

Stakeholders involvement as asset in response to Chronic Diseases

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Chairman of the EKHA

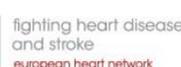
Acting Chairman of the European Chronic Disease Alliance

EU Summit on Chronic Diseases, 3-4 April 2014

ecda

United to reverse the rise in chronic disease

European
chronic
disease
alliance



The European Chronic Disease Alliance (ECDA)

- Alliance of 11 European health organisations representing **millions of chronic disease patients and over 100,000 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 organization** 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

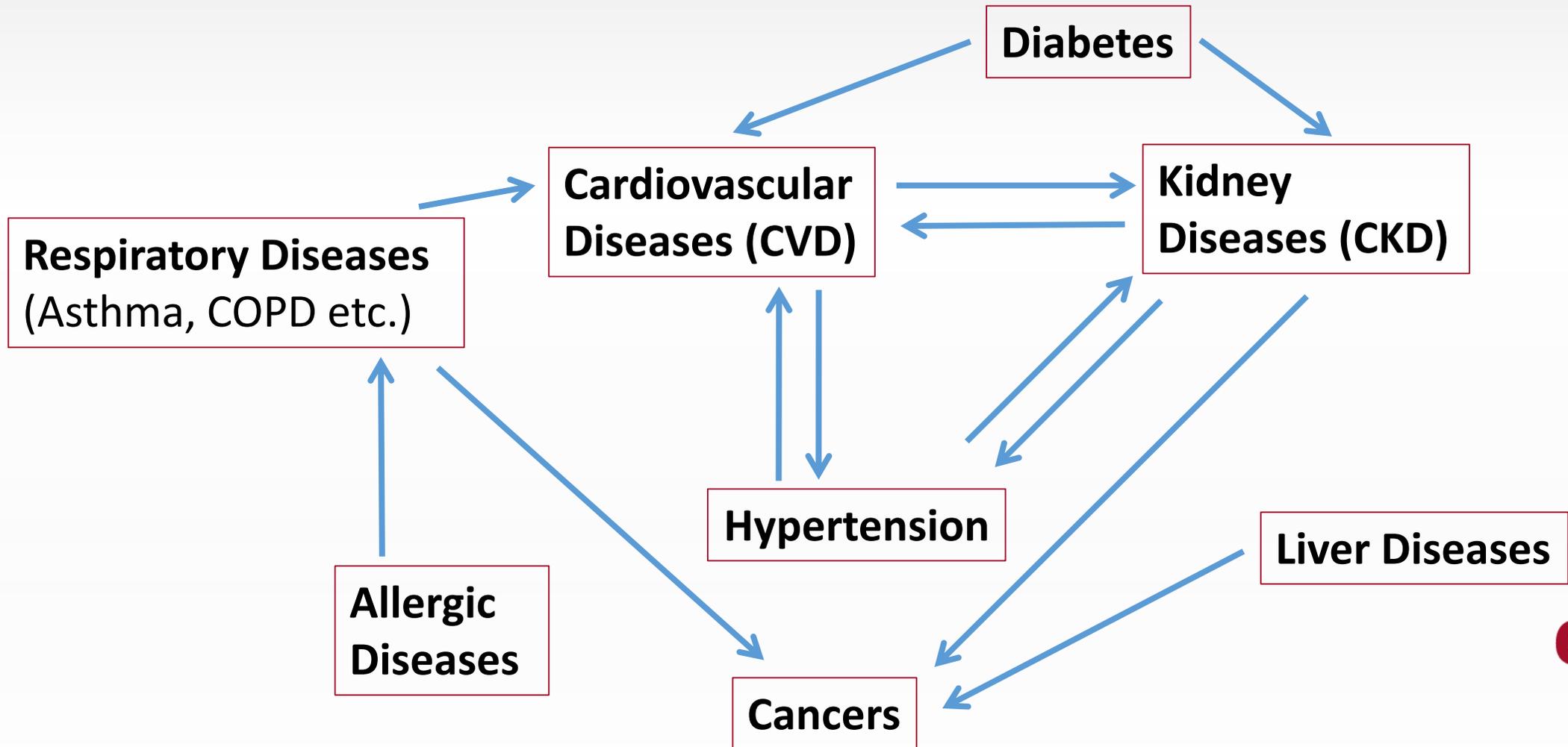
What ECDA does

- **White Paper** - 'Chronic Disease Alliance – A unified Prevention approach' (October 2010)
- **Input to Consultation** on the Reflection Process on Chronic Disease (February 2012)
- **Open Letter** to President Barroso (May 2013)
- **EU funded Project** addressing Economics of Chronic Diseases – EConDA (April 2013-April 2015)
- **Joint Statement** -Tackling alcohol related harm requires better actions (March 2014)

Benefits of Stakeholders involvement in response to Chronic Diseases

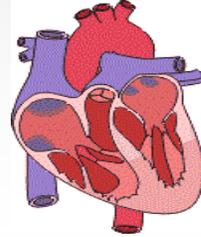
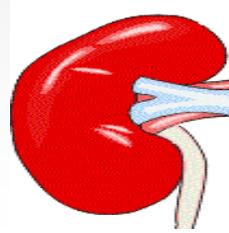
- For the EU policymakers:
 - Allows for interactive decision-making
 - Ensures openness and inclusiveness through a consensus-oriented approach
 - Demonstrates accountability towards final users and EU stakeholders community at large
 - Increases legitimacy of policy measures taken
- For the EU stakeholders:
 - Increases likelihood that consensus positions are taken up by decision-makers
 - Allows for health policies to better meet the needs of EU citizens

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



Clinical Impact of Diabetes Mellitus

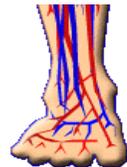
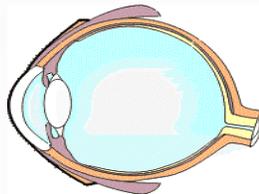
The leading cause of new cases of ESRD



A 2- to 4-fold increase in cardiovascular risk

Diabetes

The leading cause of new cases of blindness in working-age adults



The leading cause of nontraumatic lower extremity amputations

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
Physical inactivity	X	X	X	X	X	X	X	X
Alcohol consumption	X			X		X		X
Environmental factors	X			X			X	X

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

ECDA Call for Action

- **Urgent political action** is needed to reduce the human, social and economic burden of chronic diseases.
- We, as ECDA, representing **millions of patients** and over **100,000 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 EC by 2017 **in collaboration with relevant stakeholders**

An EU Framework on Chronic Diseases needs to:

- Incorporate targets as set out in the Global NCD Monitoring Framework
- Intervene on health determinants such as tobacco, nutrition, alcohol, environment, health inequalities and physical inactivity
- Invest in prevention such as early detection and diagnosis; population-based screening; and population-wide measures to reduce smoking, alcohol, salt, fat and sugar consumption, and increase physical activity
- Encourage citizens to make healthy choices and build an environment that promotes health and individual responsibility

An EU Framework on Chronic Diseases needs to:

- Strengthen cooperation between health ministries, insurers, health professionals, trade unions, employers and patients to improve health services
- Ensure availability of comparable data by setting up EU registries for incidence, prevalence and health outcomes
- Enhance cooperation on research to overcome existing fragmentation and duplication of research in Europe
- Strengthen monitoring and evaluation by establishing EU-wide surveillance and screening programmes, and financing research into effectiveness of prevention and treatment for chronic diseases

EU Summit – a Key Political Momentum for CDs

ECDA five key Recommendations for the EU Summit Declaration

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 EU must support MS in adapting health care systems to respond to the growing burden of chronic diseases, ageing population and increasing prevalence of co-morbidities.
3. The EU should introduce population-wide measures to reduce the key risk factors.
4. Successful and proven harm reduction policies should also remain in place in the MS and be properly resourced.
5. Monitoring and evaluating actions for chronic diseases should encompass establishing EU-wide surveillance and screening programmes (EU registries).

Thank you

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United to reverse the rise in chronic disease

[european
chronic
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alliance]



fighting heart disease
and stroke
european heart network



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OF THE LIVER



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