per questo, caro Commissario Varhelyi, resto a disposizione per lavorare insieme su tutte le attività – iniziative legislative e non – che possiamo intraprendere per tutelare i nostri cittadini.

4-0172-0000

Billy Kelleher, *on behalf of the Renew Group*. – Mr President, healthcare is getting more and more expensive and it is getting difficult to access in some countries across Europe, so it's only reasonable to expect that some of our citizens will travel to wherever they can to get the best value and a timely service for their money.

For example, in Ireland, a dental implant with a crown will cost about EUR 2 200, but this can easily rise to over EUR 3 000. In Türkiye, the same procedure is likely to cost about 40 % of this amount. The same can be said about weight loss surgery, hair transplants and other forms of cosmetic surgery and elective medical surgery as well.

However, the grass is not always greener on the other side and there are inherent risks with going abroad and citizens should be made aware of these. There are issues with both quality of care while overseas, but also with a lack of aftercare in their home Member State. In Ireland, we have heard about very tragic cases of people dying after weight loss surgeries that took place abroad. There is little or no aftercare provided, people are travelling after very serious surgery and our medical services in Ireland do not have up-to-date medical records for patients presenting in emergencies.

While I am not or would never advocate for any prohibition of travelling abroad for healthcare, we do need to put in place better educational programmes, post-treatment care plans and improve the sharing of essential medical information.

And Commissioner, while we also begin to look at the opportunities with regard to the provision of a health union across Europe in the area of rare diseases and other services in the health sector, we also need to look at the Cross-Border Healthcare Directive and to see where we can fine tune that to ensure that there is no spare capacity across Europe not being used in Member States that might have additional surplus capacity, while other countries are overburdened and unable to meet the needs of their citizens because of a lack of capacity.

And I certainly believe that the Cross-Border Healthcare Directive is a wonderful opportunity for us to expand that, so that we can share and pool our resources to ensure that patients have access to standardised, proper healthcare across the European Union in any Member State, if their own Member State is unable to provide it.

4-0173-0000

Valentina Palmisano, *a nome del gruppo The Left*. – Signor Presidente, onorevoli colleghi, immaginate di dover lasciare la vostra città, la vostra famiglia, il vostro paese non per un viaggio,

ma per curarvi: non per scelta, ma per necessità. Questa è la realtà quotidiana di migliaia di cittadini europei.

Parliamo di mobilità sanitaria, ma la verità è che troppo spesso si tratta di mobilità forzata.

In Italia, in particolare nel Mezzogiorno, tanti pazienti sono costretti a fuggire verso il nord o all'estero per trovare cure adeguate; questa però non è libertà di scelta, è un fallimento del sistema.

La direttiva 2011/24/UE doveva garantire il diritto di curarsi ovunque in Europa, senza ostacoli economici e burocratici, ma oggi quella direttiva, purtroppo, rischia di funzionare solo per chi può pagare. Chi ha le risorse, infatti, può anticipare migliaia di euro, aspettare mesi per un rimborso e viaggiare per accedere a cure migliori; chi non può, resta indietro. Ecco, così nasce una sanità a due velocità, dove il diritto alla salute diventa un privilegio per pochi, e non ce lo possiamo permettere.

E non è tutto, c'è un altro fenomeno: troppi cittadini, per necessità o con l'idea di poter risparmiare, si affidano a cliniche private all'estero, in paesi terzi, senza garanzie sui protocolli di sicurezza, senza trasparenza sui costi, senza un'informazione chiara sulla qualità delle cure. Posso citare il caso delle cure odontoiatriche: ogni anno, in Italia, 200 000 persone vanno all'estero per una terapia odontoiatrica, attratti da cure fino alla metà dei costi, con offerte anche di soggiorni e pacchetti turistici.

Ecco, dovrebbero essere prese in considerazione delle serie campagne informative sui rischi terapeutici ed economici di questo turismo sanitario. Molti europei, infatti, tornano inizialmente soddisfatti per aver risolto i loro problemi, magari apparentemente a metà prezzo, fino a quando, dopo tre-sei mesi, nel 50 % dei casi si manifestano recidive, con infezioni anche gravi, e necessità di nuove cure, magari più complesse e più costose.

La salute non può essere lasciata alla libera legge del mercato, non può diventare un salto nel buio. Serve un cambiamento, servono regole più eque, rimborsi rapidi, accessibili. Soprattutto servono investimenti veri nella sanità pubblica nazionale, ospedali efficienti, medici valorizzati, cure garantite ovunque e per tutti.

Solo così noi fermeremo la fuga dei pazienti, e solo così il diritto alla salute sarà davvero universale. L'Unione europea ha una scelta davanti a sé: può essere un'area di mercato o una comunità di diritti. Noi scegliamo la seconda.

4-0174-0000

Siegbert Frank Droese, *im Namen der ESN-Fraktion*. – Herr Präsident, verehrte Kollegen! Die Kommission sorgt sich um Gesundheitsdienstleistungen im Tourismussektor – das klingt erst einmal gut. Wenn man sich aber die Details der EU-Pläne, um die es geht, anschaut: Es handelt sich eben wieder um eine Unmenge an Vorschriften, unklare Vorschriften, unklare Zuständigkeiten, unkonkrete Finanzierung, Kontrollen, Meldestellen. Es steht außer Frage; der Gesundheitstourismus ist, wie bekannt, ein boomender Markt in der EU. Rund 5 % im Tourismus werden mit Wellness und Gesundheit verdient, und dieser Anteil steigt ständig – betrachtet man die Demografie Europas. Die Kernfrage ist aber hier erneut: Ist der Gesundheitstourismus Aufgabe der EU? Wir sagen Nein. Wenn jemand aus Deutschland nach Ungarn zum Zahnarzt fährt, muss er sich informieren über die Risiken – die EU ist nicht der Erziehungsberechtigte der Europäer.

Ein anderer betonter Punkt sind die Patientenrechte. Im Herbst 2024 fand z. B. in Brüssel extra dafür ein Workshop statt. Motto: Achtsamkeit von Patientenrechten. Wir sagen: Die Menschen

sind selber intelligent genug, sich zu informieren. Und wenn jemand es nicht ist, dann ist es eben sein Problem – wir vertrauen den Europäern.

Stark betont wird bei den aktuellen EU-Plänen der Aspekt der Sicherheit. Ich hätte da in puncto Sicherheit ein paar Vorschläge für den Herrn Kommissar. Gerade im grenzüberschreitenden Verkehr: Mehr Kontrollen an den EU-Außengrenzen – sogar wahrscheinlich – sorgen auch für mehr Sicherheit in Bezug auf die Einschleppung von Infektionskrankheiten. Und weiter: Mehr Eigenverantwortung für medizinische Einrichtungen, weniger bürokratische Kontrollen und vor allem weniger korrupte NGOs.

Dass die EU gerade im Gesundheitswesen nur bedingt resilient ist, hat uns das Corona-Regime vor Augen geführt. Übrigens bis heute sind die Verträge von Frau von der Leyen mit den Pharmakonzernen unter Verschluss. Warum eigentlich? Wo bleibt hier die vielbeschworene Transparenz? Ich könnte mir Frau von der Leyen sehr gut mit einer Fußfessel vorstellen und immer mehr Europäer auch.

Noch einmal zum Gesundheitstourismus: Lassen wir die Menschen selbst entscheiden, wo sie Wellnessurlaub machen oder zum Zahnarzt gehen. Der echte Europäer braucht weder betreutes Reisen noch betreutes Urlauben. Diese EU hat schon genug Bürokratie und Korruption auf dem Kerbholz. Grüner Tourismus, fairer Tourismus, nachhaltiger Tourismus. Die Menschen haben davon die Nase voll. Es hängt ihnen zum Halse raus, und ich kann das verstehen.

Herr Kommissar, die Pläne, die Sie vorlegen, kann man nur ablehnen. Weg damit! Weniger EU ist immer mehr Europa.

4-0175-0000

Seán Kelly (PPE). – *A Uachtaráin*, Commissioner, across Europe, a growing challenge is emerging – one that affects the health and well-being of our citizens. An increasing number of people are travelling abroad for medical care, not as a preference but as a necessity. Long waiting lists, high costs and barriers to timely treatment at home are driving patients to seek care elsewhere.

However, in some cases, the quality and safety of care received abroad do not meet expected standards. Patients may encounter poorly regulated clinics, unqualified practitioners and a lack of follow-up care. When complications arise, it is often our own public health systems that must provide corrective treatment.

In Ireland, between 2021 and 2023, at least nine individuals sadly lost their lives after undergoing procedures overseas. These were people making what they believed to be the best decisions for their health in difficult circumstances, highlighting the need for better options at home.

We are seeing a rise in patients seeking surgeries and dental procedures abroad, often drawn in by persuasive marketing and the appeal of lower costs. Yet many only realise the risks after complications emerge. The Irish Dental Association has reported an increase in patients needing corrective treatment for procedures carried out overseas, adding further pressure to an already stretched healthcare system.

This issue is not simply about people choosing to travel for care. It is about why they feel they have no alternative. The solution lies in strengthening our own health care system. And for those who seek treatment abroad, we must provide better information, protections and support to prevent avoidable harm.

Sin a bhfuil uaimse. Go raibh míle maith agat a Uachtaráin. Go n-éirí libh.

4-0177-0000

Cynthia Ní Mhurchú (Renew). – A Chathaoirligh, a chairde, tá breis is 700 000 Éireannach ag fanacht ar liostaí feithimh ospidéal. Faoi Treoir Sláinte Trasteorann is féidir leis na hothair sin leas a bhaint as an seans go n-íocfar as an gcóireáil sin i dtír de chuid an Aontais. Léirigh figiúirí a fuair mé ón HSE in Éirinn go bhfuil laghdú 80 % tagtha ar líon na n-othar atá ag fiafraí faoi chóireáil thar lear agus laghdú suntasach eile, 55 %, ar líon na n-othar a fhaigheann aisíocaíochtaí faoi Treoir idir 2018 agus 2023. Dúshlán mór é seo gan amhras. Chaith seirbhísí sláinte na hÉireann €15 mhilliún i 2020 ag aisíoc othar faoi scéim, ach faoi 2023 bhí an figiúr sin titithe go €9 milliún. De réir tuarascála ón Aontas roinnt blianta ó shin, ní raibh a fhios ach ag 11 % de mhuintir na hÉireann go raibh an Treoir seo ann fiú agus ní raibh lucht leighis áirithe fiú ar an eolas faoi. Ceann de phríomhlaigí na Treorach seo ná go gcaithfidh an t-othar íoc as ar dtús agus fanacht suas le 4 mhí ar aisíocaíocht. Ní leor é sin do dhaoine atá ar an ngannchuid.

Cuidíonn an Treoir seo le daoine ar fud an Aontais gach lá chun aghaidh a thabhairt ar riachtanais chasta leighis agus le liostaí feithimh a laghdú. Sin é an fáth go n-iarraim ar an gCoimisiún anseo inniu feachtas poiblíochta a sheoladh le dul i ngleic leis an dúshlán feasachta atá roimpi.

4-0178-0000

Liudas Mažylis (PPE). – Pirmininke, Komisijos nary, kolegos. Štai ir baigiamieji sesijos pasisakymai. Pradedą atrodyti, kad laimėjom žudančius karus, išlaisvinom milijoną politinių kalinių, pagerbėme tautų teisuolius ir jau galima pliuskintis SPA. Na, realybėje viskas persipynę, kaip ir Europos Parlamento darbotvarkėje. Dar karas ne laimėtas, o jau norisi, pavyzdžiui, į terminį Bohemijos trikampį. O ten – problema: apie pacientą kitoje valstybėje duomenys nebūtinai pasiekiami. O juk kiekvienas atvykęs nusipelno gauti tokią pat kokybišką medicininę pagalbą kaip ir vietiniai gyventojai. Tad, grįžęs iš karštųjų versmių pas savo šeimos gydytoją, galiu jį labai nuliūdinti. Jis ilgus mėnesius reguliavo mano kraujospūdį, o aš, priėmęs per daug šiltųjų vonių, viską sugadinau per savaitę. Išėjus turbūt viena – nepaliaukime ir toliau siekti sukurti bendrą europinę elektroninių sveikatos duomenų bazę.

4-0179-0000

Solicitudes incidentales de uso de la palabra («catch the eye»)

4-0180-0000

Bogdan Rzońca (ECR). – Panie Przewodniczący! Sytuacja jest bardzo skomplikowana w obszarze służby zdrowia i mówimy o niezwykle wrażliwych kwestiach związanych z ratowaniem zdrowia - z leczeniem. Nie wiem, czy jesteśmy w stanie wszystko uregulować i nie powinniśmy wszystkiego regulować. Nawet dzisiaj tutaj na sesji Parlamentu głosowaliśmy kilka kwestii deregulacyjnych w Unii Europejskiej i to jest właściwy kierunek. Powinniśmy iść w stronę deregulacji w Unii Europejskiej, większego wolnego rynku, a nie nadregulacji. Wydaje mi się, że w obszarze służby zdrowia pierwszą istotną rzeczą jest, żeby dobrze poinformować mieszkańców Unii Europejskiej, co im wolno a czego nie wolno, i czego nie mogą uzyskać w ramach Unii Europejskiej jako obywatele, będąc w innych krajach. To jest pierwsza informacja, żeby byli bezpieczni. Natomiast w tej chwili mamy dodatkowy kłopot w Unii Europejskiej. Kiedy Trump wprowadził cła, także w stosunku do Unii Europejskiej, to pamiętajmy, że dużo lekarstw, dużo producentów lekarstw z Unii Europejskiej eksportowało leki do Stanów Zjednoczonych.

I tu powinniśmy zadbać o to, żeby producenci leków w Unii Europejskiej mieli dobre czy bezpieczne warunki do produkcji tych leków, które po prostu są niezbędne dla mieszkańców Unii Europejskiej.

4-0181-0000

Lukas Sieper (NI). – Herr Präsident! Ich möchte eingangs Ihnen raten – in aller Freundlichkeit – bei den Reden von Herrn Kollege Droese immer von Anfang an zuzuhören. Denn es ist derselbe Mann, der sich vor Hitlers Hauptquartier Wolfsschanze mit der Hand auf dem Herzen hat fotografieren lassen damals. Dementsprechend denke ich: Wir sollten diesen Menschen ganz genau zuhören bei dem, was sie tun.

Liebe Menschen Europas, vor zwei Jahren, da tobte ich mit meiner Freundin im Hotelpool in Griechenland herum. Ich war ein bisschen zu wild. Sie kam zu schnell, zu tief unter Wasser und riss sich das Trommelfell. Wir gingen schnell zu einem exzellenten griechischen Arzt, der sie behandelte. Und trotzdem blieb sie am Ende auf 130 Euro sitzen, die die deutsche Krankenkasse als Mehrbetrag im Vergleich zu deutschen Behandlungen nicht übernehmen wollte – und genau das ist das Problem.

Wir reden immer vom europäischen Binnenmarkt, von Freizügigkeit. Aber wenn jemand innerhalb Europas krank wird, dann haben wir plötzlich einen riesigen bürokratischen Ausstandsschadensfall. Gesundheitstourismus ist kein Trick, sondern Ausdruck europäischer Freiheit. Denn europäische Freiheit endet nicht am Krankenhausflur – sie beginnt dort.

4-0182-0000

Alvise Pérez (NI). – Señor presidente, primero y antes que nada, pido que se respete aquí a los eurodiputados evitando llamarnos nazis entre nosotros. Qué absurdo en un pleno que no tiene absolutamente nada que ver con ello. Por favor, respetémonos entre todos nosotros.

Yo, como español, puedo decir que sufrimos absolutamente todos los problemas que ustedes han verbalizado aquí: sufrimos a la gente del norte de Europa que quiere venir a operarse para perder peso, sufrimos a los que se quieren poner dientes en nuestro sistema de salud y nos parece magnífico, siempre y cuando lo paguen.

Aquí el problema es básicamente que la Comisión Europea se ponga ahora a opinar si está bien o mal y con qué motivos los europeos hacen turismo. Aquí el problema de verdad es cómo se hacen las transacciones económicas para que nosotros los españoles podamos cobrar el gasto desmedido que tenemos de este tipo de turismo, para que, en fin, nos puedan devolver el dinero a quince días vista, no a un año, como pasa en algunas ocasiones.

Y, sobre todo, el concepto de reciprocidad. ¿Cómo es posible que yo, como español, si me pongo malo, en ciertos países tenga que estar pagando un servicio que luego nosotros ofrecemos gratis a según qué personas? Entre ellas, por cierto, las del problema que siempre aborda este Pleno, que es la inmigración masiva, especialmente la ilegal. Así que, si tuviéramos un poco de reciprocidad en los sistemas sanitarios europeos, en el trato con países de fuera de la Unión Europea —y también, por cierto, un poco de sentido común con los impuestos que aplicamos a las donaciones que se hacen a las personas que están hospitalizadas en terceros países, como la famosa valenciana en Bangkok, que ha tenido que pagar más de trescientos mil euros en impuestos—, nos iría mucho mejor a todos.

(el presidente retira la palabra al orador)

4-0183-0000

(Fin de las intervenciones con arreglo al procedimiento de solicitud incidental de uso de la palabra («catch the eye»))

4-0184-0000

Olivér Várhelyi, Member of the Commission. – Mr President, honourable Members, thank you very much for this discussion. I believe all of us want EU citizens to receive the best possible treatment, maintaining high standards and their rights as patients.

However, while affordability may be tempting, seeking treatment outside the EU can carry significant risks. These include uncertain medical standards, concerns around legal protections and post-treatment complications.

Patient safety must remain our top priority. Therefore, we must continue to strengthen our EU healthcare cooperation, raise awareness among EU patients, and ensure that all citizens have access to safe, well-regulated and high-quality medical care.

4-0185-0000

El presidente. – Se cierra el debate.

Declaraciones por escrito (artículo 178 del Reglamento interno)

4-0185-5000

Έλενα Κουντουρά (The Left), γραπτώς. – Κύριε Επίτροπε,

η πρόσβαση σε ποιοτική υγειονομική περίθαλψη σ'όλη την ΕΕ αποτελεί αναφαίρετο δικαίωμα των πολιτών. Στον σημερινό διασυνδεδεμένο κόσμο, η ανάγκη ή η επιθυμία για ιατρική φροντίδα στο εξωτερικό γίνεται ολοένα και συχνότερη. Ωστόσο, οι ευρωπαϊκοί κανόνες που διέπουν τη διασυνοριακή περίθαλψη παραμένουν περίπλοκοι, ανεπαρκείς και σε μεγάλο βαθμό άγνωστοι, τόσο στους ασθενείς όσο και στους επαγγελματίες υγείας.

Η οδηγία 2011/24/ΕΕ υποτίθεται ότι εγγυάται ισότιμη πρόσβαση στη θεραπεία σε οποιοδήποτε κράτος μέλος. Ωστόσο, η πραγματικότητα δείχνει ότι απέχουμε πολύ απ'το να εξασφαλίσουμε ίση και αποτελεσματική πρόσβαση για όλους τους Ευρωπαίους ασθενείς. Στην πράξη, η διαδικασία είναι χρονοβόρα, γραφειοκρατικά δύσκαμπτη και ευνοεί μόνο όσους έχουν την οικονομική δυνατότητα να προκαταβάλουν τα έξοδα και να αναμένουν επιστροφή χρημάτων. Το αποτέλεσμα είναι η δημιουργία ενός συστήματος υγείας δύο ταχυτήτων, όπου η πρόσβαση στην καλύτερη φροντίδα δεν είναι δικαίωμα, αλλά προνόμιο.

Οφείλουμε να διασφαλίσουμε ότι το κόστος της θεραπείας καλύπτεται προκαταβολικά απ'τα ασφαλιστικά ταμεία, ώστε να μην αποκλείονται οι οικονομικά ασθενέστεροι, καθώς και να στηρίξουμε την ανάδειξη υποδομών και υπηρεσιών ιατρικού τουρισμού υγείας και ευεξίας. Τέλος, όσον αφορά τον ιατρικό τουρισμό σε τρίτες χώρες, οφείλουμε να προχωρήσουμε σε στοχευμένες εκστρατείες ενημέρωσης και προστασίας των πολιτών που καταφεύγουν σε ιδιωτικές ιατρικές δομές και υπηρεσίες, όπου δεν υπάρχουν πάντα εγγυήσεις ποιότητας και υψηλά πρότυπα ασφάλειας.

13. Explicaciones de voto

4-0187-0000

El presidente. – Pasamos ahora a las explicaciones de voto.

13.1 Ataques dirigidos contra cristianos en la República Democrática del Congo: defensa de la libertad de religión y la seguridad (RC-B10-0211/2025)

4-0189-0000

El presidente. – Pasamos ahora a las explicaciones de voto sobre los ataques dirigidos contra cristianos en la República Democrática del Congo: defensa de la libertad de religión y la seguridad.

4-0190-0000

Seán Kelly (PPE). – (*Níor phioc an micreafón suas tús na hóráide*) vótálas ar son na tuarascála seo...

... as it condemns the rising violence against Christians in the DRC, and upholds religious freedom and security. The ADF, linked to the Islamic State, killed over 200 people in December 2024 alone. Forced displacement, abductions and executions of Christians continue unchecked, demanding urgent action.

This resolution calls for accountability, urging the ICC to prosecute perpetrators and supporting an international inquiry into human rights violations. A special tribunal must also be considered.

Religious freedom is a fundamental right. The EU must stand against the persecution of Christians.

Agus trí na tuarascála seo, táimid ag tabhairt teachtaireacht thábhachtach láidir go bhfuilimid ag seasamh ar thaobh cearta daonna, saoirse, creidimh agus cearta na mban i gcoinne foréigean gnéis agus gáinneáil ar dhaoine. Tá áthas orm go bhfuair an tuarascáil tromlach mór sa Pharlaimint agus gur vótálas ina fabhar. Sin a bhfuil uaimse. Ádh mór.

4-0193-0000

El presidente. – Con esto concluimos las explicaciones de voto.

14. Aprobación del Acta de la presente sesión y transmisión de los textos aprobados

4-0195-0000

El presidente. – El acta de esta sesión se someterá a la aprobación del Parlamento al comienzo de la próxima sesión.

De no haber ninguna objeción, transmitiremos las Resoluciones aprobadas en la sesión de hoy a las personas y a los órganos mencionados en cada una de las Resoluciones.

15. Calendario de las próximas sesiones

4-0197-0000

El presidente. – El próximo período parcial de sesiones tendrá lugar del 5 al 8 de mayo en Estrasburgo.

16. Cierre de la sesión

4-0199-0000

(Se levanta la sesión a las 15.39 horas).

17. Interrupción del período de sesiones

4-0201-0000

El presidente. – Declaro interrumpido el período de sesiones del Parlamento Europeo.

Y aprovecho también para dar las gracias a todos los trabajadores que lo hacen posible.