Brussels, 15 September 2026

Subject: Safeguarding public health in the upcoming reform on advertising for pharmacies

To whom it may concern,

I am writing on behalf of the Pharmaceutical Group of the European Union (PGEU), representing more than 500,000 community pharmacists and around 200,000 community pharmacies across Europe, to draw your attention to some serious concerns regarding the upcoming legislative change on pharmacies advertising

We understand that the Polish Government is considering a revision of the legislation concerning advertising rules for pharmacies amending the current one, following the recent judgement C-200/2024 of the European Court of Justice.

Our main wish is that the law is amended in a way that remains fully aligned with public health objectives and protects the structure of the pharmacy system.

Many EU countries already impose advertising safeguards. For example, Ireland and Luxembourg, limit communication to factual information. Restrictions or prohibitions are also in force in most EU countries, including Austria, Belgium, Croatia, Cyprus, Czech Republic, Denmark, Finland, France, Germany, Greece, Hungary, Italy, Malta, Latvia, the Netherlands, Portugal, Romania, Slovenia, Spain and Sweden. In many cases, these restrictions are also linked to professional deontological codes.

A balanced and legally robust solution would be to allow limited, neutral advertising strictly confined to factual information about physical healthcare services provided by pharmacies, unrelated to the sale of medicines. This would reflect the European Court of Justice judgement guidance and respect the proportionality principle, while preserving the professional role of pharmacists.

We would also like to stress that medicines are not and should not be considered as ordinary consumer goods. The “Medicines are not candy” campaign recently led by the European Medicines Agency and National Medicines Agencies underlines that medicines must not be trivialised or promoted as lifestyle products. Any reform of advertising rules in Poland should be coherent with this fundamental public

health message. Commercial promotion that emphasises price competition or emotional marketing would contradict this principle.

Community pharmacies ensure continuity of supply, medication safety, crisis preparedness, and direct professional supervision. Excessive deregulation of advertising risks transforming pharmacies into purely retail outlets and increasing pressure for market consolidation. Large, possibly foreign investment groups with significant marketing resources could strengthen their position at the expense of small independent pharmacies that are the backbone of the health care system, especially in deprived and remote areas. Even though the Court clarified that professional independence alone cannot justify a blanket ban, it remains a legitimate objective that can and should be protected through Large corporate chains and investment-backed groups have the financial capacity and technical expertise to conduct sophisticated advertising campaigns and profile patients, especially through digital platforms and social media. Independent pharmacies cannot compete on that basis. Without strong safeguards, advertising deregulation could lead to unfair competition driven by marketing power rather than healthcare quality, ultimately resulting in increased market concentration and reduced access in rural or less profitable areas.

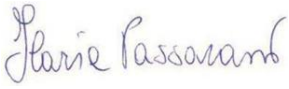
For these reasons, we advocate for a clear prohibition of comparative advertising. Statements such as “we sell cheaper OTC medicines” or “our services are better than others” should not be permitted. Comparative price advertising risks encouraging price-driven purchasing decisions for medicines and may stimulate irrational consumption. The Euroaptieka case (case C-530/20) delivered by the Court of Justice of the European Union confirms that Member States may lawfully restrict discounts and promotional mechanisms linked to medicines. Even if limited advertising is allowed, promotional pricing strategies and loyalty schemes can and should remain prohibited. Moreover, it is also important to ensure regulatory coherence. The Court criticised inconsistencies in the Polish framework, particularly where certain OTC medicines can be sold outside pharmacies. Any reform should therefore avoid creating situations where pharmacies are subject to stricter limitations while other retailers benefit from broader promotional freedom. At the same time, if restrictions on OTC promotion are maintained for pharmacies, similar public health safeguards should apply to all sellers to ensure consistency and fair competition.

In our view a proportionate legislative model is one that would limit advertising to neutral, factual information about location, opening hours and healthcare services physically provided by pharmacies, such as screening, vaccination or prevention campaigns. Advertising specific medicinal products, price promotions, discount schemes, loyalty programmes, bundled offers and comparative claims should be prohibited. All permitted communication would have to remain objective, non-misleading and aligned with the principle of rational use of medicines under Directive 2001/83/EC and the soon to be approved new EU Pharmaceutical Legislation.

Lastly, it is vital to ensure that the reform of the Polish legislation does not unintentionally undermine the sustainability of the pharmacy network. The Court itself pointed towards a mid-way solution: limited, strictly regulated communication focused on healthcare services, combined with strong safeguards against price competition in medicines. This approach protects public health, professional independence and the long-term viability of small and independent pharmacies in Poland.

PGEU would welcome the opportunity to discuss these concerns with you and your services and to provide further evidence and experience collected from community pharmacists across Europe.

Yours sincerely,



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