



30.11.2024

NOTICE TO MEMBERS

Subject: Petition No 0702/2024 by Esperanza Alvarado Boto (Spanish), on behalf of Plataforma para la creacion de la especialidad multidisciplinar de genetica clinica, signed by 9 other persons, on recognising clinical genetics as a medical specialty in Spain

1. Summary of petition

The petitioners call on the European Commission to support the recognition and official regulation of the clinical genetic multidisciplinary specialty in Spain. They point out that Spain is the only country in the EU lacking this specialty. They emphasise that clinical genetics is crucial for the prevention, diagnosis, and treatment of genetic and hereditary diseases. However, without official recognition, genetic professionals face limited opportunities, and patients experience reduced quality and accessibility of healthcare. The petitioners argue that other EU countries have established clear regulatory frameworks for clinical genetics, creating a regulatory discrepancy that disadvantages Spanish health professionals, harms patients needing quality genetic services, and undermines consistency and excellence in medical practice across the EU. Currently, Spain does not recognise professionals trained in genetics from other European countries, hindering the free movement of these professionals.

2. Admissibility

Declared admissible on 16 October 2024. Information requested from Commission under Rule 233(5).

3. Commission reply, received on 30 November 2024

The decision to regulate or not a profession, including a medical specialty, lies with Member States. The Commission cannot oblige a Member State to regulate a profession. The absence of regulation of a profession does however not prevent a professional coming from a Member

State that regulates the profession to move to a Member State that does not regulate the profession. It is up to the Member State to assess the specific situation of the professional and to decide if their professional qualifications can be recognised in that Member State for access to specific activities.

Once a medical specialty is regulated by Member States, the Commission can add this new medical specialty to Annex V point 5.1.3 to Directive 2005/36/EC via a delegated act if it is common to at least two-fifths of the Member States i.e. 11 Member States (Article 26 of [Directive 2005/36/EC](#)). However, it is important to note that it is up to the Member States to notify a medical specialty to the Commission via the Internal Market Information System (IMI). Member States have the possibility to notify a medical specialty and thus make it benefit from automatic recognition when professionals move within the European Union, but it is not an obligation.

In the case of medical genetics, it had developed in 2011 into a separate and distinct specialist medical training in a wide range of Member States, and more than two-fifths of the Member States notified this specialist medical training to the Commission. This is why the Commission took the decision in 2011 to include medical genetics in Annex V point 5.1.3 to Directive 2005/36/EC.¹ The Commission recognised in 2011 that ‘medical genetics is a specialty that responds to the rapid development of knowledge in the field of genetics and its implication in numerous specialised fields, such as oncology, foetal medicine, paediatrics, chronic diseases. Medical genetics plays a growing role in screening and in the prevention of numerous pathologies.’² Currently, 25 out of 27 Member States have notified medical genetics as medical specialty to the Commission i.e. specialist doctors in medical genetics benefit from automatic recognition procedure when they move within these 25 Member States.

Conclusion

It is up to the Member State to decide on whether to regulate a medical specialty or not. It is up to the Member State to assess the specific situation of a professional and decide if their professional qualifications can be recognised in that Member State for access to specific activities even though the Member State does not regulate the profession.

If the Member State regulates the medical specialty and its training is listed in Annex V point 5.1.3 to Directive 2005/36/EC, it is again up to the Member State to decide on whether to notify the specialist medical training to the Commission for its inclusion in Annex V point 5.1.3 to Directive 2005/36/EC.

In case the petitioner considers that a Member State does not apply the rules laid down in Directive 2005/36/EC correctly, he/she may want to contact the [assistance centre for Directive 2005/36/EC](#), [SOLVIT](#) or file a formal complaint with the Commission through the online [complaint form](#). Any Commission action has the goal of ensuring compliance with EU law in general and may not solve individual cases. There is a need to use the means of redress available at the national level (administrative or judicial) to challenge decisions taken by national authorities or to obtain any compensation.

¹ [Regulation - 213/2011 - EN - EUR-Lex](#)

² [Regulation - 213/2011 - EN - EUR-Lex](#)