



3 April, 2014

Press Release

EU and Member States collaborate to address the common challenge of chronic diseases

The Joint Action on Chronic Diseases (CHRODIS-JA) and the EC Chronic Disease Summit

Cancer, diabetes, cardiovascular disease, chronic respiratory diseases and mental disorders account for 86% of deaths in Europe. They affect 8 out of 10 of people aged over 65 in Europe, and 70% to 80% of healthcare budgets are spent on chronic diseases. Chronic disease undermine the quality of life of millions of Europeans, and present the biggest challenge to the EU EIP-AHA target of increasing the healthy life years of its citizens by two years, by 2020. This will be discussed today at the first ever **Chronic Disease Summit** that will take place today in Brussels.

EU strategies, policies and programmes have a significant (in)direct effect on the health of EU citizens. The EU is therefore an important actor in efforts to reduce the burden of chronic diseases. One of its important roles is to provide relevant actors in EU Member States with opportunities to share knowledge on this topic.

The **Chronic Disease Summit**, organised by the European Commission, will enable policy makers, stakeholders and interest groups from across the EU to exchange on effective approaches to address chronic diseases. Health Ministers from six EU Member States will take part in the event. Participants will formulate recommendations on what is needed to reduce the burden of these specific illnesses and how the EU policy level can contribute.

The Summit will showcase the **Joint Action on Chronic Diseases (CHRODIS-JA)**. This is a large collaboration between the EC and national health authorities from 26 Member States that is being funded by the EC and the participating parties. The CHRODIS-JA aims to draw on existing experience in countries and regions of its partners to identify the best approaches to prevent and treat chronic disease, addressing cardiovascular diseases, stroke and type-2 diabetes. Since many patients with chronic disease face multi-morbid conditions, it will also focus on providing more holistic, rather than



disease-specific care paths. The CHRODIS-JA will develop a sustainable EU-level knowledge platform consisting of a clearinghouse and a helpdesk to serve as a resource for those in EU Member States that seek authoritative advice on how best to prevent and treat chronic diseases. The three-year initiative (2014-2017) is being led by the Spanish Ministry of Health, Social Services and Equity with the Health Institute Carlos III and involves 60 organisations from across the EU.

- **For more information on the EU Summit on Chronic Diseases, please consult the Conference Programme :**
http://ec.europa.eu/health/major_chronic_diseases/events/ev_20140403_en.htm
- **For more information on the EU Joint Action on Chronic Diseases, please contact:**
Dr. Juan E. Riese, CHRODIS-JA Programme Manager, Health Institute Carlos III, Madrid, Spain
- **The CHRODIS –JA website (www.CHRODIS.eu) will be available soon.**

Notes:

The [EU Council Conclusions on innovative approaches for chronic diseases](#) (December 2010), invited EU countries and the European Commission to initiate and lead a reflection process on chronic diseases, in order to identify ways to optimise the response to chronic diseases and the cooperation between EU countries. The work undertaken was summarised in a [Final Report on the Reflection Process on Chronic Diseases](#) (September 2013). The EU Joint Action on Chronic Diseases, which is being funded under the 2013 EU Health Programme, as well as the EU Chronic Disease Summit can be regarded as a follow up to this process.

Another EU-level initiative that is highly relevant to collaborative action on chronic disease is the [European Innovation Partnership on Active and Healthy Ageing \(EIP-AHA\)](#), one of the flagship initiatives of the EU 2020 Strategies. The Partnership set the target of increasing the healthy lifespan of EU citizens by two years by 2020. The EIP-AHA focuses on action developed around three pillars: prevention, screening and early diagnosis, care and cure (integrated care) and active ageing and independent living.