



INDEXED

Report of the fifth meeting of the European
Advisory Committee for Medical Research

Prague, 17-18 October 1979

ICP/RPD 001(5)

ORIGINAL: ENGLISH

Research, Medical - Conference
Research, Medical - Europe

OPENING SESSION

Welcoming the participants on behalf of the Czechoslovak Government, the Minister of Health of the Czech Socialist Republic, Professor J. Prokopce, expressed the hope that the meeting would lead to improved cooperation among the countries of the European Region, in the field of health.

The Regional Director for Europe, Dr Leo A. Kaprio, opened the meeting and expressed his gratitude to the Government of Czechoslovakia for its valuable financial and practical support in the organization of the meeting.

The year 1979 had been a difficult one because of the stringent financial situation, but thanks to voluntary contributions and the transfer of funds from other regions, the Regional Office was now able to carry out its programmes as scheduled for the remainder of the year. In that connexion, he expressed special thanks to the Austrian Government for providing funds to finance administrative parts of the programme, to the Belgian Government for its support of the Planning Group on Prophylaxis and Early Detection, and to the United Kingdom Government for its support of the Planning Group on Information Systems for the Biomedical Research Promotion and Development Programme.

The Declaration of Alma-Ata had been analysed by the Regional Committee at its twenty-ninth session in Helsinki, and a more detailed document setting out European strategies for attaining the goal of health for all by the year 2000 would be submitted to the Regional Committee at its next session in Morocco in 1980. Member States would continue to provide guidance to the Regional Office, but research programmes and particularly health services programmes would have to be geared to monitoring and studying problems and trends and suggesting possibilities for solutions, as and when appropriate.

That part of the research and development programme dealing with the research component of existing programmes would have to be extended to cover an increasing number of activities in such fields as the health care of the elderly, road traffic accidents and mental health.

Professor J. Kostrzewski, who had been unable to attend the meeting, had proposed a specific intercountry programme, namely, a cooperative study of health services.

With regard to coordination, Dr D. Sokolov and Dr E. Kalimo had participated in a meeting of the Advisory Committee on Medical Research, held in Alexandria in June 1979, on the subject of health services research, the report of which was to be discussed later during the meeting of the EACMR.

The Regional Office had cooperated with the International Epidemiological Association in issuing a publication entitled *Measurement of levels of health*. The possibility of a further publication dealing with positive indicators of health promotion was being considered.

As recommended in Regional Committee resolution EUR/RC28/R4, a liaison meeting of European bodies concerned with health services research was convened in Helsinki on 6 September 1979. The results of that meeting would be discussed subsequently by the EACMR.



A number of activities had been carried out in collaboration with the International Children's Centre, the Association of Schools of Public Health of the European Region, the International Institute for Applied Systems Analysis and the International Epidemiological Association.

The Regional Office was continuing to experience difficulties in implementing research training grants programmes on account of a total lack of financial support.

Research training grants could be a powerful instrument in the implementation of research policies. Past advice by the EACMR concerning implementation at the national level had proved to be of relevance under the present circumstances. It was hoped that research training grants in health services research could be provided for certain selected areas, to be agreed upon by a group of countries. The next step would then be to coordinate the work of researchers and decision-makers.

However, one possibility was still open, i.e., to use some of the fellowships funds for research training, for example in Algeria, Morocco and Turkey; for those countries funds for fellowships were available to a somewhat larger extent.

In his welcoming address, Professor C. Burg stated that the EACMR had accomplished one-half of its mandate, according to its terms of reference. Priorities had been defined by the various planning groups. The Committee was now expected not only to define areas for research, but to assist in implementation.

In some countries, national health authorities did not have sufficient administrative capacity to maintain adequate communication or control over research programmes in their countries. EACMR should stress the desirability of research programmes jointly planned and implemented by national health authorities at different levels and by national research bodies.

The liaison meeting in Helsinki on 6 September 1979 had proved quite successful. Attended by participants from several European research organizations, it had made a number of practical recommendations.

PROGRESS DURING THE PERIOD NOVEMBER 1978-SEPTEMBER 1979

Dr B. Nizetic informed the Committee of the salient events since its last meeting in October 1978.

Contact with Member States

The Regional Office had approached Member States in connexion with resolution EUR/RC28/R4 on research promotion and development, and requested specific comments on the consolidated report of the five planning groups on research priority areas.

Seven replies had been received (from Austria, Belgium, France, the Federal Republic of Germany, Portugal, Sweden and Turkey), expressing agreement with those research areas suggested by the EACMR and its planning groups, and indicating possible ways of cooperation and national support.

Planning Group Meetings

Planning Group on Evaluation of Drugs and other Thera- peutic and Diagnostic Sub- stances

The Group was convened in Copenhagen from 13 to 15 March 1979. In view of the Consultation Meeting on Hypertension Research related to Health Care, the Group had discussed relevant research on drugs in relation to the practical application of results at the community level.

Planning Group on Standard- ization of Methods, Measure- ments and Terminology in Bio- medical and Health Services Research

The Group was convened in Copenhagen from 19 to 21 March 1979. It reviewed the existing knowledge in the field of health care outcome measurements and paid particular attention to this problem in connexion with arterial hypertension.

Planning Group on Prevention, Prophylaxis and Early Detection

The Group, which met in Brussels from 6 to 8 June 1979, reviewed three previously selected priority areas, namely: (1) identification and evaluation of toxic hazards; (2) public attitudes to prevention; (3) harmful effects of drugs. In addition, the Group considered hypertension as a model for research in prevention and early detection.

Planning Group on Information Systems for the Research Promotion and Development Programme

The Group was convened in London from 19 to 21 September 1979. It discussed the organization of health research in Member States on the basis of information obtained from questionnaires. Additional information would be collected and a final table published by the Regional Office. The Group had also made recommendations regarding compatible national inventories on ongoing research and coordination with bodies such as UNESCO and the Commission of the European Communities.

Planning Group on Economic Aspects of Health Care

The second meeting would take place in Copenhagen from 27 to 29 November 1979.

Other Meetings

Workshop on Health Economics Research

The Workshop, convened in The Hague from 24 to 27 September 1979, reviewed existing research on the degree to which the growth in health resources, budget and finance systems and new technology was fuelling the growth in the volume of health services. Since almost all the pertinent research in this area had been done in the field of economics, the Workshop was attended by economists, research physicians, a sociologist, a political scientist, several health administrators, together with representatives from various intergovernmental bodies, thus paving the way for interorganizational research promotion and development in the future.

As regards research findings, the Workshop reached the following conclusions:

- (1) There is sufficient evidence that more physicians and more hospital beds mean more health services, regardless of actual health conditions.
- (2) Future research should focus on specific health programmes and client groups, etc.
- (3) Future research should be more aware of national differences in health care organization.
- (4) Countries should aim at controlling unnecessary growth in health manpower and the number of hospital beds.

The following proposals were made:

- (1) Research planning, implementation and evaluation should be interdisciplinary.
- (2) The research should be broadened to include demographic, epidemiological and labour market considerations, as appropriate.

The WHO Regional Office for Europe should select one national institute to undertake a further refinement of the research protocol.

First Liaison Meeting on Health Research Coordination

The meeting, which had been recommended by the Regional Committee in resolution EUR/RC28/R4, was convened in Helsinki on 6 September 1979. Its aim was to establish contact with various subregional bodies such as the Public Health Committee of CMEA, EMRC, the Nordic Council and international organizations involved in research such as the International Sociological Association, the International Federation of Pharmaceutical Manufacturers Associations, the International Council of Nurses, etc.

All the participants attended at their own expense, and a few who had been unable to attend had expressed their interest in attending future sessions.

The Regional Office was represented at EMRC meetings in Bethesda and Strasbourg and at a WHO interregional meeting on health services research.

Professor A. Lafontaine and Professor A. Černuh called for a realistic attitude towards research coordination. With regard to hypertension, it was indispensable, in the first place, to have full information, and in the second place, to have a good and efficient division of tasks, an identical methodology and a deadline for the tasks to be completed.

Dr Kaprio outlined some possibilities for cooperation with CMEA. Secretariat responsibilities, which would mainly be undertaken by the WHO Regional Office for Europe and the CMEA Secretariat in Moscow, should be formalized and the ongoing activities of CMEA analysed. Within the scope of work of CMEA there were approximately 70 different research programme areas of interest for the regional research and development programme.

Dr Sokolov gave an audiovisual presentation of the ACMR meeting on health services research held in Alexandria in June 1979, at which the term "health services research" was defined as follows: "Health services research is the systematic study of the means by which basic medical and other relevant health knowledge is brought to bear on the health of individuals and communities under a given set of conditions".

Health services research had to be a priority field, despite the fact that a clear delimitation of the area was difficult. It would be a component of ongoing programmes in other areas.

Dr Kalimo said that, at the meeting in Alexandria, health services research had been considered not only as a priority issue for research, but also as an essential means of health services development. He referred to various definitions given by the ACMR in 1976 and the ACMR subcommittee in 1978, and stressed that the EACMR should first focus its attention on health services research in relation to the development of the health services system only, and then proceed to consider its wider implications.

Discussion

Professor H. Pauli pointed out that the conditions for health services research, in particular in the European countries, were at present rather unsatisfactory. Research institutions did not have sufficient understanding of the various problems existing in these areas. The staff of institutes was composed mainly of medical doctors who held traditional concepts of health and illness. Such a situation was not at all conducive to the promotion of research activities. There was a disproportion between health services research and traditional biomedical research. Research was thus being carried out by people who had not been trained in that particular area, and the results were not acceptable.

Health services research was only one of many priority areas, and it was necessary to consider how research policy in that area could be promoted. The answer to that question would be of primary importance for the Committee.

The Committee generally agreed with Dr Pauli's remarks. However, it believed that health services research should be highlighted as an interdisciplinary activity which called for contributions from physicians, biologists, statisticians, economists, etc. The development of a health service should be based on experience, data collection and data processing. The utilization of existing experts and institutions might prove of value.

MEETINGS OF THE PLANNING
GROUPS DEALING WITH RESEARCH
PRIORITY AREAS

Planning Group on Prevention,
Prophylaxis and Early Detec-
tion

Professor Lafontaine and Professor Černuh presented and commented on the draft outline report of the meeting in Brussels, 6-8 June 1979.

Three priority topics were emphasized:

- (1) identification and evaluation of toxic hazards;
- (2) public attitudes to the prevention of risks;
- (3) harmful effects of drugs.

Hypertension had been selected by WHO as a first priority area, but other diseases were not to be forgotten.

Toxic hazards

The problems faced were considered to be of a multidisciplinary nature and, when referring to toxicologists, pathologists and pharmacologists, the role of epidemiologists should not be overlooked.

Public attitudes to preven-
tion

The attitudes of the public in regard to prevention are related to its current understanding of the concept of prevention.

Prevention related to certain customs or traditions, and efforts in that field need not necessarily be medical in nature, something the public did not always understand. Finally, health education should aim to be health-oriented rather than disease-oriented.

Harmful effects of drugs

The group had considered the necessity of collecting information on toxic symptoms and epidemiological data. Particular attention was paid to certain factors leading to hypertension.

Discussion

It was asked to what extent the health services were being used in terms of primary health care; the situation in that respect remained unclear. That problem should be added to the list of first-priority items.

Prevention activities, e.g., vaccination, were part of existing treatment systems and there was always room for rationalization. However, the role of other factors within interdisciplinary systems, such as industry, chemicals, transport, accidents, commercial interests in alcohol and drugs, etc., should be established.

The above-mentioned factors probably had a considerable influence on health conditions, and WHO was responsible for following up those questions, whereas ministries of health were often dealing with more specific health service problems.

Planning Group on Evaluation
of Drugs and other Thera-
peutic and Diagnostic Sub-
stances

In the absence of Professor Bergström, Professor Burg presented the report of the meeting held in Copenhagen from 13 to 15 March 1979.

Presentation

It was suggested that clinical trials of drugs already being implemented should be reported to the Regional Office in order to save time and money. Another problem was that of the so-called "generic" drugs which were no longer subject to patent laws. Such drugs were marketed by a large number of firms under just as many different names. Finally, it was felt that the Group had not dealt with the evaluation of drugs for diagnostic purposes.

Discussion

Dr Kaprio said that a Drug Policies and Management unit had been established in the Regional Office on 1 April 1979.

The report was considered to be a useful guideline for the selection of issues needing follow-up. An additional step would be to clarify

the extent to which support could be given by headquarters, where there was a much larger body dealing with those problems on a world-wide basis. Many of the points considered had already been dealt with in the context of the Regional Office's programmes.

The following specific points were raised by the Committee:

- (1) Should governments intervene during the period of development of new therapeutic substances?
- (2) A recommendation concerning the implementation of drug utilization studies should be made to the Regional Committee.
- (3) The report was related too much to social and behavioural problems and too little to scientific problems.

It was generally accepted that the report had attempted to deal with a wide range of problems in the field under review; it should be regarded as a first step in considering research aspects in the field of drugs.

The Regional Office was therefore asked to continue its activities in that direction. The following specific points were made:

- (a) The Planning Group should go into the research aspects in greater depth.
- (b) Clinical trials should be the subject of a special study and the Regional Office should take up the role of centralizing all clinical trials.
- (c) Research on diagnostic aspects should be added to the list of items requiring study.

Planning Group on Standardization of Methods, Measurements and Terminology in Biomedical and Health Services Research

Presentation

As the rapporteur of the Planning Group was not present at the meeting, Professor Burg presented the report of the meeting held in Copenhagen from 19 to 21 March 1979.

Discussion

In view of the international character of standardization, the extent to which EACMR could work independently of headquarters and other international bodies was discussed. It was generally felt that the European Region should work more or less independently.

Dr H. Minners welcomed the idea of the European Region making an independent input and assuming a leadership role, and hoped that that point would be taken up at the next ACMR meeting.

The Committee considered that the report was very well-written and comprehensive and marked an important step forward.

Conclusions

The contents and recommendations of the report were accepted by the EACMR, which felt, however, that the Planning Group should make a more thorough examination of standardization problems and, in particular, to consider problems related to the field of hypertension. It was suggested that the chairman or a member of each planning group should be invited to appropriate EACMR meetings.

Planning Group on Information Systems for the Research Promotion and Development Programme

Dr H. Stein, Chairman of the Group, presented the report of its meeting held in London from 19 to 21 September 1979.

Presentation

As decided one year previously, a questionnaire had been sent to all Member States in order to prepare a survey of ongoing health research. Unfortunately, only nine answers had been received, thus leading to the conclusion that either the questions had not been clear enough, or Member States were not in a position to be involved in a close co-operative effort. Because of the varied answers received, it was suggested that a multiple-choice system be used, which could also cover ongoing WHO research activities. The establishment of a WHO information system could be of benefit to existing and future international and national systems.

It was suggested that contact between the group and other planning groups be strengthened, so as to achieve improved communication and cooperation. Many items considered by the Group were also of general interest to the other groups.

Finally, the terms of reference of the Planning Group should remain the same; it was not the intention to set up a comprehensive information system.

Discussion

It was generally agreed that questionnaires, if used, should be better structured. Semantics seemed to pose considerable problems. The use of phrases such as "health research" and "health services research" often led to confusion and such expressions should be defined in questionnaires.

The fact that many qualified answers were received was attributed to the procedure for selection of national contacts. It was generally felt that ministries of health often had poor contacts with research bodies in their countries; it was clear, however, that contacts with Member States should be made through those ministries, which should solve the problem of further contacts with other bodies.

It was suggested that EACMR members could perhaps assist the entire contact process at the national level, if requested. Instead of establishing national information systems on the basis of an international information system, the opposite should be the case. In Denmark, an information retrieval system on social sciences research had been implemented one year previously, and was expected to incorporate health research, including clinical research, within the next year. The system operated on the basis of direct voluntary contributions from researchers and was supposed to include 80% of all ongoing research.

A preliminary study on the establishment of a "Model Denmark" to illustrate the research structure of Denmark as a basis for further data collection through the European Region was being undertaken at the Regional Office.

There was an increasing need for the Office to have national research structures analysed. Because of the lack of information on systems which included health services research, the problem was among the most important to be taken into account.

Conclusion

It was suggested that a WHO staff member or a short-term consultant should visit all the Member States of the Region to analyse how their research organizations worked.

Other Meetings

Consultation Meeting on Hypertension Research related to Health Care

Preliminary Secretariat remarks

The preparation of this large Meeting (Copenhagen, 2-4 October 1979) in less than six months was not an easy task.

The 40 participants were rather unevenly balanced with regard to their background knowledge and terms of reference. Many stated that they

were attending in their personal capacity only and were not ready to commit their country or research body to any kind of future activity without proper advance consultation. The Meeting seemed, however, to have achieved some measure of success, the majority of the participants agreeing that WHO had a distinct role to play in coordinating research in the field of hypertension.

Presentation

Dr D. Dorossiev presented the draft summary report of the meeting, which recommended the following priority areas:

Priorities that need WHO action

- (1) An information system in the field of arterial hypertension should be set up.
- (2) Blood pressure measurement devices should be standardized in respect of precision accuracy. The presentation of data on arterial hypertension could be standardized, e.g., by using blood pressure distribution, plus systolic cross-tabulation.
- (3) Consideration of health economics problems should be built in to research projects on arterial hypertension.
- (4) The exchange of information on future research projects in arterial hypertension should be promoted.

Priorities that need WHO coordination

- (1) Sodium intake and arterial hypertension.
- (2) Epidemiology of arterial hypertension in children.
- (3) Monitoring long-term effects of treatment, particularly of drug treatment, including side effects.
- (4) The role of the general practitioner and allied personnel in the control of hypertension.
- (5) Genetic and biochemical markers of arterial hypertension.
- (6) Strategies for treatment of arterial hypertension, including preventive aspects.
- (7) Role and place of hygiene and psychosocial intervention in arterial hypertension.

All these proposals are directly, or indirectly concerned with the health services research field.

A number of participants expressed their satisfaction with the proposed priorities. However, a few others, while appreciating the preparatory work and the report itself, felt that more emphasis should have been placed on the health services research component. The discussion was summarized by the Chairman, who stated that the EACMR had before it for the first time a factual and realistic research proposal, developed along the lines and in accordance with the aims set out by members of the EACMR itself. In spite of this, some members seemed dissatisfied with the recommendations. Their views might be debated, perhaps, but clearer guidance should be laid down in the future as to the Committee's precise role. He, himself, felt that the recommendations were completely in accordance with the mandate given to the Consultation Meeting.

Commenting on this, Dr Kaprio stressed that the apparent lack of prominence of health services research among the priorities was not probably due to the fact that the Planning Group on Problems in Health Care Delivery had not yet had an opportunity to discuss the problem of hypertension. That situation would be remedied shortly. His

explanation was accepted by the EACMR, which expressed its satisfaction with the progress of research development in hypertension and endorsed the priorities outlined, with the proviso that the health services research element would be duly emphasized. It requested the Regional Director to continue with the actual implementation of the programme on hypertension research related to health care.

Liaison Coordination Meeting,
Helsinki

A liaison coordination meeting was convened in Helsinki on 6 September 1979.

Presentation

The meeting was attended by representatives of the International Council of Nurses, the International Federation of Pharmaceutical Manufacturers Associations, the International Sociological Association, the European Medical Research Councils, and the Research Committee of the Nordic Council.

The representative of the CMEA Public Health Committee was unable to attend for technical reasons. The views and future interest of the CMEA Public Health Committee had been conveyed to the Regional Office on a previous occasion.

The following recommendations were made:

- (1) Liaison coordination meetings should be held at regular intervals (1 or 2 years).
- (2) Proposals should be made for the inclusion of additional bodies in this type of liaison meeting.
- (3) Regular coordination meetings with directors of national research institutions should be convened.
- (4) Periodically, liaison coordination meetings should be devoted to one research topic only.

DATE AND PLACE OF THE NEXT
MEETING

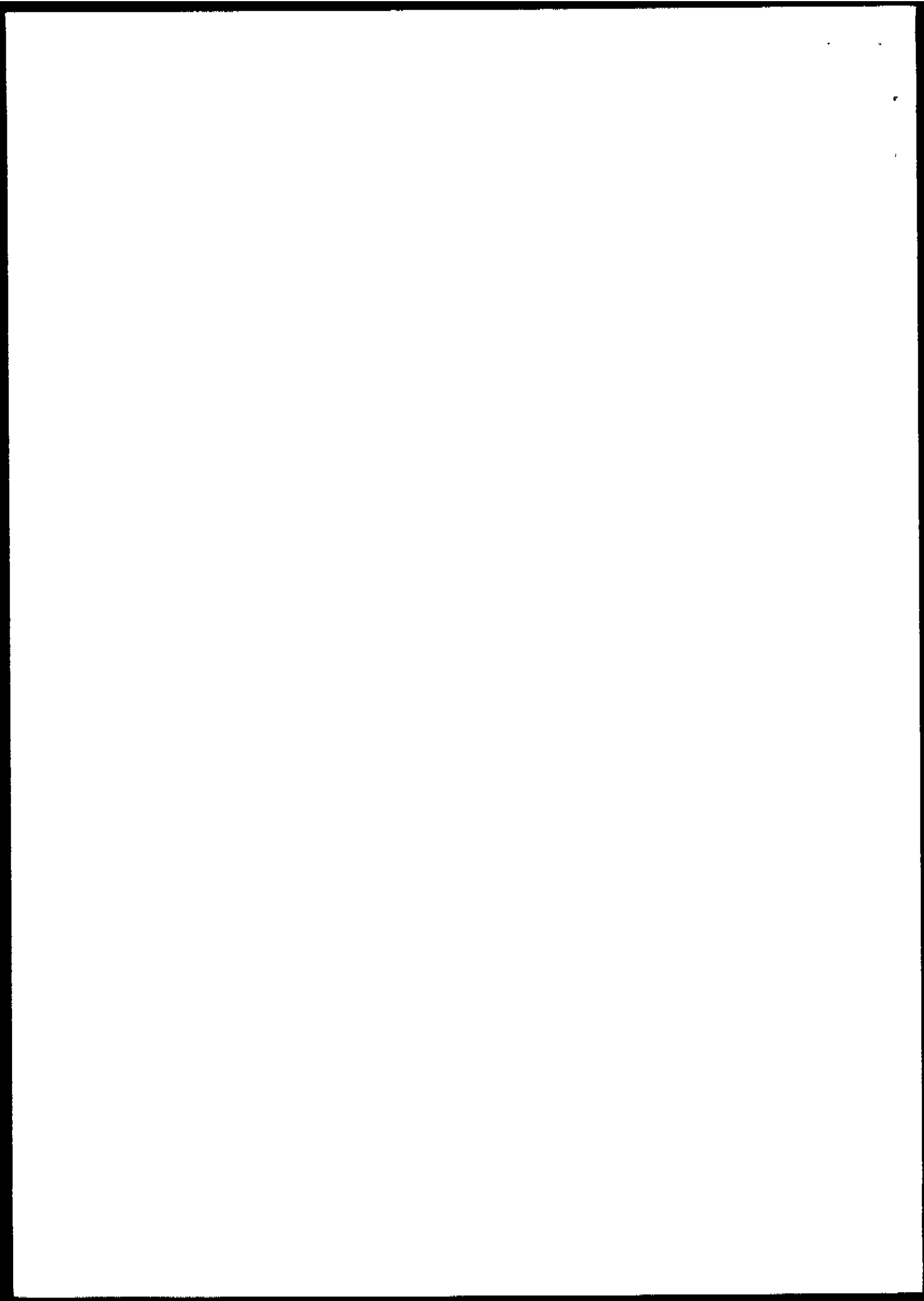
Considering the increasing input from subgroups and other research activities, it was decided that the next meeting of the EACMR should be held for three full days, from 16 to 18 September 1980, at the WHO Regional Office for Europe, Copenhagen.

PARTICIPANTS

Participants are listed in Annex 1.

DOCUMENTATION

Distributed reports and other background material are listed in Annex 2.



EUROPEAN ADVISORY COMMITTEE
FOR MEDICAL RESEARCHFIFTH MEETING
Prague, 17-18 October 1979

ICP/RPD 001(5)

(EACMR)

October 1979

LIST OF PARTICIPANTS

Name and title	Address	Country or Organization
<u>Temporary Advisers</u>		
Buller, A., Professor	Department of Health and Social Security Alexander Fleming House Elephant and Castle London SE1 6BY	United Kingdom
Burg, C., Professor, Conseiller d'Etat	27, rue Diderot 92170 Vauves	France
Černuh, A.M. Professor, Director	Institute of General Pathology and Pathological Physiology Baltijskaja ul.8 Moscow A-315	USSR
Dorossiev, D., Dr	Department of Cardiac Rehabilitation Sanatorium of Cardiovascular Diseases 1720 Bankja	Bulgaria
Kalimo, E., Dr Director	Research Institute for Social Security Social Insurance Institution of Finland Box 920 00101 Helsinki	Finland
Krassnigg, A., Dr Director-General of Public Health	Federal Ministry of Health and Environmental Protection Stubenring 1 1010 Vienna	Austria
Lafontaine, A. Professor, Director	Institute of Hygiene and Epidemiology 14, rue Juliette Wytsman 1050 Brussels	Belgium
Pauli, H.G. Professor, Director	Institute for Research in Education and Evaluation Bern University Medical School Inselspital 14c 3010 Bern	Switzerland
Prokopec, J. Professor, Minister of Health	Ministry of Health of the Czech Socialist Republic Třída Wilhelma Piecka 98 Prague 10-12037 Vinohrady	Czechoslovakia
Siderius, P., Dr Secretary-General	Ministry of Public Health and Environmental Protection Dokter Reijersstraat 12 Leidschendam	Netherlands
Violaki-Paraskeva, Meropi, Dr Hon. Director-General of Hygiene	2 P. Dimaki Street Athens	Greece

LIST OF PARTICIPANTS

Name and title	Address	Country or Organization
<u>World Health Organization</u>		
Kaprio, Leo A., Dr Regional Director	WHO/EURO	WHO/EURO
Lamm, G., Dr Regional Officer	Office of Chronic Diseases	WHO/EURO
Marchmann, A. WHO Consultant	WHO/EURO	WHO/EURO
Minners, H.A., Dr	Office of Research Promotion and Development	WHO/HQ
Nizetic, B., Dr Regional Officer	Office of Research Promotion and Development	WHO/EURO
Sokolov, D.K., Dr Director	Development of Comprehensive Health Services	WHO/EURO
Spies, K. Professor, Deputy Minister of Public Health	Ministry of Public Health Rathausstrasse 3 120 Berlin	German Democratic Republic
Stein, H., Dr	Federal Ministry for Youth, Family Affairs and Health Postfach 200 490 Bonn 2	Federal Republic of Germany

EUROPEAN ADVISORY COMMITTEE
FOR MEDICAL RESEARCHFIFTH MEETING
Prague, 17-18 October 1979

ICP/RPD 001(5)

(EACMR)

October 1979

LIST OF DISTRIBUTED REPORTS
AND OTHER BACKGROUND MATERIAL

Title	Issued by/for - date	Reference
<u>Consultation on Hypertension Research related to Health Care</u> Meeting in Copenhagen, 2-4 October 1979 Draft summary report	WHO/EURO October 1979	ICP/CVD 022
<u>Evaluation of Drugs and other Therapeutic and Diagnostic Substances</u> Meeting in Copenhagen, 13-15 March 1979 Report	WHO/EURO 16 May 1979	ICP/RPD 006(2)
<u>Health Research Coordination in WHO European Region</u> First liaison meeting, Helsinki, 6 September 1979 Recommendations	WHO/EURO October 1979	ICP/RPD 310
<u>"Health Services Research"</u> (Copies of overhead projector slides)	An audiovisual presentation given by Dr Sokolov at the ACMR meeting in Alexandria, 26-29 June 1979	
<u>How should Research in WHO be labelled?</u> Abstract from the report: A Plan for the Management of Research in WHO (page 9, point 4.5)	WHO/HQ August 1978	D60/78.2
<u>Information Systems for the Biomedical Research Promotion and Development Programme</u> Meeting in London, 19-21 September 1979 Draft report	WHO/EURO 24 September 1979	ICP/RPD 002(3)
<u>Prevention, Prophylaxis and Early Detection</u> Meeting in Brussels, 6-8 June 1979 Draft report	WHO/EURO 8 June 1979	ICP/RPD 005(2)
<u>Parameters of Research in WHO, Concepts and Definitions</u> Abstract from Progress Report by the Director-General to the Executive Board, 1978	WHO/HQ 12 October 1978	EB63/PC/w9/78.7
<u>Progress Report September 1977 - August 1978</u> by the Regional Director at the twenty-eighth session of the Regional Committee, London, 19-23 September 1978	WHO/EURO 26 June 1978	EUR/RC28/8
<u>Recommendations of the Consultation Meeting on Hypertension Research related to Health Care</u> Meeting in Copenhagen, 2-4 October 1979 Note for information	WHO/EURO October 1979	ICP/RPD 001(5) (ICP/CVD 022)
<u>Second Meeting on Economics and Health</u> London, 25-27 September 1979 (Advance report copy for use at the EACMR meeting in Prague, 17-18 October 1979)	European Medical Research Councils (EMRC) and WHO/EURO 10 September 1979	ISF/SPM 022(2)

Annex 2	Page 2
------------	-----------

ICP/RPD 001(5)

LIST OF DISTRIBUTED REPORTS
AND OTHER BACKGROUND MATERIAL

Title	Issued by/for - date	Reference
<u>Special Programme for Research and Training in Tropical Diseases</u> Second annual report Overview	WHO/HQ	TDR/MR(2)78.2
<u>Standardization of Methods, Measurements and Terminology in Biomedical and Health Services Research</u> Meeting in Copenhagen, 19-21 March 1979 Report	WHO/EURO 7 September 1979	ICP/RPD 004(2)