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25-27 June Meeting of the XXXII
AIM General Assembly
in Bruges



AIM @AIM_Healthcare · 6 mai
#HealthyAging Second International Conference: building up a policy
on Frailty. Read AIM article: tinyurl.com/mfm5g5d @EU_Health



AIM @AIM_Healthcare · 9 mai
Proposing a model of mutual #health insurance within the NHS.
Respublica Think Tank launches report. @benendenhealth bit.ly/1j99q1R



AIM @AIM_Healthcare · 14 mai
#TTIP could weaken #health, #consumer, worker, environmental
protections - Letter to Froman and De Gucht urlz.fr/nGj

➤ *Council of Ministers and European Council*

Council of the European Union: New Rules for EU Solidarity Fund Adopted

6 May - *The Council approved a draft regulation which aims at making the EU solidarity fund more responsive and simpler to use.*

The EU solidarity fund was set up in 2002 with the purpose of providing financial assistance to member states or candidate countries in case of natural disasters which impact on living conditions, the natural environment or the economy. The now adopted regulation will improve procedures via three means: the mobilisation of advance payments of up to 50 million€ to meet the most urgent needs; the setting of ambitious deadlines and simplification of the procedure (the Council and the European Parliament now have six weeks to decide whether or not to grant the help and to evaluate the amount); and the simplification of the eligibility criteria for regional disasters (a damage threshold of 1.5% of gross domestic product (GDP) was set). The regulation also encourages disaster prevention and risk management by rejecting further applications or by reducing the amount of financial assistance for countries which were already helped but did not comply with the rules of disaster risk prevention and management.

For more information on the topic, please read the [Press Release](#).

Innovation Investment Package: Partnerships for Research and Innovation

6 May – *The Council adopted the legal acts for partnerships which will allow to carry out innovation projects under the umbrella of EU's research and innovation framework programme, Horizon 2020.*

In the next seven years, 22 billion€ will be invested to contribute in pooling research and innovation investments in sectors affected by major societal changes. Five public-private partnerships will be set up, amongst which “IMI 2”, a joint technology initiative conducted by the Commission and the pharma industry meant to improve citizen's health and well-being through more effective diagnosis and treatments. Four other public-public programmes will be carried out, such as the “AAL Programme” on active and assisted living, aiming at improving the elderly's quality of life and the availability of user-friendly technology products and services. A 700€ million grant will be allocated to this initiative. The package also includes the “EDCTP2 programme” on clinical trials in African countries, which engages in the fight against poverty-related diseases.

For a more detailed description of all programmes, please read the Council's [Press Release](#).

➤ *European Commission*

European Commission: First “Social Monitoring” Report

12 May – *On 17 June 2014, the European Commission is expected to publish, together with its usual macro-economic policy coordination, its assessment on five non-binding “key social indicators” (poverty, inequality, household income, employment rates and youth joblessness).*

The publication is meant to help strengthening the social dimension of the Economic and Monetary Union (EMU). However, there are doubts about the effectiveness of the measure which is said to be a communication exercise. For the Belgian Green MEP Philippe Lamberts, only a treaty change which would give more power to the EU executive on social affairs at national level is the only solution. However, others argue that combining fiscal and social indicators might actually lead to a better understanding and pave the way to a more social European Union. They plead that giving more visibility to the social criteria could offset its non-binding character.

The EU needs a rebalancing between social and economic governance. To reach this aim, a binding mechanism is needed to ensure that social imbalances are fought. The scoreboard integrated in the European Semester should ensure that macro-economic objectives do not overcome social priorities.

For more information on the topic, please read the [Article](#).

TTIP: EU publishes its negotiation position

14 May - *The European Commission published negotiating positions in five more areas of the current talks with the US on a future trade and investment deal, the Transatlantic Trade and Investment Partnership (TTIP).*

These 5 news position papers follow the publication in July 2013 of a first EU position (among them [Sanitary and Phytosanitary measures](#) and public procurement). The five new sectors are [chemicals](#), [cosmetics](#), motor vehicles, [pharmaceutical products](#) and [textiles and clothing](#). Concerning Pharmaceuticals, there is no breaking news. The negotiations include, as we already knew, Good Manufacturing Practice (GMP). In this field, the US refuse any harmonisation, both sides work on measures to strengthen mutual trust ("mutual reliance"). The harmonisation of requirements for approving 'biosimilars' (products similar to already-licensed biological medicines, such as vaccines) is required by the EU. Negotiators also try to reach an agreement to ease both systems for authorising generic drugs. Finally, pricing and reimbursement procedure seem to be discussed according to the US wish. Some Member States have already expressed their discontent on this very sensitive issue.

The 5th round of negotiation took place in Virginia from 19 to 23 May 2014. If negotiations succeed, the Treaty is meant to enter in force in 2015.

Please find more information on the [EU Position Paper](#).



European Commission: Europe celebrates Patient's Right Day

15 May – On the occasion of European Patient's Right Day, Commissioner Tonio Borg delivered a message to patients and the Commission published a list of ten benefits the EU brings to the latter.

In his speech, Commissioner Tonio Borg underlined the importance of this day as an opportunity for patients and patient organisations' voices to be heard. The Commissioner underlined the principles of high level of health protection, the right to benefit from medical treatment and universal access to healthcare regardless of financial conditions, principles to which the EU is committed. He also expressed his full support to patient empowerment. On this day, the Commission also published a list of ten benefits brought by the EU to patients. According to this list, EU citizens are entitled to receive healthcare when visiting another EU country and to be reimbursed for it. They also have the right to have access to information on safety and quality standards in the EU and to a copy of their medical records. As far as treatment is concerned, patients can expect qualified healthcare professionals and safe and effective medicines, on whose side effects they are able to report and whose prescription is recognized in all countries. Finally, common high standards of quality for blood, organs, tissues and cells is guaranteed.

For more information on the list please read the Commission's [Memo](#).

European Commission: Strengthened Efforts to improve Health in Developing Countries

20 May – Jose Manuel Barroso, European Commission President, announced a new funding of 25€ million per year in the period 2014-2020 to fund vaccines and immunization programmes worldwide.

At the "Investing together for a healthy future" event held in Brussels, the President announced the new support which will go to GAVI, a non-profit organization focused on saving children's lives and protecting people's health by increasing access to immunization in poor countries. The European Union has doubled its contributions, which will allow the GAVI Alliance to increase its impact by 2020. The funds aim at accelerating this impact and ensuring that the gains made to date are sustained, enabling a healthy future for the next generation of children in the poorest countries.

For more information, please read the [Press Release](#).



Healthy Ageing: European Commission organises Conference on Frailty

18 June – The European Commission is to hold a second international conference on "Frailty in Old Age" in Brussels.

The conference will handle the topic of prevention of weakness in old age, one of the key actions in the European Innovation Partnership on Active and Healthy Ageing. Policy makers, healthcare organisations, public health professionals, researchers and patient organisations will elaborate guidelines in order to build a European policy to help fight fragility due to ageing. The plenary sessions will be followed by workshops and will notably deal with approaches to prevent and treat physical and mental fragility. The European Commission will close the event by drawing conclusions and identifying milestones for future actions.

For more information, please visit the European Commission [Website](#).

Healthy ageing and prevention are key issues identified by AIM members which participate in projects and provide innovative services to their members. (See AIM [Projects](#)).

➤ **European Parliament**



European Elections: Outcomes Overview

The European Elections were celebrated on 25 May with a stable voter turnout at around 43% and an increase in participation in the UK, Germany and France. This election shows a clear political divergence throughout Europe. Interestingly, countries which swayed to the right Eurosceptic side were not the most affected by the crisis but the best off economically, like France, UK, Denmark or Austria.

The European People's Party (EPP) got 212 seats, followed by the Socialists and Democrats (S&D), with 186 seats. The centrist liberal groups could get 70 seats, Green parties 55 and the right-wing Conservatives and Reformist group, 44. The far-left obtained 43 seats, while the far-right Europe of Freedom and Democracy group got 36. 38 Non-affiliated MEPs and the 67 "other" MEPs do not yet belong to any political grouping. Most of those belong to populist and extremist parties hostile to European integration. Even if they will probably be able to form a Eurosceptic group (minimum 25 MEPs from 7 countries), they are however not likely to enjoy great power: taken together there is still a $\frac{3}{4}$ pro-EU majority within the Parliament. The centre-right and centre-left parties are on track for a grand coalition gathering different political parties to reach a wide majority. The question is now who will become President of the European Commission. Indeed, according to the Lisbon Treaty, the European Council should take into account the results of the European Parliament Elections to appoint the President of the European Commission. Five candidates were proposed: Jean-Claude Juncker (EPP – Luxembourg), Ska Keller (EGP-Germany) Guy Verhofstadt (ALDE – Belgium), Alexis Tsipras (European Left - Greece), and Martin Schulz (PES – Germany). However, EU leaders may now appoint an outsider because of the weak majority which does not really legitimate any of the proposed candidates. Christine Lagarde's name (Managing Director of the International Monetary Fund) was mentioned.

EU leaders will hold a Summit on 27 May in Brussels to discuss the results of the European elections. The new elected MEPs will gather in political groups in the next few weeks. In July, they will join Committees.

Results are available on AIM's [Website](#).

➤ **Pharmaceuticals and Medical Devices**

Pharmacovigilance: EMA presents first Report on Legislation Implementation

2 May – The European Medicines Agency presented its first report on the implementation of pharmacovigilance legislation to the European Commission.



The EMA has collaborated together with the national competent authorities in the Member States and the European Commission in the implementation of the new legislation. The presented report covers the period 2 July to 1 July 2013 and brings out the improvements reached in the collection of important information on medicine, in its analysis and understanding, in the timeliness of procedures and in transparency. Among the achievements, EMA identified an increase in reports of suspected adverse drugs reactions, a step forwards towards a better identification of medicine side effects.

For more detailed information on the topic, read EMA's [Article](#).

Council of the European Union: Ensuring the Funding of Strengthened Monitoring of Medicines

8 May- The Council approved a draft regulation aimed at ensuring the funding of pharmacovigilance conducted at EU level.

The adopted regulation is meant to help ensure safety and maintain high standards of quality, safety and efficacy of medicinal products. The European Medicines Agency (EMA) will charge the fees introduced by the regulation, which will enable them to remunerate national competent authorities for their work in pharmacovigilance assessment procedures. EMA has not only acquired new competences for nationally authorized medicines, but its competences for centrally authorized medicines have also been strengthened.

The regulation provides for two types of fees which will be charged to marketing authorisation holders: one fee designed to cover the cost of three pharmacovigilance procedures performed at EU level (the assessment of periodic safety update reports; the assessment of post-authorisation safety studies; and assessments in the context of referrals initiated as a result of pharmacovigilance data) and an annual flat-rate fee of 67€ per pharmaceutical form of medicinal products authorized at national level.

For more information on the topic, please read the [Press Release](#).

Clinical Trials: Backpedalling on EMA's "proactive publication of clinical-data" draft policy: Was it all just a window-dressing exercise? Who or what is the EMA afraid of?

20 May - According to recent information, the EMA's proactive publication of clinical-data policy –to be adopted in June 2014– could undermine EU citizens' fundamental right of public access to documents.

Some concerns are raised in the "terms of use" document recently drafted by the EMA legal services and presented mid-May to a stakeholder meeting in Brussels, among them, the obligation of registration and signature of conditions on the use of the clinical trial data when consulting Clinical Report Studies (CSR). This measure is not foreseen in the previous Regulation (EC) N°_1049/2001. The EMA also proposes to publish online a version of the CSR that might have been "redacted" by the pharmaceutical company to hide so-called "commercially confidential information". The EMA intends to ask requesters to sign a contract in which they recognize that the data they will access is "protected by proprietary and copyrights and can constitute commercial confidential information".

In addition, the EMA proposes that CSRs are only to be made available in a view-on-screen format, and any downloads or screen shots will be prohibited. This format makes checking of the data and results, as well as independent research, virtually impossible. If these provisions were to be adopted and applied, EMA's policy would provide a level of transparency inferior to what is currently guaranteed by Regulation (EC) N°1049/2001. This backwards step occurs in a context of negotiations of the TTIP and the Trade Secret Directive which could classify *Clinical Study Reports (CSR)* as trade secret.

Find more information on the AIM's [Press Release](#).

➤ **European Affairs**

Gr2014eu: Informal Meeting of EU Health Ministers

29 April - Economic Crisis, Migration and eHealth were the main topics covered at the Informal Meeting of EU Health Ministers held in Athens.

During the meeting, the necessity of ensuring access to healthcare for all and to adapt the health system to the new economic reality were highlighted as prerogatives. In order to guarantee European systems' resilience, cooperation and exchange of best practices between Member States must remain a priority. On the topic of "Migration and Health", the Ministers agreed on the promoting access to healthcare for all migrants and developing guidelines and methodology for the control of communicative diseases. Ministers also highlighted the necessity to create special health services for particularly vulnerable migrant groups, such as pregnant women and small children. A Special Working Group and the new Fund for Asylum, Migration and Integration were presented as additional tools to reach success. The meeting also discussed the savings and better healthcare provision which can be achieved thanks to eHealth. According to its principles, AIM supports the will of the Council to provide access to healthcare to all.

For more information on this topic, please read the [Article](#).

➤ **E-health**

Project Momentum: 18 Factors Critical to the Deployment of Telemedicine



Momentum is a project which involves 21 organisations from 14 different European countries, among them AIM, in the field of e-health. Momentum is about creating a platform across which key players can share their knowledge and experience in deploying telemedicine services into routine care.

Momentum published a list of eighteen critical factors to successfully deploy telemedicine into routine care; for example: involving health care professionals and decision-makers or

ensuring that technology is user-friendly.

The list was drawn after an analysis of telemedicine practices across Europe and covers the overall context, management aspects, legal and security issues and technology considerations. It is meant to help those engaged in doing telemedicine to build implementations from the bottom up and to apply experimental pilots to routine care. The project has launched a public consultation on the topic. Momentum aims at publishing a blueprint for telemedicine deployment in December 2014.

For more information on the factors, consult the [List](#). If you wish to know more about the momentum project, please visit their [Website](#).

➤ **Mutuals**

Mutuals: ISSA recognises the Role of Mutuals in its Report

11 November 2013 – The International Social Security Association (ISSA) published a report entitled “Mutual Benefit Societies: A Tool for Developing Social Protection Worldwide, Particularly in the Health Sector”, which recognises the importance of mutuals in developing social protection.

In times when social protection is endangered by the crisis and when 71% of the world’s population benefits from no system of social protection at all, its necessary expansion becomes an evidence, as it could contribute to economic and social development and serve as a shock absorber. ISSA report insists on the role of states in guaranteeing social security. To do so, they can rely on mutualistic movements which already provide health and social services to nearly one in every two Europeans. “The values of universality and solidarity for access to healthcare, defended by mutuals, are akin to the founding principles of public health security systems”, which makes them a good starting point for social protection in countries where public social security is inexistent on the one hand and a significant help to enhance its levels where it exists. The report also stresses the necessary partnership between states, organisations, healthcare providers, etc. in order to overcome this scourge on humanity. AIM and some of its members drafted this report (Mutualité Française, MSA, Solidaris, Benenden and MGEN) within the ISSA Commission on Mutual Benefit Societies.

For more information please read the [Report](#).

ICMIF: Condemning Insufficient Mutual Insurance Law

7 May – The International Cooperative and Mutual Insurance Federation (ICMIF) condemns the barriers revealed by the OECD Service Trade Restrictiveness Index which affect the creation of mutual insurance around the world.

The ICMIF calls for a law which would benefit member-owned insurance organisations. Indeed, the setting up of mutual insurance is impossible in six countries (Brazil, China, Czech Republic, Estonia, Israel and Slovak Republic) and restricted in three (only non-life in Greece, only life in Ireland, requirement for a special Act of Parliament in South Africa). ICMIF denounces the legal and regulatory obstacles faced in those states and warns that the lack of legal framework results in monopolization of many nation’s insurance industries by multinationals and in less diversity for consumers. According to Shaun Tarbuck, Chief Executive at ICMIF : “This is an issue that we can’t afford to ignore. With a premium income of USD 1,220 billion, mutual insurers currently represent 26.7% of the world’s insurance market.”

For more information on the subject please read the [Media Release](#).

➤ **National Health Policies**

Uruguay: Celebration of the Social Security Week

23 to 30 April – The activities carried out during the Social Security Week focused on several key factors for the sector, and particularly on the raising of awareness around the condition of the elderly in the country.

During the week, the campaign “Call us as you want, but call us”, originally an idea from the National Administration of Social Security of Argentina, has been launched. The aim of this campaign is to fight against the isolation of the elderly and promote communication between generations. The Social Security Week is celebrated as a tribute to the entry into force of the International Work Agreement of the 29 April 1955 which was ratified by Uruguay in 2009 and which invites countries around the world to guarantee adequate social benefits and services for all. Some of the most

important points covered during the celebration were the promotion of the good treatment and respect of the elderly and the support of the development of intergenerational activities.

For more information on this event, please read ISSA's [Article](#).

Ireland: Regular Physical Activity to fight against Depression in Older People

6 May – The Royal College of Surgeons in Ireland (RCSI) has led a study to examine the links between physical activity, pain and depressive symptoms.

The research, funded by the Centre for Ageing Research and Development in Ireland (CARDI) and carried out by a research team led by Dr Frank Doyle from RCSI's Department of Psychology, has found that pain is associated with strong depression whereas physical activity is linked to lower depression levels. The findings thus suggest that health professionals should encourage physical activity for the treatment of depressive symptoms and mental well-being, irrespective of pain levels.

For more information, read the [Full Report](#) and [Research Brief](#).

UK: Recognising the Role of Mutualism in Modernising the NHS.

8 May - The launched report "Power to the People: the Mutual Future of our National Health Service" calls for a reform of the NHS with a strong implication of health mutuals that could save up to £4.5bn for the UK health system.

According to Think Tank Respublica's Report, published on 8th of May, the NHS needs remodeling in order to avoid tremendous funding gaps in the future to meet the challenges of healthcare in times of crisis and lifestyle diseases. The NHS faces a potential funding gap of £19bn per annum within ten years.

A potential solution to this urgent problem would be the move towards an integrated system coordinated by health mutuals, such as Benenden Health, member of AIM, which would help deliver the "whole-person care" which patients seek. The suggested estimated savings of £4.5bn would come from more care taking place in the community, at home and in more specialist settings.

The right to a free national health service could be guaranteed thanks to mutual healthcare providers which offer an ideal complementary provision. This solution would thus not result in additional expenditure for the Government, nor would it involve further taxation.

Today, 25 per cent of all patients in England have a long-term condition, accounting for 70 per cent of total NHS spend, 50 per cent of all GP appointments and 64 per cent of all hospital outpatient appointments. To tackle these forthcoming issues, and avoid the bureaucracy of state provision and profit seeking of the private sector, the report invites the UK Government to recognise the decisive role that mutualism can play in modernising the NHS."

For more information on the topic please read Benenden Health's [Article](#).

China: Alarming Success of "Baby Dumps"

24 May – "Baby boxes", which recently appeared in China to welcome abandoned children are unfortunately very successful. They speak for the brutality of family policy and the shortcomings of social security in the country.

Since 2011, China's "baby dumps" have been welcoming children, who are abandoned anonymously and then entrusted to an orphanage. In the "box", an incubator, a small bed, a blanket and an alarm which rings ten minutes after the baby has been left in order to warn the medical staff which will take care of the child. The children left behind have a physical or mental handicap or suffer from severe illnesses. In other cases, they were born from single mothers who must pay heavy fines and meet various administrative obstacles. Public opinion is alarmed as these "baby boxes" might actually encourage parents to get rid of their children too easily.

Health and Long-term care

➤ Trends in health system

Chronic Disease: Inactivity linked to Chronic Disease in Adults with Disabilities

7 May – The Centers for Disease Control and Prevention (CDC) released a report on the relation between chronic disease and physical activity. Results show that working age adults with disabilities who do not exercise are more likely to have chronic diseases such as cancer, diabetes, strokes and heart diseases.

Yet, most of these adults are able to participate in some physical activity. By doing so, the benefits they would get from it include “increase heart and lung function, better performance in daily living activities, greater independence, decreased chances of developing chronic diseases, and improved mental health.” The CDC report based on data from the 2009-2012 National Health Survey reached the conclusions that: working age adults with disabilities are three times more likely to suffer from the already mentioned chronic diseases; nearly 50% of these adults do not exercise; inactive adults are 50% more likely to develop a chronic disease than their active peers; adults with disabilities are 82% more likely to engage into a physical activity when recommended by their doctor. The report rings a bell about the necessary collaboration between adults concerned, health professionals and community leaders to overcome barriers to physical activities.

For more information on the report, please read the [Article](#).

Chronic Disease: Fighting Patients' Non-Compliance

16 May – A European multidisciplinary team, which included doctors, nurses, pharmacologists, sociologists, anthropologists, staticians and medication management specialists, has completed the first systematic assessment of the problems of posology.

As the World Health Organisation (WHO) identified, partial or total non-compliance with the dosage prescribed on the bottle is a characteristic of nearly half of the world's population. The problem is mainly due to human inertia and mistrust of pharmaceuticals, especially the ones used in case of chronic disease, as their effect is only noticeable on the long term. To tackle this issue, the ABC project team (Ascertaining Barriers for Compliance: policies for safe, effective and cost-effective use of medicines in Europe) studied patient behavior, legislative environments and current healthcare practices across the European Union, which enabled expert-approved standard definitions. They then carried out international surveys on patient attitudes and behavior, multi-country studies of compliance management and an analysis of the effectiveness and costs of compliance-enhancing procedures. Findings suggest that the solution lies mainly in the development of customized IT software and feedback to patients.

To learn more on the topic, please read the European Commission's [Article](#).

➤ **Call for proposals, Consultations**

Public consultation on the Europe 2020 strategy

05.05.2014 – 31.08.2014

http://ec.europa.eu/europe2020/public-consultation/index_en.htm

Public Consultation on the Green Paper on Mobile Health

10.04.2014 – 03.07.2014

<http://ec.europa.eu/digital-agenda/en/public-consultation-green-paper-mobile-health>

Online public consultation on investment protection and investor-to-state dispute settlement (ISDS) in the Transatlantic Trade and Investment Partnership Agreement (TTIP)

06/07/2014

http://trade.ec.europa.eu/consultations/index.cfm?consul_id=179

➤ **Studies, Videos, Positions**

European Association for Palliative Care: Prevalence and characteristics of patients with advanced chronic conditions in need of palliative care in the general population - A cross-sectional study

06.05.2014

http://www.eapcnet.eu/Portals/0/Clinical/Publications/PM201428%284%29_G%F3mez-Batiste.pdf

Social Economy

EU Commission: Single Market News with an interview of Michel Barnier

http://ec.europa.eu/internal_market/smn/index_en.htm

Social Economy Europe: Memorandum for the European elections 2014

<http://www.socialeconomy.eu.org/spip.php?article1930>

(FR) Cahiers de l'observatoire : L'économie sociale face à la régionalisation des aides à l'emploi

http://www.observatoire-es.be/wp-content/uploads/2014/03/cahier10_WEB.pdf

Health Systems

EU Commission: Communication on effective, accessible and resilient health systems

http://ec.europa.eu/health/healthcare/docs/com2014_215_final_en.pdf

Healthy ageing

Elderly care: always aware

http://ec.europa.eu/research/infocentre/article_en.cfm?id=research/star/index_en.cfm?p=332&calledby=infocentre&item=Infocentre&artid=31518

Innovation

RegioStars Awards 2014

<http://urlz.fr/ISa>

Working with young people

<http://urlz.fr/ISc>

Health events in Europe

10-11 June	5th Meeting of the Commission's task force on Social Entrepreneurship Heraklion (Crete)
12 June	6th International Conference – Challenges in a changing world: World Insurance Trends Malta
20 June	Employment, Social Policy, Health and Consumer Affairs Council Meeting (EPSCO) Luxembourg
26-27 June	European Council Brussels
3-4 July	IPSE- Fourth Meeting – renewing Solidarity between Generations for Social Protection Bologna

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For more information on one of the topics mentioned above, please contact the AIM Secretariat.

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