

Next steps for driving change in the prevention and management of chronic diseases in Europe

Prof Raymond Vanholder

on behalf of European Chronic Disease Alliance

2nd JA-CHRODIS Stakeholder Forum 19 February 2015

ecda

United to reverse the rise in chronic disease

European
chronic
disease
alliance



fighting heart disease
and stroke
european heart network



EUROPEAN
SOCIETY OF
CARDIOLOGY®



The European Chronic Disease Alliance (ECDA)

- Coalition of 11 European health organisations representing **millions of chronic disease patients and over 200,000 health professionals**
- Allergic diseases, Cancers, Cardiovascular Diseases, COPD, Diabetes, Hypertension, Kidney Diseases, Liver Diseases, Respiratory Diseases
- Our mission
To reverse the alarming rise in chronic diseases by providing **leadership and policy recommendations** based on contemporary evidence
- Our priorities
 - **Primary and secondary prevention** related to chronic diseases
 - **Common risk factors**: tobacco use, poor nutrition, physical inactivity, alcohol consumption, environmental factors

ECDA – a key stakeholder that brings value

- **Unique health coalition** representing a wide range of CDs in Europe
- **Wealth of expertise** and resources to support the Commission in developing concrete actions on CDs
- **Great network** across Europe, providing valuable access to data and information about CDs
- **Strong commitment** to actively contribute in shaping policies addressing health risk factors to secure the best outcome for the European citizens
- **Open to dialogue** and keen to engage with all relevant stakeholders to protect and improve the health of European citizens

What ECDA does

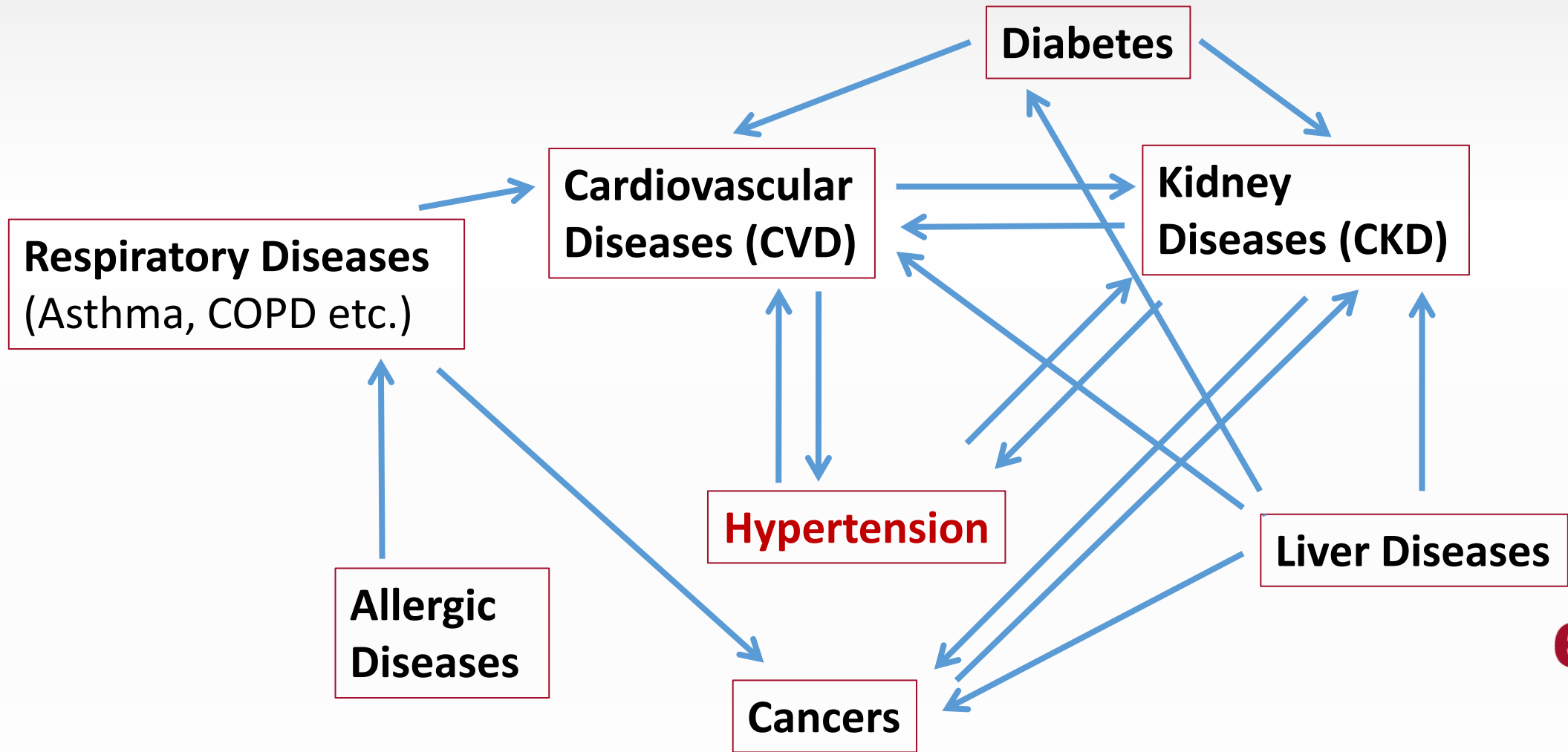
- **Position Papers** – Call for EU Action on Salt, Alcohol, and Trans Fats (February-March 2015)
- **Manifesto** – Common Sense on Chronic Diseases (November 2014)
- **Questions Hearings of Commissioner designates** (August 2014)
- **Input on Green Paper on mHealth apps** (July 2014)
- **Joint Statement** -Tackling alcohol related harm requires better actions (March 2014)
- **EU-funded Project** addressing Economics of Chronic Diseases – EConDA (April 2013-April 2015)
- **Input to Consultation** on the Reflection Process on Chronic Disease (February 2012)
- **White Paper** -‘Chronic Disease Alliance – A unified Prevention approach’ (October 2010)

Position papers

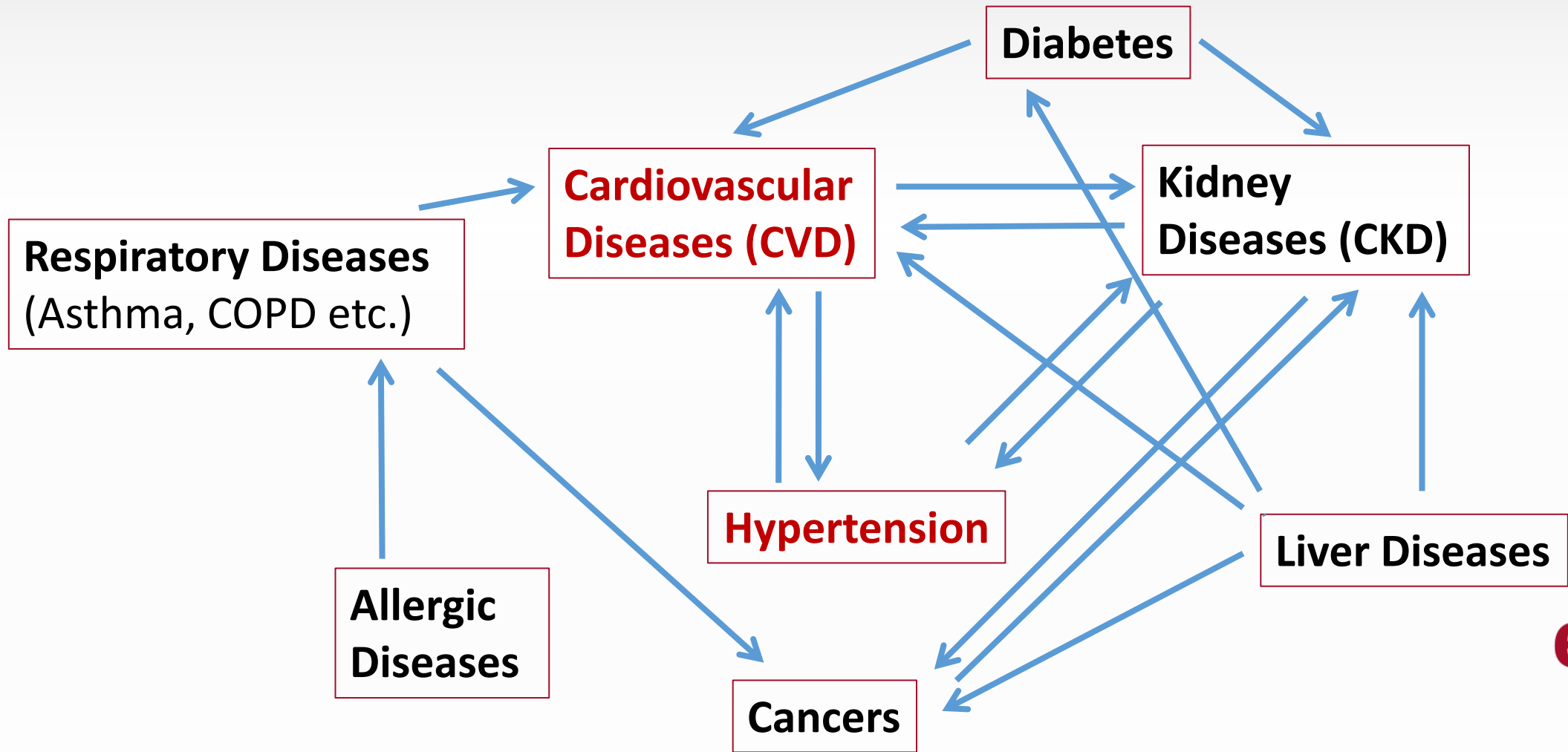
- **Don't Pass the Salt!** – ECDA's position on the need for EU action to help Europeans reduce excessive salt intake
- **Don't bottle out** – why the EU needs a comprehensive alcohol strategy
- **The good, the bad and the *ugly*** – why the EU should eliminate industrially produced trans fat

The position papers will be available soon on the ECDA website

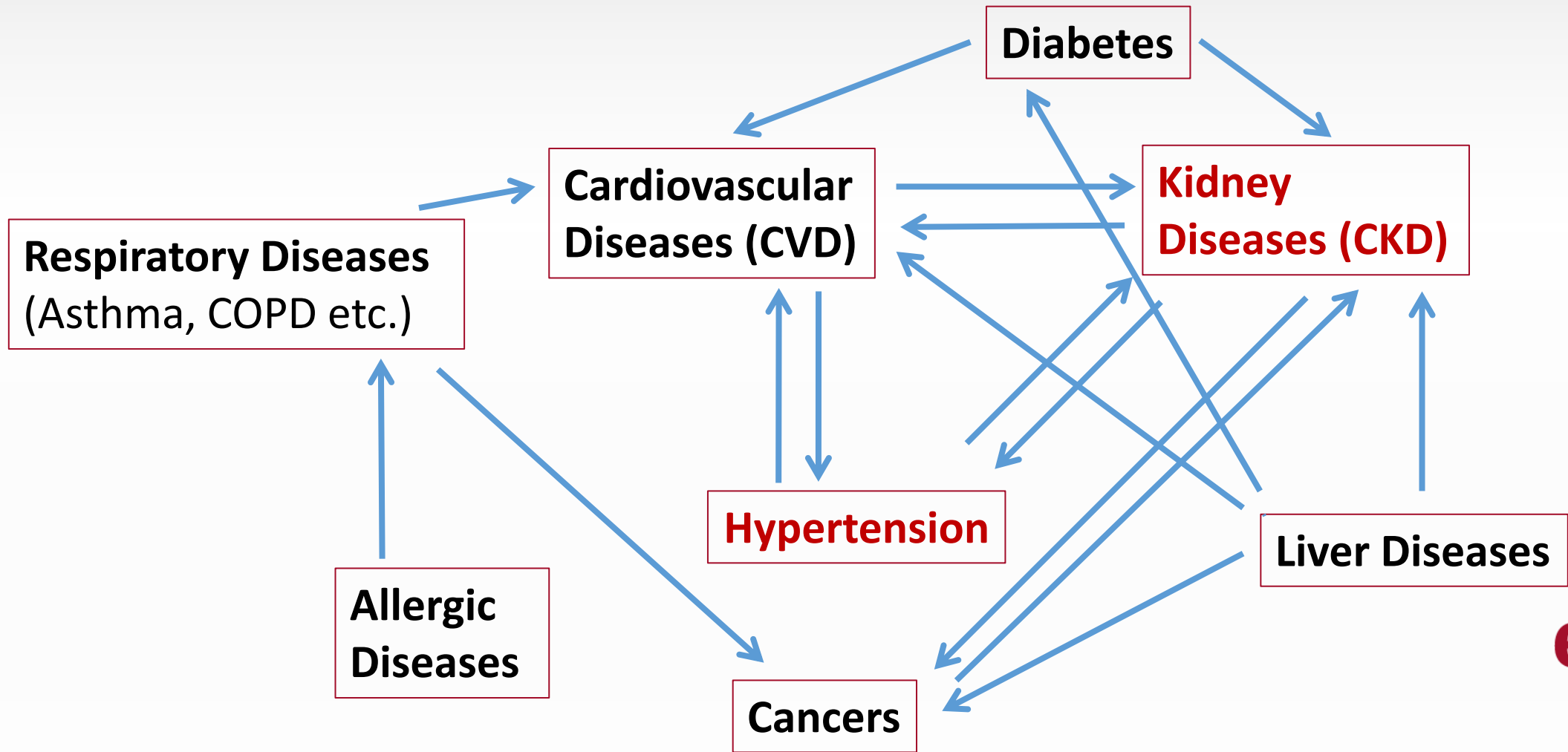
Many CDs are inter-related w/ common co-morbidities



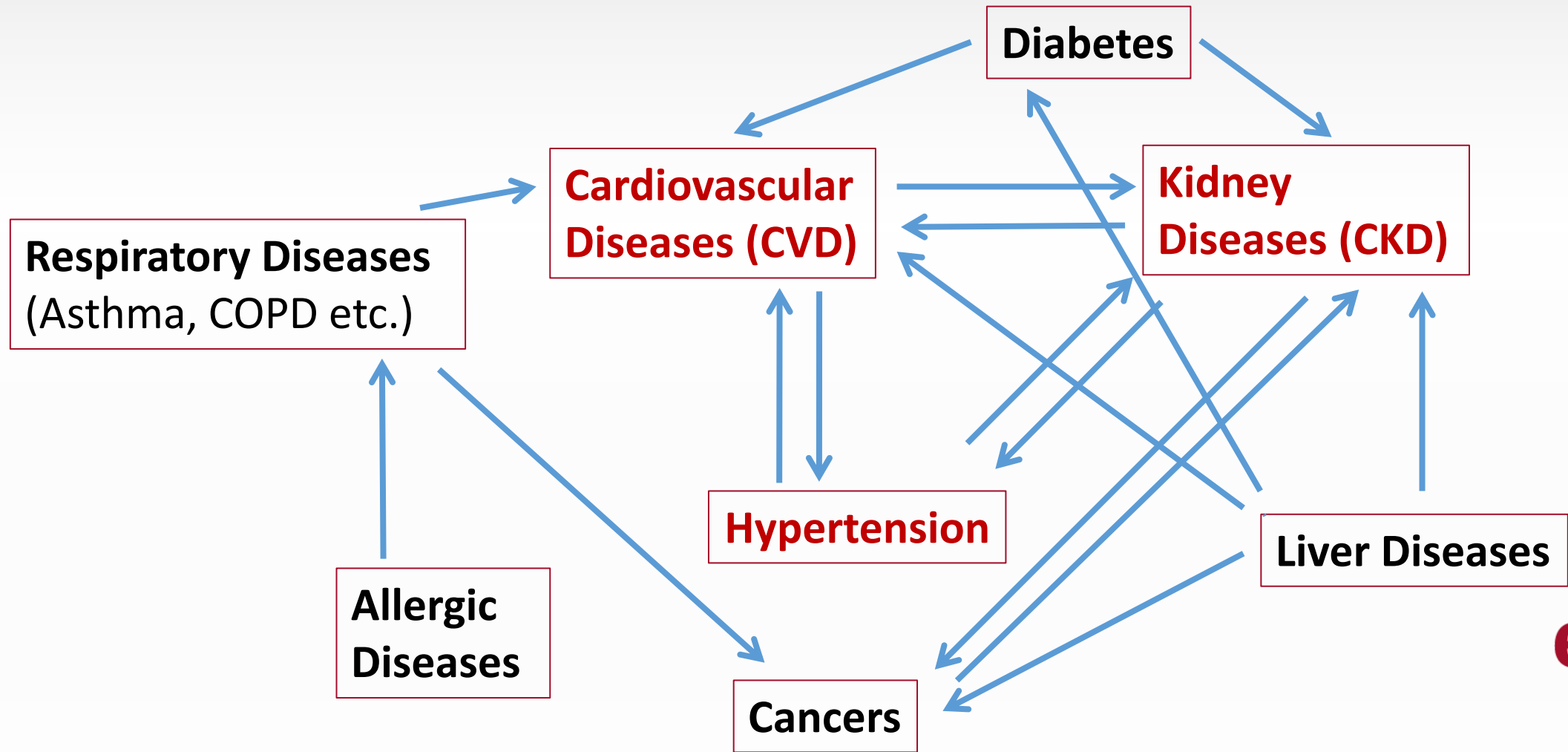
Many CD's are inter-related w/ common co-morbidities



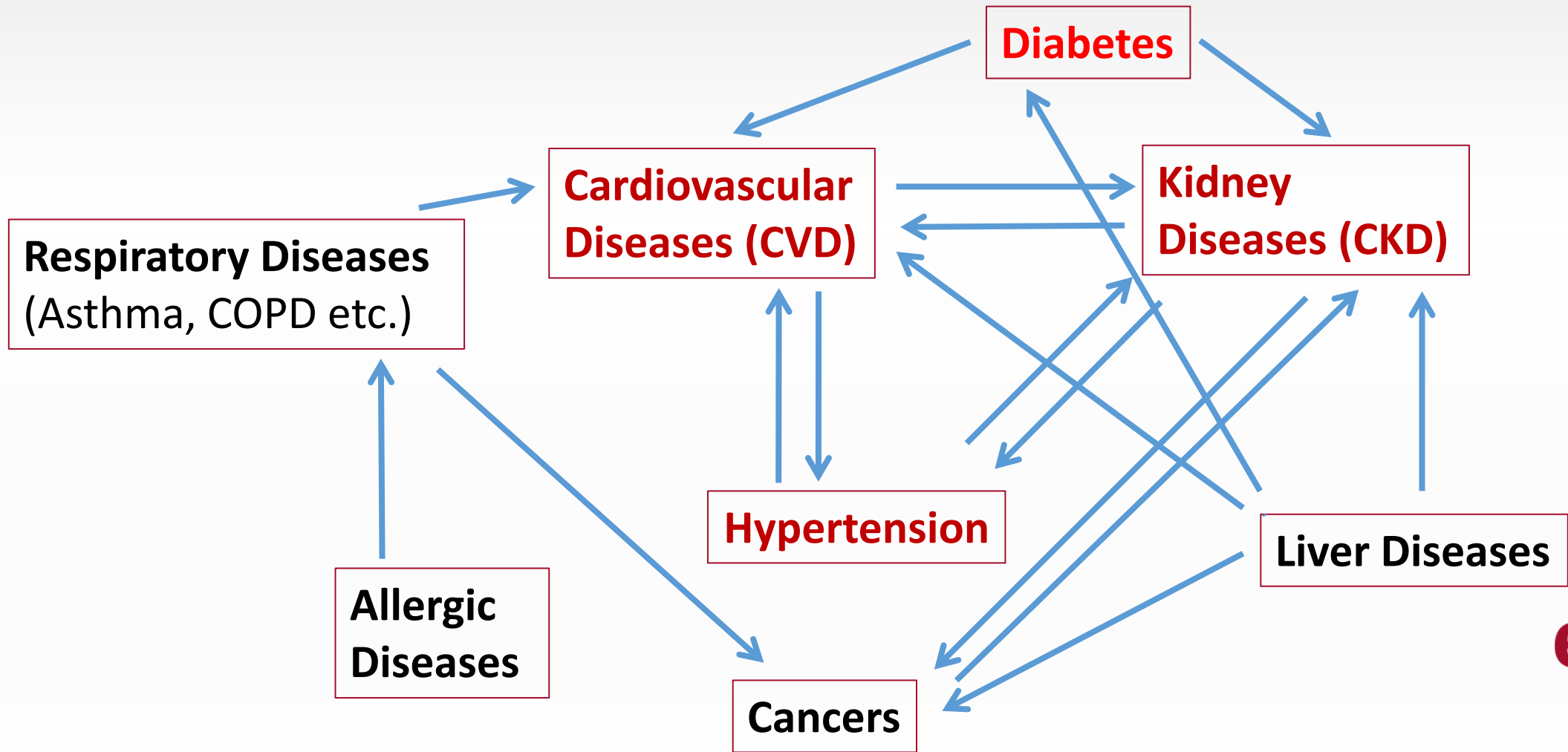
Many CDs are inter-related w/ common co-morbidities



Many CDs are inter-related w/ common co-morbidities



Many CDs are inter-related w/ common co-morbidities



Many prevalent CDs share common Risk Factors

| | CVD | Hypertension | Diabetes | Cancers | CKD | Liver Diseases | Respiratory Diseases | Allergic Diseases |
|-----------------------|-----|--------------|----------|---------|-----|----------------|----------------------|-------------------|
| Poor nutrition habits | X | X | X | X | X | X | | X |
| Tobacco use | X | X | | X | X | | X | X |
| Obesity | X | X | X | X | X | X | X | X |
| Physical inactivity | X | X | X | X | X | X | X | X |
| Alcohol consumption | X | X | | X | | X | | X |
| Environmental factors | X | | | X | X | | X | X |

NHS Atlas of Risk

This atlas will help you to put health risks and death rates into perspective. Use it to compare cause of death and risks to health based on sex, age and region.

The Atlas of Risk i

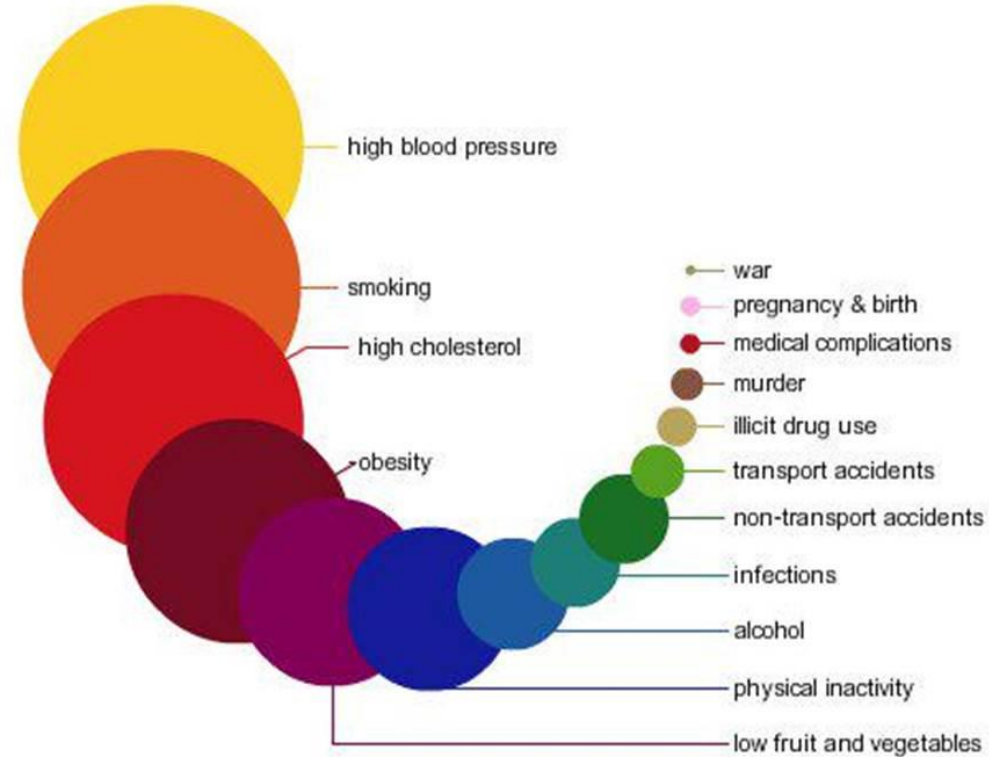
Causes

Risks

About

Data

Risks leading to death in perspective



Reset

Scale Info ● Circles ▮ Bars

A huge socio-economic toll on the EU citizen

- Chronic Diseases are **interrelated**, have **common risk factors** and are **largely preventable**.
- Yet, in Europe, **9 people out of 10 die of a Chronic Disease**.
- Chronic diseases carry **significant human costs** (human suffering, reduced workforce, social exclusion, health inequalities etc.)
- **70% to 80% of healthcare costs** are spent on chronic diseases. This corresponds to **€700 billion in the European Union** and this number is expected to rise in the coming years.*
- 97% of health expenses are presently spent on treatment, **only 3% is invested in prevention**.**

* 'Never too early: tackling chronic diseases to extend health life years' The Economist Intelligence Unit Limited 2012

** 'Together for Health: A Strategic Approach for the EU 2008-2013', White paper, European Commission, COM(2007) 630 final

Current situation of CD care in the EU

- **Great variations** among Member States in terms of **quality of care**, reimbursement of treatment and investment in **prevention**
- **Health inequalities** widely recognized but not sufficiently tackled at political level
- **Insufficient co-ordination** of actions among Member States
- **Weak coordination between stakeholders at country level**
- **Lack of adequate targets** on health determinants
- **Insufficient monitoring and evaluation** of current programs

Current situation of CD care in the EU

Cardiovascular diseases:

- The main cause of death in the European Union accounting for more than 1.9 million deaths every year – equivalent to **40% of all deaths**
- CVD is the main cause of death in women in all countries of Europe and is the main cause of death in men in all but 6 countries
- Annual costs of healthcare and lost productivity in the EU: **€196 billion**

Main risk factors

- Tobacco use, alcohol use, high blood pressure, high body mass index, high blood cholesterol, high blood glucose, low fruit and vegetable intake and insufficient physical activity

Current situation of CD care in the EU

Cancer:

- Cancer is the **2nd most common cause of death** in the European Union
- Estimated number of cancer-related deaths in the EU is 1.3 million
- Estimated cancer costs in the EU are **€126 billion**, where healthcare accounts for €51,0 billion (40%)
- About 2/3 of cancers are preventable as per WHO

Main risk factors

- Tobacco use, physical inactivity, dietary factors, obesity and being overweight, alcohol use

Current issues include

- **Cancer survival varies** widely between European countries
- Cancer incidence is set to **increase** due to the **ageing** European population
- Need for enhanced translation of scientific evidence into policy and practice

Current situation of CD care in the EU

Liver Disease:

- Recent estimates suggest **100 million EU citizens likely** to suffer from **Nonalcoholic Fatty Liver Disease**
- Up to 8.8 million infected with chronic hepatitis C (HCV) in the EU and 15 million living with hepatitis B in the Euro region
- **Very little screening**; only two EU countries have adequate hepatitis strategies, new drugs which offer a cure for HCV too expensive for most patients in most EU countries
- Liver disease is not adequately detected in many EU countries and patients often present too late for treatment
- It is a **growing contributor to the CVD and diabetes** epidemics in the EU

Main risk factors

- High body mass index, alcohol, poor diet, little exercise, intravenous drug use, poverty

Current situation of CD care in the EU

Kidney Diseases:

- In Europe **1 in 10 have some stage of kidney failure**
- **Screening/secondary prevention is a missed opportunity:**
 - CKD **screening** is **simple and inexpensive** while **therapy** at later stages is **expensive**
 - Yet broad screening programmes are rare
 - **Early diagnosis and treatment** would slow progression to ESRD and result in **saved lives and saved costs.**
- **Best-outcome care is something of a postcode lottery:**
 - For ESRD **transplantation** gives the best outcomes
 - Yet **access varies** enormously between Member States.

Current situation of CD care in the EU

Respiratory Diseases:

- **Asthma**

- In Europe, **30 million children** and adults less than 45 years old have asthma
- 13% of carers of asthmatic children, give up their work to care for the child
- Annual costs of healthcare and lost productivity in the EU: **€33.9 billion**

- **COPD**

- The **4th most common cause of death** in 2008, with 3.3 million deaths Worldwide
- **5-10%** of adults aged over 40 years have COPD
- Annual costs of healthcare and lost productivity in the EU: **€48.4 billion**

- **Main risk factors**

- Exposure to tobacco smoke, poor air quality & lack of physical activity

Current situation of CD care in the EU

Allergic Diseases

The figures

- **150 million EU citizens** suffer from chronic allergic disease
- By 2025 more than 50% of all Europeans will suffer from allergy
- 45% of allergy patients are likely to be misdiagnosed in the EU
- 100 million Europeans suffer from allergic Rhinitis; 70 million from asthma; 7 million live with food allergy – 8% of which produce acute anaphylaxis and are potentially fatal
- Asthma and allergic rhinitis alone lead to more than 100 million lost workdays and missed school days by year in EU
- **€142 billion per annum** could be saved if allergic patients were diagnosed and managed appropriately

Opportunities

- Proven effective holistic measures to prevent and manage allergies exist and need to be implemented across Europe. They include measures to:
 - increase allergen tolerance in the population
 - Improve allergy diagnostics
 - Reduce work-related allergies
 - Enhanced focus on severe allergies to reduce exacerbations and attacks and reduce the healthcare costs caused by allergies

ECDA Call for a coordinated approach

- Urgent political action is needed to reduce the human, social and economic burden of chronic diseases.
- We, as ECDA, representing **millions of chronic disease patients** and over **200,000 health professionals** call for:

A EU Framework on Chronic Diseases

- With a focus on the **EU added-value** in order to successfully tackle chronic diseases
- To be developed by the European Commission by 2017
in collaboration with relevant stakeholders

An EU Framework on Chronic Diseases needs to:

- Include the **targets** set out in the WHO Global Non-Communicable Disease Monitoring Framework
- Implement key primary **prevention measures** aimed at effective population-wide reductions in smoking, alcohol use, salt, saturated and trans fats and sugar intake and to promote physical activity throughout the life-cycle;
- Incorporate **interventions on other health determinants** such as harmful exposure to various **environmental** factors, and **socio-economic gradients**.
- Focus on early diagnosis and prompt treatment in addition to primary prevention. The EU must engage in actions for early detection and diagnosis and population-based screening.

An EU Framework on Chronic Diseases needs to:

- Improve and strengthen **cooperation** among all stakeholders, including health authorities, insurers, health professionals, researchers, trade unions, employers and patients
- Encourage citizens to make healthy choices and build an environment that promotes health and individual responsibility.
- Set up EU registries for incidence, prevalence and health outcomes.
- Address any persisting health inequalities
- Identify gaps in research such as on shared risk factors and co-morbidities

ECDA 5 key recommendations to drive change in CDs care:

1. The EU must adopt a comprehensive framework on chronic diseases that leverages EU and MS regulatory competences and resources in all policies.
2. The focus of the European Framework for Chronic Diseases must be to tackle the prevention of diseases, whether these are caused by behavioural, social, environmental, or other factors.
3. The Framework needs to:
 - 3.1 Address screening and earlier diagnosis
 - 3.2 Emphasise the crucial importance of multidisciplinary management of chronic diseases such as long-term follow up and investment in research
 - 3.3 Keep the patients at the centre and healthcare professionals involved in all policy initiatives

The Framework will finally contribute to achieving the best outcomes for the health and wealth of the EU and its citizens!

Joint Action CHRODIS, a Key Instrument for Chronic Diseases

The work of CHRODIS synergises well with the ECDA's recommendations

1) We call for an **EU Framework on Chronic Diseases**, including:

- Stronger cooperation between stakeholders across the EU
- Focus on prevention and health promotion
- Enhanced exchange of information

2) **Adapting healthcare systems to the reality of CDs** : CHRODIS' approach addresses multi-morbidity from the perspective of **multi-disciplinary and integrated care**.

3) **Effective policies**: the CHRODIS platform for exchange of good practices should become an essential tool for policy-makers in designing successful health policy.

Thank you

ecda

United to reverse the rise in chronic disease

European
chronic
disease
alliance



fighting heart disease
and stroke
european heart network



EUROPEAN
SOCIETY OF
CARDIOLOGY®



ERS
EUROPEAN
RESPIRATORY
SOCIETY
every breath counts



EASL
EUROPEAN
ASSOCIATION
FOR THE STUDY
OF THE LIVER



EAACI
EUROPEAN ACADEMY OF ALLERGY
AND CLINICAL IMMUNOLOGY