



MINUTES	Date: 13 March 2026	
CED Board Meeting	CED Brussels Office, Avenue de Cortenbergh 89, 1000 Brussels	
	Time Start: 09:00	Time end: 16:00
Chair	Dr Freddie Sloth-Lisbjerg, CED President	
Participants	See list attached	
Representatives of the Brussels Office	Clara Luciani, Elif Dincher, Ainhoa Zamacona	

1. Welcome, quorum, and apologies		Rapporteur: Freddie Sloth-Lisbjerg
Working document	<ul style="list-style-type: none"> List of participants 	
All participants were present. Katalin Nagy and Romy Ermler joined online.		

2. Approval of the agenda		Rapporteur: Freddie Sloth-Lisbjerg
Working document	<ul style="list-style-type: none"> CED-B-A-2026-01-E/D/F 	
The agenda was approved.		

3. Notification of the Minutes of the Board meeting in November		Rapporteur: Freddie Sloth-Lisbjerg
Working document	<ul style="list-style-type: none"> CED-B-M-2025-04-E/D/F 	
The minutes of the last Board meeting were adopted by email.		

4. Declaration of conflict of interest		Rapporteur: Freddie Sloth-Lisbjerg
Working document	<ul style="list-style-type: none"> Policy on conflict of interest (CED-DOC-2019-001-E-FIN) 	
None of the participants declared any conflict of interest.		

5. Report from the President

Rapporteur: Freddie Sloth-Lisbjerg

The President updated the Board members on the attended meetings:

- **Collaboration with the European Federation of Periodontology (EFP):** The President informed the Board members about an online meeting held on 30 December 2025 between the CED (represented by Katalin Nagy, Alfred Buttner, and Clara Luciani) and the EFP. The primary objective of the discussion was to outline the necessary steps toward the formal recognition of periodontology under the Professional Qualifications Directive (PQD). To strengthen this collaboration and support advocacy efforts at the national level, both parties agreed to an exchange of letters. The President noted that further details on this topic would be provided later in the agenda.
- **Impact Assessment on Respirable Crystalline Silica (RCS):** The President reported on a meeting held on 7 January 2026 with a European Commission consultancy (Risk and Policy Analysis). The meeting, attended by Ioannis Tzoutzas, Elif Dincher, and the President, focused on an impact assessment regarding the potential revision of the EU Occupational Exposure Limit for respirable crystalline silica. During the consultations, it was clarified that the dental profession does not share the same risk profile as industrial manufacturing, thanks to the effective use of high-vacuum aspiration systems and rubber dams, which limit environmental release. Consequently, the consultancy concluded that dentistry falls outside the scope of the project, as current exposure levels are sufficiently low and do not necessitate the foreseen legislative measures.
- **Preparatory Meeting with the Danish Patient Safety Authority:** The President informed the Board of a preparatory meeting held on 4 February 2026 with two representatives from the Danish Patient Safety Authority (Danish dental regulators). The meeting, organized in advance of the ADEE workshop in Copenhagen, aimed to discuss the regulatory landscape in Denmark, specifically the distinction between national requirements for recognizing EU dental diplomas versus those for non-EU and foreign qualifications. The President noted that the discussions were highly constructive, providing an opportunity to clarify feasible advocacy requests in the field of education. Key topics included mandatory supervised clinical years and support programs for incoming dentists. The Authority's Chief Dental Officer also participated in the initial segment of the subsequent ADEE workshop.
- **ADEE Workshop and GED Stakeholders Meeting:** Following the preparatory session, the President participated in the 2nd edition of the ADEE workshop and the Graduating European Dentists (GED) Stakeholders meeting on 26 February in Copenhagen. This year's event was co-organized by the CED and hosted by the Danish Dental Association. The workshop brought together a coalition of representatives from across the dental community to discuss undergraduate training requirements and work toward a consensus on key policy asks for improving dental education. The President highlighted that a brief interview regarding the event's outcomes is available on the ADEE website. The Chair of the Working Group on Education and Professional Qualifications (WG EPQ) will provide a more detailed report on the specific discussions and outcomes later in today's meeting.
- **Contribution to iSanidadental Yearbook 2025:** The President informed the Board of a recently published article in the iSanidadental online journal's 2025 Yearbook. Titled "*Towards a European and unified body of dentists: harmonizing dental specialties for better oral health,*" the article was published last February under the President's name. It focuses on the importance of harmonizing dental specialties across Europe and is currently available for online consultation.
- **Irish Council Presidency Priorities:** The President reported that, at the invitation of the Irish Dental Association, the CED contributed suggestions for key priorities for the upcoming Irish Council Presidency (scheduled for July-December 2026). These recommendations were submitted last December to ensure oral health is reflected in the upcoming Presidency's agenda.
- **Upcoming CED Event (25 March):** Looking ahead, the President noted his participation in the upcoming CED event on Wednesday, 25 March, where he will deliver the opening remarks and assist in coordinating the proceedings. A more in-depth discussion regarding the logistical details and agenda of this event will take place under Agenda Item 9.

Board	<ul style="list-style-type: none">• The Board discussed the recognition of additional dental specialties under the PQD, emphasizing that while EU-level recognition facilitates the free movement of professionals and "skills portability," the introduction of specialties remains a national prerogative and is not mandatory for Member States. It was clarified that specialty recognition is not intended to reduce the scope of general dentistry but to respond to the increasing complexity of the profession and ensure patient access to specialized care when necessary.• The Board also addressed the regulatory and educational challenges, stressing that CED policy must protect the right of dentists to perform any procedure they are competent to do, regardless of specialization, to avoid restrictive systems. Furthermore, the discussion highlighted the need for clear communication to distinguish between academic master's programs and regulated three-year EU specialty training, ensuring that educational standards evolve to meet professional recognition requirements without marginalizing the fundamental role of general practitioners.
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CED INTERNAL AFFAIRS	
6. CED Board Agreements	Rapporteur : Freddie Sloth-Lisbjerg
Working Document	Letter by the Bulgarian Dental Association regarding membership (CED-DOC-2026-001-E)
<p>The Board discussed the following points:</p> <ul style="list-style-type: none"> • Concerns and queries from CED members for maintaining the in-person General Meeting in May in Cyprus. This was discussed in the context of the ongoing conflict in Iran and the Gulf Region, and the recent drone attack in Cyprus. The financial implications of transferring the GM online, as well as the possibility of a hybrid meeting was discussed. • Considerations regarding the request to defer the payment of membership fees for the Bulgarian Dental Association. The second letter from the BgDA was discussed including their decision to remain on the CED and the request to defer the payment of their membership fees. • Decision to carry-out a brief presentation of the new edition of the Manual of Dental Practice to ERO. Different possibilities for presenting the European Manual at the CED, but also to ERO were discussed here, including an in-person or online presentation. The Board was consulted on the decision to take. • The nomination of a new Board Liaison for WG Patient Safety, Infection Control and Sustainability (PSICS, former PSICWM) was discussed. The President invited Board Director Romy Ermler to be Board Liaison for this WG, to ensure equal distribution of Board Directors across WGs. 	
Board	<ul style="list-style-type: none"> • Board members discussed the practical arrangements for transitioning the CED May General Meeting to an online format in the event that travel to Cyprus is not possible. • Ainhoa Zamacona informed members of the cost of moving the meeting to a fully remote format and is waiting for a quote for a hybrid format. In the case a hybrid meeting is necessary a simple way for public voting will be proposed.
Decisions	<ul style="list-style-type: none"> • CED Members will be informed that the in-person GM in Cyprus will be maintained for the time being. The CED will keep closely monitoring the development of the situation, with options for an alternative solution, such as a hybrid or online meeting if travelling to Cyprus is discouraged by official authorities. • Regarding the decision to defer payment of fees for the Bulgarian Dental Association, the possibility will be offered to them to pay the first instalment by the 1 August, and the second one later in the year, by 1 December. • A letter of response will be sent to the Bulgarian Dental Association informing them of the decision. • The Board agreed to enquire into the possibility of carrying out a brief presentation of the European Manual of Dental Practice at the ERO meeting in Sofia in April. The final decision will be taken by ERO. • Board Director Romy Ermler accepted the position as Board Liaison Officer for the CED WG Patient Safety, Infection Control and Sustainability (PSICS), in replacement of former Board

	Liaison Ioannis Tzoutzas.
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7. Finances	Rapporteur: Freddie Sloth-Lisbjerg, Christof Ruda, Ainhoa Zamacona
Working Documents	<ul style="list-style-type: none"> • Draft CED Final Accounts 2025 (CED-ACCOUNTS-2025) • Draft Management letter of the auditors: Final Accounts 2025 (CED-DOC-2026-002- E) • Draft CED Budget 2027 – (CED-BUDGET-2027) • Guideline for sponsorship of CED shared by BZAEK (CED-DOC-2026-003)
<p>The new Treasurer, Christof Ruda, expressed his gratitude to be presenting the CED finances for the first time in front of the Board.</p> <p>He informed that he came to Brussels on February 20th to visit the banks to be mandated as the new CED Treasurer and he had a discussion with the CED accountant in the afternoon. Yesterday he reviewed the CED invoices and bank statements from November 2025 until now, and he found no irregularities. All the accounts are very clear and very little clarification was needed.</p> <p>He went on to inform about the 2025 accounts. The result is a surplus of almost 127.000 €, much higher than the budgeted amount. He congratulated the previous Treasurer, John Tzoutzas, for the excellent results. He gave some explanations regarding the different accounts and opened the floor for questions. He informed that the unpaid 2024 invoice from Albania has been cancelled, but there was an extra payment by ERO, that had not been budgeted, giving as result a total income slightly higher than predicted.</p> <p>The Treasurer opened a discussion regarding the change of auditors for the 2026 audit as suggested by the British Dental Association.</p> <p>Christof Ruda presented the 2027 CED Budget (with 2% raise of the fees, which is less than the inflation rate in Belgium). He pointed out that the overall number of dentists has grown, however there are still some countries that have not provided the numbers and we had to use the numbers from previous years. The 2027 budget will end up with a little surplus. It will be presented during the General Meeting in May</p> <p>The Treasurer informed that the CED soon needs to take a decision on whether we want to change offices as the current contract will come to an end in 2027. Several options are possible. The first option would be to try to negotiate a better contract with the landlord. Moving to another office would be the second option, but we need to take into account the cost of the move. Finally we can try to reduce the costs by renting the meeting room or the spare office.</p> <p>Christof Ruda mentioned that the cost of the translations is currently quite high and we should look into ways of reducing it (for example reducing the number of documents that we translate or using AI for some of the translations).</p> <p>Ainhoa Zamacona presented the different options for the Limassol GM in case it is not possible to have an in-person meeting.</p> <p>The Treasurer pointed out that some modifications to the Board Guidance on CED Financial Management could be made in the future to better match the financial procedures followed in the Brussels Office.</p> <p>The Board was informed about the reconduction of the contract with Downtown for 2026 and 2027.</p> <p>The President presented the BTF Sponsorship group that will be composed by lawyers Alfred, Marek and Kristine and Board Members Miguel, Charlotte, Robin and Ainhoa as Brussels Office representative. He went on to discuss the different possibilities for sponsorship as well as the Sponsorship Guidance document</p>	

Board	<ul style="list-style-type: none"> • Several Board Members expressed their will to keep the current auditors for one more year to keep some continuity in the finances. The newly elected Treasurer needs more support and our current auditors know well the CED functioning and finances. However, a change of auditors will be discussed in the future. • The President commented on the excellent results of the last two years (over 100.000 € in 2024 and 2025) after a difficult restructuration in 2023 resulting in a negative result. He stressed the current good health of the CED finances and mentioned that the savings are important in case there are changes in the membership or unexpected costs. • The Board expressed their opinion regarding the use of the three official languages of the CED in documents and meetings. • The Board stressed that it is very important for the CED to keep its independence even if partnered with a sponsor. Sponsorship for specific projects should be considered.
Decisions	<ul style="list-style-type: none"> • The Board agreed that the budget with 2% increase in the fees will be put forward to be voted at the GM. • The Board agreed to sign a one-year contract with VGD auditors. The possibility to change auditors will be discussed in the future. • The Board agreed on the renewal of the contract with Downtown. • BTF Sponsorship will meet for the first time in April.

8. European Manual of Dental Practice		Rapporteurs: Freddie Sloth-Lisbjerg, Clara Luciani	
<p>Policy Officer Clara Luciani updated the Board on the advancement of the Manual and the finalization of country chapters, for all national dental associations having submitted data, and delivered feedback.</p> <p>39 countries have been updated, with currently 25 countries fully proofread and finalized, which have been uploaded onto the CED website.</p> <p>This includes 7 new finalised ERO countries, including the Kyrgyz Republic, Azerbaijan, Romania, Türkiye, Kazakhstan, Georgia and Armenia.</p> <p>The Board was informed that the main and introductory section of the Manual was currently being drafted. In preparation of the final 7th edition, the foreseen ways to publish and communicate on the Manual were raised, including communication and collaboration with ERO (see discussion above). The Board was also informed that this edition will be kept as a living document, with the possibility of regular updates upon request from member NDAs.</p> <p>Clara Luciani also informed members of the exchanges with a representative from the Stomatological Association of the Kyrgyz Republic regarding the creation of additional chapters for three new ERO countries. This included mention of Uzbekistan, Tajikistan and Turkmenistan. Closer collaboration with this representative and ERO's Integration Working Group will be necessary regarding language issues and the collection of data.</p>			
Board	<ul style="list-style-type: none"> • The Board advised to keep the old chapters on the CED website under the new chapters. • The general section of the Manual is of strong interest for non-EU ERO countries, as a valuable source of information. • The Manual chapters will continue to be uploaded on the CED website, as feedback is received and integrated. • The main section of the Manual will be drafted. 		

9. CED European Parliament Event	Rapporteur : Freddie Sloth-Lisbjerg, Elif Dincher, Clara Luciani
<p>Updates provided to the Board:</p> <p>The CED Office finalized preparations for the upcoming event at the European Parliament scheduled for 25 March 2026, confirming that the agenda and speaker lineup are now complete. The session will feature six speakers, including five representatives from National Dental Associations and one from the NGO SAFE (Safe Food Advocacy Europe), with individual interventions lasting between 10 and 13 minutes. The hosting MEP Dario Tamburrano will provide opening and closing remarks, and the President will be the moderator for the discussions. Regarding attendance, the venue can accommodate up to 40 people, with 25 participants currently registered and a total expected in-person attendance of approximately 30. Furthermore, the event will offer a hybrid format, allowing members to participate online and submit written questions during the Q&A session.</p> <p>In terms of logistics and documentation, a fact sheet is being prepared for distribution prior to the meeting, which builds upon the CED Resolution on Reducing Sugar Consumption and Preventing Oral Diseases. Following the hosting MEP’s requirements, the event will include interpretation into Italian, and speakers will have the opportunity to support their intervention with visual presentations.</p>	

10. Communications	Rapporteur : Ainhoa Zamacona, Elif Dincher, Clara Luciani
Working documents	<ul style="list-style-type: none"> • CED Annual Report 2025 cover page • Coalition for Vaccination Joint Declaration (CED-DOC-2026-004)
<p>The CED Office informed the Board that the drafting of the Annual Report has commenced, with two cover page options presented for selection. Regarding external relations, it was noted that following the CED’s co-signing of the Coalition for Vaccination Joint Declaration, a positive engagement was established with a journalist from <i>Vaccine Today</i>. This WHO-approved platform is considered a reliable channel for future professional updates. Finally, the Office announced that the Spring 2026 edition of the CED Newsletter is scheduled for publication in April, and a call for contributions will be sent to members next week to finalize the content.</p>	
Decision	<ul style="list-style-type: none"> • The Board selected the first cover page option for the Annual Report.

11. Board-only discussion	Rapporteur : Freddie Sloth-Lisbjerg
<p>The Board-only discussion took place.</p>	

12. WG Education and Professional Qualifications	Rapporteur : Katalin Nagy
Working documents	<ul style="list-style-type: none"> • CED submitted feedback to the Consultation on the Skills Portability Initiative on the recognition procedure (CED-DOC-2026-007) • CED submitted feedback to the general Call for Evidence to the Skills Portability Initiative (CED-DOC-2026-008) • Draft Joint Declaration on undergraduate training and clinical standards following the ADEE workshop (CED-DOC-2026-009)
<p>The Chair of the WG updated the Board on on-going work and recent developments relating to:</p> <p>Publication of the Implementation Report on the Professional Qualifications Directive : The long awaited PQD implementation report (for which the WG submitted a CED response in September 2024) was published on 20 February 2026. It is accompanied by an in-depth Commission Accompanying Working Document, which incorporates concerns that the CED has been highlighting for a number of years. Firstly, the report highlights that dentistry remains the 5th most mobile profession in the EU.</p>	

The report includes some of the CED's main concerns, such as concerns of possible shortening the minimum duration of studies, as well as concerns and demands on clinical training standards and clinical skills requirements, patient safety, the integration of a combination of training subjects and competences, interdisciplinary collaboration and training.

As an example, the report positively states that "*Stakeholders consistently highlight that the current provisions for clinical training in Directive 2005/36/EC are insufficiently detailed and that this could be the reason for inconsistent application across Member States.*"

The Chair noted that this was a positive development that will hopefully reflect on future EU policy making in the field of dental education. The WG will continue to carefully monitor the file.

Public Consultation & Call for Evidence on the Skills Portability Initiative

Secondly, the Chair updated the Board on the WG's work around the Skills Portability Initiative. It was announced in March 2025 under the Union of Skills, and the first public consultation came out mid-December.

It can be considered as part of the current Commission's simplification efforts of EU policies and regulation, with the goal to improve and extend the EU Single Market and the free movement of persons and professionals.

It aims to address the limited portability of qualifications and skills across the EU, by making skills more transparent and facilitating the mobility of workers across the EU.

The consultation and calls for evidence were seeking evidence to collect information on foreseeable and effective measures for improving the recognition of skills and the automatic recognition principles in place for regulated professions.

For this purpose, a public consultation as well as 3 calls for evidence were opened for 2 months to the public, with the possibility to submit input.

The WG therefore prepared three submissions:

- one for the consultation questionnaire (broad consultation on skills portability across diverse professions in the EU, not solely focusing on regulated professions),
- one general CED feedback to suggested Action 2 of the Initiative (on the recognition of regulated professions and use of digital skills);
- and one general feedback to Action 3 (on the simplification of recognition of third-country qualification).

The Chair mentioned on of the new suggested CED recommendations for the creation of a common CPD framework, which would allow automatic recognition of CPD credits across all EU countries and common framework and accreditation scheme. This was a topic of disagreement within the WG.

The Chair therefore consulted the Board on this topic specifically.

The final submission does not take such a strong approach on the request for a common CPD framework but adopts a more progressive approach: it highlights simply that efforts must be progressively taken towards a common recognition of CPD credits across Europe (whether through common frameworks or bilateral agreements).

Clinical Training Requirements & ADEE and CED Joint Workshop, Copenhagen

The Chair updated the Board on her participation in the second edition of the ADEE workshop, that initially took place last year in Dublin. The logistics of this year's edition, on 26 February, were organised by the CED, and the event was hosted in Copenhagen in the headquarters of the Danish Dental Association.

The goal of this year's edition was to continue discussions from last year for hopefully achieving a consensus by the CED on undergraduate training requirements, agreed on by all main European dental stakeholders. The group attempted to determine common advocacy requests that can be put forward on behalf of a wide range of dental organisations, when lobbying the EU institutions.

A Joint Declaration, based on points discussed during the event, is to be co-signed by all participating stakeholders and is currently being agreed on. It will be published by all organisations on their website and may be used for advocacy purposes.

This could, hopefully, be useful for the possible future revision of the PQD, to support CED's main demands.

The Board was asked whether there were any comments or opposition to endorsing this Joint Declaration.

Periodontology and specialties

The Chair mentioned the discussions having taken place at the last WG meeting around specialties, and particularly the project to recognize periodontology at EU level.

Member views however strongly diverged on this topic. This therefore still needs in-depth discussion at WG level.

The WG Chair, President, Alfred Büttner and Clara Luciani took part in a meeting with the European Federation of

<p>Periodontology on 9 January to discuss the envisioned way forward for the future recognition of Periodontology as a third European specialty.</p> <p>The CED received an official letter by the EFP enquiring on actions to be carried out by the EFP. The CED prepared and shared a response in return, with steps to take to advance the matter, in collaboration with their national associations.</p> <p>Finally, the CED also contributed to an article to the Spanish iSanidadental Journal at the end of last year: this article has now been published on their website and in their journal.</p>	
Board	<ul style="list-style-type: none"> • Marek Szewczyński informed members that they received a document the day before the BM by the Polish Ministry of Science, involved in the Group of Coordinators for the recognition of professional qualifications under the European Commission. The document lays out three broad policy options regarding the recognition of third country diplomas, to be used only for further discussions and assessment of possibilities. <ul style="list-style-type: none"> - Policy option 1 has the goal of improving transparency, sharing of information between countries on the recognition of foreign qualifications. - Option 2 considers common rules and streamlined procedures, with a shared set of procedural requirements. - Option 3 considers automatic recognition for selected professions, with the introduction of a targeted framework for sectoral professions (including dental professions). • Members discussed what future EU accreditation body could be created to deliver such tasks. • Alfred Büttner suggesting organizing another meeting with the EU Commission to discuss and provide arguments regarding such considered options.
Decisions	<ul style="list-style-type: none"> • The existing CED policy paper on the recognition of third-country diplomas will be checked, to assess whether this paper needs to be updated. The CED will then decide whether to prepare any other advocacy material or lobby-pack on the topic, to be used at a national level.

13. WG e-Health		Rapporteur : Charlotte Heuzé
Working documents	<ul style="list-style-type: none"> • Overview of Digital Omnibus on GDPR and AI Act (CED-DOC-2026-010) • Digital Omnibus CED Feedback (CED-DOC-2026-016) 	
<p>Digital Omnibus Package</p> <p>The Board was updated on the discussions regarding the European Commission’s proposed Digital Omnibus amendments to the GDPR and the AI Act. The WG members focused on the proposed changes to the definition of personal data and the potential implications for the protection of health data.</p> <p>Under the current GDPR framework, personal data is defined objectively, if any party can identify a natural person, the information remains protected. The Commission proposal introduces a more contextual, entity-specific approach, where data may no longer be considered personal data for an entity that does not have the reasonable means to identify the individual. Members expressed concern that this shift could weaken the protection of sensitive health data and create legal uncertainty, particularly in contexts such as dental imaging or AI training datasets. The Working Group also discussed the risk that such a model could facilitate “data laundering” scenarios, where companies structure their processing chains through intermediaries that claim technical inability to identify individuals, potentially placing certain datasets outside the scope of the GDPR.</p> <p>Further discussion focused on the proposed derogations for the use of special categories of data in AI development. Members raised concerns about the possibility that health data unintentionally included in training datasets could remain embedded in AI systems where deletion is considered technically disproportionate. The Group also questioned</p>		

the feasibility of restricting such data from influencing model outputs, given the complex and opaque nature of AI models.

In addition, the Working Group examined the proposed introduction of legitimate interest as a legal basis for certain AI development activities. Members noted that this could represent a structural shift away from the current consent-based approach for sensitive data and may create uncertainties regarding the protection of inferred health data generated by AI systems.

It was also stated that the Working Group emphasized the importance of maintaining a high and consistent level of protection for health data, including information inferred through AI systems. It was agreed that the CED feedback on the Digital Omnibus should highlight these concerns and underline the need to preserve strong safeguards for patient data in the context of digital innovation.

Update on the Revision of the 2018 CED Resolution on Data Sharing

The Board was informed that the Working Group also discussed the revision of the 2018 CED Resolution on Data Sharing. During the WG meeting, members noted that the original policy paper has become largely outdated in light of the rapid regulatory developments surrounding the European Health Data Space (EHDS).

The WG Chair presented a substantially redrafted version of the document, intended to align CED’s policy with the current EU regulatory framework while preserving the core principles of the dental profession. The revised draft explicitly reflects the EHDS framework and introduces an updated section on digital workflows, addressing practical implementation aspects within the dental sector.

In addition, the sections on e-prescriptions and data protection have been updated to ensure consistency with CED’s existing positions related to the EHDS. During the revision process, outdated or conflicting recommendations were removed, while key principles that remain relevant in the current regulatory context were retained.

The WG Members provided both written and oral feedback during the meeting. It was agreed that additional elements would be included in the recommendations section to better reflect the evolving regulatory environment. The updated version of the document will be circulated to the Working Group for a final review.

Board	<ul style="list-style-type: none"> The Board discussed the significant technical and ethical challenges posed by the European Commission’s "Digital Omnibus" amendments to the GDPR and the AI Act. Members expressed deep concern over the potential dilution of personal data protection within Europe, noting that new regulations might prioritize the interests of major tech corporations over individual privacy.
Decision	<ul style="list-style-type: none"> The Board approved the CED feedback on the European Commission’s Digital Omnibus proposal.

14. WG Dental Materials and Medical Devices		Rapporteur: Robin Foyle
Working documents	<ul style="list-style-type: none"> Overview of MDR Proposal (CED-DOC-2026-011) MDR Proposal CED Feedback (CED-DOC-2026-012) 	
Latest meeting: 10 February 2026 (online), next meeting TBC		
<p>Update on the ECHA Consultation on the Classification of Sodium Fluoride</p>		
<p>The Board was informed about the consultation launched by the European Chemicals Agency regarding the classification of sodium fluoride. Although the topic was initially considered within the scope of WG DMMD, it was later identified as a cross-cutting issue relevant to several CED Working Groups. Following consultations with the CED President and the Chairs of WG PSICWM and WG Oral Health, it was agreed that the response should focus primarily on prevention and the essential role of fluoride in oral healthcare. The responsibility for preparing the submission was therefore assigned to WG Oral Health, which finalized and submitted the CED response within the consultation deadline.</p>		
<p>Update on the Medical Devices Regulation (MDR) Proposal</p>		
<p>The Board was informed of the Working Group’s review regarding the published proposal to amend the Medical Devices Regulation (MDR). A key update involves the removal of fixed five-year validity periods, with certificates remaining valid indefinitely subject to "periodic reviews." The Board took note of potential implementation risks,</p>		

specifically the need for objective definitions for "periodic reviews" and "exceptional cases" to avoid inconsistent application by Notified Bodies.

The Board was briefed on proposed changes to clinical evidence requirements, which aim to introduce greater flexibility by allowing a broader range of data, including non-clinical sources. While this may reduce the burden of clinical trials, the importance of clear technical definitions like "technical equivalence" **was highlighted** to ensure consistent interpretation.

Furthermore, the Board received an update on the new horizontal definition for "Well-Established Technologies" (WET). This aims to simplify regulatory requirements for devices with long-standing safe use, such as dental fillings and sutures, by replacing specific lists in Articles 18 and 61 with this broader category. The Board noted that while this simplifies exemptions, the use of qualitative terms like "stable design" may require further clarification.

The Board was also updated on the reclassification of reusable surgical instruments as Class I and new requirements for justifying single-use designations. It was emphasized that while these changes support sustainability, clear labeling remains essential to protect dental professionals from legal liabilities.

Finally, the Board was informed that conformity assessment procedures would be streamlined for lower-risk devices. The CED draft feedback has been updated accordingly, and the Working Group will continue to monitor which dental devices may fall under the "Well-Established Technology" category.

Inquiry regarding BisGMA

The Board informed that CED received an inquiry from RPA Europe (a consultancy), who are supporting the European Commission with an impact assessment. They are looking into potential new Occupational Exposure Limits (OELs) for GMA, a component in BisGMA dental composites. Essentially, they want to know how much dentists and technicians are exposed to GMA via inhalation during a typical workday. They are asking for data on usage across the EU and specific roles at risk.

Following coordination with the President and the Chairs of WG PSICWM and WG DMMD, two primary perspectives were identified:

Experts, including Prof. Alessandro Pala and Prof Gottfried. Schmalz, emphasize that GMA undergoes a permanent chemical change during BisGMA synthesis. The resulting bonds are extremely stable, making GMA release or inhalation practically impossible under normal clinical conditions.

While acknowledging the technical facts, the WG PSICWM Chair advises caution. Drawing a parallel to the mercury and amalgam debates, he warns that public and regulatory perception often overlooks chemical stability, and that industrial or lab-scale exposure profiles may differ from clinical reality.

<p>Board</p>	<ul style="list-style-type: none"> • The Board discussed the need to engage with the consultancy conducting the BisGMA examination, following the successful approach used for respirable crystalline silica (RCS). Members emphasized the necessity of informing consultants about the specific, safe use of dental materials in clinical practice compared to industrial-level concerns. • The potential CMR classification of sodium fluoride and its implications for public health was discussed. Members expressed concern that while industrial-level exposure may justify such classifications, applying these labels to dental products like toothpaste and varnish could lead to significant professional and public misunderstanding. It was noted that even some dental professionals have shown anxiety regarding the safety of fluoride applications, despite evidence-based medicine confirming their safety in clinical use. The Board emphasized that misleading information could cause a decline in essential preventive treatments. Consequently, it was concluded that the CED must prioritize clear, evidence-based communication to distinguish between industrial hazards and the safety of fluoride in dental practice to protect public health. The Board discussed the strategic importance of developing a comprehensive position paper on prevention, specifically emphasizing the role of fluoride (sodium fluoride). It was highlighted that such a document would be valuable not only for clarifying the benefits of fluoride in clinical practice but also for supporting member association facing challenges in their national prevention programs.
<p>Decisions</p>	<ul style="list-style-type: none"> • Drawing parallels to the historical scrutiny of amalgam, the Board suggested setting up a meeting and responding to questionnaires to proactively demonstrate the safety and necessity of dental materials. • The Board decided to integrate fluoride into the existing work on prevention. The resulting document will focus on overall prevention strategies, with a dedicated section on the

	scientific evidence and public health benefits of fluoride to serve as a formal CED statement for future advocacy and professional inquiries
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15. Working Group Oral Health	Rapporteur: Miguel Pavão
Working documents	<ul style="list-style-type: none"> • CED Submitted feedback on the ECHA consultation on Sodium Fluoride (CED-DOC-2026-013-E) • CED revised Action Proposal Form on Obstructive Sleep Apnea (OSA) (CED-DOC-2026-014-E) • Results from the Survey on Restorative dental materials following Regulation 2024/1849 (CED-DOC-2026-015-E)
<p>The WG Board Liaison, Miguel Pavão, updated the Board on the following activities and recent updates:</p> <p>Prevention and accessibility of oral healthcare</p> <p>The Board Liaison updated the Board members on the advancement of the CED White Paper on Oral Health Promotion and Oral Disease Prevention in Europe.</p> <p>A third version of the draft was presented to the WG on the 26 January, and a bibliography was separately integrated. As agreed by the WG, an expert, Greek Professor: William Papaioannou from the University of Athens, was identified and was contacted by email to provide feedback on the draft, as it currently stands. He specializes in preventive and community dentistry and has agreed to examine the draft.</p> <p>The WG discussed whether to present the paper for adoption at the May GM, or to postpone it to the November GM, as the coordinator of the draft Alessandra Rossi, will not be present in May.</p> <p>Obstructive Sleep Apnea (OSA)</p> <p>Following guidance from the Board at the November GM to reconsider the scope of the foreseen CED policy paper on Obstructive Sleep Apnea, the WG agreed on a new simplified version.</p> <p>Members discussed the mandate of dentists in relation to OSA and focused on a strong needed collaborative approach. They agreed, as the Board did, to focus on the “supportive role” of dentists.</p> <p>The WG agreed to amend the OSA Action Proposal Form. Any mention of chronic respiratory diseases and the role of the dentist in “diagnosing” OSA was taken out of the proposal.</p> <p>Vaccination</p> <p>The CED participated in the latest Coalition for Vaccination meeting on the 5th February, as a member.</p> <p>The event welcomed interventions from three co-chairs (representatives from the nurses, the doctors and the pharmacists), as well as from a Head of the Unit for Health Security of DG SANTE, a representative from the European Medicine Agency. A Joint Statement was co-signed and published following the event. It was published on the CED social media and website.</p> <p>The Statement calls specifically for an increase of vaccination coverage and stronger measures to address mis- and disinformation across Member States. One of the reasons for this statement is to counter recent U.S measures and recommendations by the U.S Centers for Disease Control and Prevention (CDC) regarding vaccination, and the increase in fear around vaccine uptake.</p> <p>In parallel to this, the CED was approached by a journalist from the online journal VaccinesToday, an online website about vaccine-preventable diseases and a member of WHO’s network of vaccine-related websites, Vaccine Safety Net. The CED provided information and updates on the role of dentists in HPV vaccination campaigns, by stressing the major role of dentists in vaccine promotion, referral and awareness-raising on the link between HPV, cervical cancer and oropharyngeal cancers. The CED highlighted that there is not common practice of administering of vaccines by dental practitioners. The article was published and is available online.</p> <p>Survey on restorative dental materials</p> <p>The survey on restorative dental materials (enquiring into alternatives to amalgam), was disseminated in January 2026, presenting initial results from the collected data from 22 received responses.</p> <p>The PDF results of the survey are in the working documents for today’s meeting.</p>	

As an initial conclusion, the Commission did not provide enough support following the ban on amalgam to address its consequences on public health accessibility.

Members during the meeting however raised several limitations to the survey (on the nature of some of the questions, several answers open to interpretation). There is therefore the need to contextualise and collect additional data in order to clarify some findings.

Sodium Fluoride

Following discussion with the President and the Chairs of WG PSICWM and WG DMMD, the WG prepared and submitted feedback in January to the ECHA (European Chemicals Agency) on Sodium Fluoride.

Board members were reminded of the context: the submission followed the announcement by ECHA of the review of the classification of sodium fluoride under ECHA, from a report by the French ANSES (Agency for Food, Environmental and Occupational Health & Safety). This report analysed sodium fluoride as an endocrine disruptor and reproductive toxicant. The CED’s feedback reiterated all science-based evidence and positive effects of fluoride. The WG will continue to closely monitor any developments.

The question on whether a full policy paper and official position on the topic should be drafted was submitted to Board members.

AMR

Lastly, the Board was informed that WG member Harry-Sam Selikowitz delivered on 24 November an online intervention to the Commission AMR One Health Network on AMR and Oral Health. He is to officially leave the WG and the CED on 1 April.

Functioning of the WG

The WG also discussed in January the functioning of the WG. The need and role of supporting staff was discussed at the last meeting and there had been slight tension regarding the question of whether supporting staff are allowed to attend WG meetings.

The WG Chair however clarified afterwards that supporting staff may still attend meetings. There were also discussions on communication efficiency to and from the Board.

Board	<ul style="list-style-type: none"> • The Board noted that all the given feedback on the proposal on obstructive sleep apnea has been taken on board. • Robin Foyle agreed with the action proposal form and acknowledged the effective role of dentists with regards to mandibular advancement devices (MADs).
Decisions	<ul style="list-style-type: none"> • The Board accepted the nomination and input from the Greek expert, Prof. William Papaioannou. • The Board approved the proposal on Obstructive Sleep Apnea (OSA), according to the project laid out in the action proposal form. • The Board decided to draft a chapter reiterating public health arguments behind sodium fluoride for oral health prevention, to be integrated into the CED White Paper on Oral Health Promotion and Oral Disease Prevention in Europe, currently being drafted.

16. WG Patient Safety, Infection Control and Sustainability	Rapporteur: Elif Dincher

Renaming of the WG PSICWM

The Board was informed that, the Working Group has been renamed the "Working Group on Patient Safety, Infection Control, and Sustainability." This adjustment reflects the transition from a narrow focus on waste management to a broader, more proactive sustainability mandate. By aligning the WG name with evolving environmental challenges, it aims to better address the dental profession's increasing vulnerability to external scrutiny while ensuring no overlap with other CED working groups.

Respirable crystalline silica (RCS) and BisGMA

The Board was informed of a meeting between the WG Chair, the President, the CED office, and RPA Europe regarding the proposed revision of occupational exposure limits for hazardous substances, including Respirable Crystalline Silica (RCS). It was successfully clarified that the dental environment is fundamentally distinct from industrial manufacturing. By highlighting the efficacy of high-vacuum aspiration and the consistent use of rubber dams, it was demonstrated that dental practices do not share the same risk profile as industrial sectors.

Furthermore, the Board **received an update** on the technical response to a questionnaire from RPA Prague concerning Bis-GMA prevalence and potential airborne exposure. Supported by expert input from Prof. Alessandro Pala and Prof. Gottfried Schmalz, the response underscores a critical distinction: the GMA moiety within Bis-GMA is not readily released under clinical conditions. It was noted that because the ether linkage requires extreme laboratory environments to be cleaved, the clinical risk profile differs significantly from pure GMA.

ECDC- Infection control policies among EU countries

The Board was informed of the upcoming initiative to engage with the European Centre for Disease Prevention and Control (ECDC) regarding an update to the "Infection Prevention and Control in Dentistry" section of their website. Originally focused on EU-based information, the ECDC page has expanded its scope to include data from non-EU countries. The objective of this update is to ensure that the resources and data represented for each CED member are current and comprehensive. In line with this, the CED members has been invited to contribute by sharing recent national publications, clinical guidelines, or relevant protocols issued by their respective associations. These contributions are currently gathering, and an official request will be submitted to the ECDC shortly.

ECHA's Assessment of Ethanol

The Board was updated regarding the ECHA Biocidal Products Committee on ethanol. The Committee adopted a positive opinion supporting the approval of ethanol for use in hand disinfectants and hygiene products. Crucially, no new hazard labels were proposed, as they did not reach a definitive conclusion on long-term health risks. This opinion is now moving to the European Commission for a draft regulation. Once adopted, this will set the legal framework for product authorizations across the EU. We are monitoring this closely to ensure that any future transition periods for non-approved products are managed effectively.

Water Quality in Dental Clinics

The Board was informed that the WG reviewed the status of the Water Directive and the need to continue monitoring water quality standards for clinical use. It was noted that municipal water supplies in some countries do not always meet the levels required for dental practice. Furthermore, during the WG meeting Members were asked to share any national initiatives or directives from health authorities related to water safety in dental clinics to support a coordinated response.

While municipal water quality is generally high in many countries, concerns remain regarding bacterial contamination within internal piping systems. At the same time, the WG agreed that any future position paper should take a cautious approach, as there is currently no statistical evidence indicating a higher risk of waterborne infections in dental practices compared to residential settings. The Board informed that, during the WG meeting members also emphasized the importance of avoiding additional administrative burdens, since existing national standards for dental clinics already ensure baseline compliance with drinking-water quality. Particular attention was drawn to practices in isolated or seasonal locations, where stagnant water in pipes during periods of inactivity may increase risks.

Unveiling real-life risks from micro and nano plastics in oral healthcare

The Board was informed that the Chair introduced a research project launched by the European Health and Digital Executive Agency (HaDEA) titled "Unveiling real-life risks from micro and nano plastics in oral healthcare." The project investigates potential risks associated with various dental materials, including composite resins, luting cements, dentures, and aligners. The Chair proposed that the CED should engage as a stakeholder to gain insights from the findings and stay informed on these emerging concerns.

Protection from Ionizing Radiation

The Board was updated on the rapid expansion of Cone Beam Computed Tomography (CBCT) and its higher radiation output compared to conventional imaging. Discussions highlighted significant regulatory variations across Europe; for instance, Greece requires a postgraduate degree for CBCT use, while Italy mandates specific CPD credits on radiation protection under EURATOM legislation. Lithuania was cited for its structured framework, which includes five-year certification renewals and mandatory radiation safety officers.

Board	<ul style="list-style-type: none"> • The Board discussed the increasing regulatory burden on dental practices regarding radiation protection. A key focus was the distinction between EU-level frameworks (such as the 2013/59/EURATOM Directive) and more stringent national enforcement, particularly regarding the frequency of technical inspections and mandatory training renewals (e.g., every five years). Furthermore, the Board reiterated that, according to existing standards, every CBCT image must be supported by a written medical justification in the patient’s notes and followed by a formal radiological report to prevent over-utilization. • The Board discussed the various national protocols for ensuring water safety in dental units, focusing particularly on the prevention of Legionella. Members exchanged information on their national requirements, noting that while some countries mandate annual bacterial testing, others (e.g., Germany and Austria) perform inspections every three years or focus on specific regions like Bavaria. The discussion revealed a mix of practices regarding water sources, with some offices using public supplies and others utilizing closed water systems treated with disinfectants (e.g., citric acid) to eliminate biofilms. • Furthermore, the Board highlighted the importance of daily maintenance procedures to prevent water stagnation, such as flushing systems every morning for several minutes or using integrated automated cleaning programs in modern dental chairs. It was concluded that while the risk of infection remains low and is often linked to immunocompromised patients, maintaining rigorous hygiene standards and periodic testing is a common professional priority across Europe to ensure patient and staff safety.
Decision	<ul style="list-style-type: none"> • It was agreed that the CED Office would review the EURATOM Directive to clarify the baseline requirements already in place. This dual approach aims to identify discrepancies between EU-level mandates and national enforcement to support future advocacy for more balanced regulations. • Romy Ermler was appointed as the new Board Liaison for the WG PSICWM.

17. BTF Internal Market	Rapporteur: Anna Lella
<p>EU Health Workforce Crisis Plan- Own Initiative Report</p> <p>The Board was informed that the Chair provided an update on the 'EU Health Workforce Crisis Plan' Own-Initiative Report, noting that dentistry was not specifically mentioned in the current draft. Regarding the legislative process, it was reported that the file is currently awaiting a committee decision, with the Committees on Employment and Social Affairs (EMPL) and Public Health (SANT) responsible for its review. The final plenary vote is scheduled for May 18, 2026. If adopted, the report will serve as the Parliament’s official resolution, potentially shaping future EU health policy and legislation.</p> <p>OECD Health at a Glance 2025 Report</p>	

The board was reminded that as previously noted in the December correspondence, the OECD 'Health at a Glance' report now includes a brief reference to corporate dentistry. It was highlighted that this is a significant development, as it represents the first explicit mention of corporate dentistry in such a major institutional document.

Supportive Courses for Foreign- Trained Dentists

The Board was updated on the discussion held during the BTF IM meeting regarding a proposal for the development of supportive orientation for migrating dentists, particularly those from non-EU countries. The discussion emphasized that while clinical proficiency is essential, significant gaps often exist in migrating dentists' understanding of host countries' financial systems, patient rights, and ethical frameworks. Members noted that under EU law, additional mandatory clinical requirements for EU-qualified dentists are prohibited; therefore, any proposed guidance must remain a voluntary recommendation rather than a compulsory prerequisite for registration. Concerns were raised regarding the potential exploitation of foreign dentists by corporate employers, who may limit access to independent regulatory information. To address these challenges, the BTF IM highlighted the value of sharing best practices and concluded that the CED should focus on drafting a non-mandatory recommendation. This document will aim to support the transition of foreign-trained professionals into national healthcare systems while strictly respecting national competencies and the autonomy of member associations.

Recognition of Third-Country Qualifications

The Board was updated on a non-public European Commission document exploring new approaches to recognizing non-EU qualifications, including the potential for automatic recognition through the accreditation of selected third-country institutions. While the Commission aims to streamline procedures and address healthcare workforce shortages, significant concerns were expressed regarding the impact on patient safety and educational standards. It was argued that if monitoring quality within the EU is already challenging, providing effective oversight for institutions outside the Union would be even more difficult. It was also emphasized that ensuring consistent clinical standards must remain the primary priority and concluded that the CED will closely monitor these developments as they move through the Commission's Group of Coordinators to mitigate any risks to the harmonized profession of dentistry.

18. Any other business

Dates and places of next meetings

- 21 May 2026, Limassol, Cyprus
- 18 September 2026, Brussels
- 26th November 2026, Brussels
- March 2027 (date TBC)
- 20 May 2027, Lithuania
- May 2028, Italy (date TBC)

Board members were informed that the three other WG Chairs, Vasileios Stathopoulos, Peter Kukolik and Ioannis Tzoutzas will be joining the Board Meeting in May in Cyprus.

The current ADEE President will be invited as guest for the May GM.

CED member Heming Olsen-Bergem from the Norwegian Dental Association will also be invited as keynote speaker at the beginning of the meeting, to deliver a short speech on NATO Medical and the possible role for the dental profession.

The decision to organise the next September Board Meeting was changed. The BM will take place as scheduled in Brussels.

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