Proposed questions in view of the hearings of the Commissioners’ candidates
July 2019

INTA Committee

Questions for Commissioner designate for Trade

- Can the Commissioner designate guarantee that future trade agreements will not undermine the EU’s and its member states’ rights to regulate to protect public health, for example through including explicit references to international resolutions, and WHO policy recommendations in the agreements?

- How will the Commissioner designate ensure that the voice of patients and healthcare professionals are heard during negotiations on trade agreements, i.e. put at an equal footing with other stakeholders, in particular corporations and sectorial industries with vested commercial interests?

About ECDA

The European Chronic Disease Alliance (ECDA) is a Brussels-based coalition of 10 European health organizations representing major chronic diseases such as: liver disease, kidney disease, respiratory disease, COPD, allergic diseases, cardiovascular disease, hypertension, cancer, and diabetes; and sharing the same interests in combating preventable chronic diseases through European policies that impact health. Together, we represent over millions of patients and over 200,000 health professionals. ECDA plays a leading role in the prevention and reduction of chronic diseases by providing policy recommendations based on contemporary evidence. Its main priorities are primary and secondary prevention related to chronic diseases and the common risk factors - tobacco use, poor nutrition, physical inactivity, alcohol consumption, and environmental factors.

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Facts & figures on chronic disease

Prevalence
> The prevalence of chronic diseases and disabling conditions has been growing in the EU and the wider European region over the past decades1.
> One third of the European population aged 15 and over2, and 23.5% of the working age population in the EU lives with a chronic disease3.
> The co-occurrence of two or more chronic conditions (multimorbidity) has become increasingly common in Europe4.
> Two out of three people at retirement age have at least two chronic conditions5.

Mortality
> Globally, Europe has the highest burden of chronic diseases, which are responsible for 86% of all deaths6 and a major cause of morbidity and disability estimated in disability-adjusted life-years (DALYs).
> 550 000 people of working age die from four major chronic diseases (CVD, cancers, respiratory diseases and diabetes) in the EU every year7.

Socio-economic impact
> The premature death of more than 550 000 people of working age annually across the EU represents a loss of around 3.4 million potential productive life years8 and costs the EU economy euros 115 billion a year. This corresponds to 0.8% of the GDP in the EU9.
> 70-80% of healthcare costs are spent on chronic diseases in Europe10.
> Direct costs of healthcare to treat people with chronic diseases amount to €700 billion in the EU11.
> Productivity losses are estimated at €54 billion per year for cardiovascular diseases alone12.
> The employment rate of people who have one or more chronic condition, and particularly people aged 50-59, is much lower than for those who do not suffer from any disease13.
> Prolonged sickness leave of one month or more is frequent among employed persons with circulatory problems, including heart disease or attack (29%) as well as stress, depression or anxiety (25%) and musculoskeletal problems (25%)14.
> On average only 3% of total health expenditure (for all age groups) in OECD countries including EU Member States goes towards population wide public prevention while 97% of health expenses are presently spent on treatment15.

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1 Eurostat, 2010; Busse et al., 2010
3 https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5923823/
4 Boyd & Fortin, 2010; Uijen & van der Lisdonk, 2008
9 European Heart Network paper on CVD and chronic diseases
10 Economist Intelligence Unit, 2012
11 Eurostat, 2010; Busse et al., 2010
13 European Heart Network paper on CVD and chronic diseases