INFORMAL MEETING OF HEALTH MINISTERS

24 – 25 July 2024, BUDAPEST

**Cardiovascular Health (CVH)**

*Europe is facing challenges related to the burden of non-communicable diseases (NCDs) with high mortality rates. In the area of NCDs concerted action to reduce avoidable morbidity and early deaths could make a real difference especially in the current demographic context. However the overriding interest of living a healthy life in good quality, the wellbeing of the European citizens and the competitiveness of our economies represent imperative reasons to act.*

*Cardiovascular diseases (CVDs) are the primary cause of mortality within the European Union, responsible for approximately 1.7 million deaths each year. Addressing this challenge is critical not only for the health of the populace but also for the sustainability of health systems across Europe. By focusing on the prevention, treatment, and rehabilitation of CVDs, Europe may transform the challenges of an ageing population into opportunities, fostering a society where everyone benefits from longer, healthier lives. A critical focus of our efforts is on improving CVH sustainability, development, and enhancement from foetal life throughout the lifespan. This includes promoting actions aimed at fostering CVH from the earliest stages of life and continuing through to old age. By doing so, we propose a comprehensive approach that addresses CVH at every stage of life.*

*The key lies in promoting “healthy longevity”, ensuring that our later years are characterised by vitality and contributing, rather than dependency. Prevention is our most powerful tool. Most age-related diseases are preventable, and proactive health measures are effective at any age. Investment in prevention is not just a health strategy; it is an economic strategy that holds the promise of lower health care costs, heightened productivity, and a stronger economy.*

**The escalating challenge of CVDs in the European Union**

The burden of CVDs in the European Union is profoundly alarming, with severe ramifications that stretch across individuals and families, as well as the broader economic landscape. As leading causes of mortality and major contributors to disability, conditions such as ischemic heart disease, stroke, and hypertension continue to dominate health concerns within the community. The complexity of CVH challenges is magnified by an array of contributory factors, including ageing populations which means these conditions are more prevalent. Additionally, lifestyle-related risk factors such as obesity, smoking, alcohol consumption and physical inactivity layer on preventable risks. In addition, environmental stressors, especially stemming from climate change present further risk factors. Also, we should not lose sight of the impact of mental conditions that can also be a source of cardiovascular problems. These factors are further exacerbated by primary prevention challenges such as managing hypertension, controlling high cholesterol levels, and effectively managing diabetes. Furthermore, disparities in healthcare access and quality across different regions exacerbate the situation, preventing uniform approaches to health management and intervention.

Despite concerted efforts to address these health crises, strategies employed across EU Member States remain fragmented and are applied inconsistently. This has contributed to significant variances in health outcomes, highlighting the need for a more standardised approach to CVH policy and intervention, as discussed in existing EU policy frameworks. The economic implications are equally staggering: in 2021, the cost of CVDs in the EU was estimated at approximately EUR 282 billion. This figure encompasses not just the direct costs of healthcare services but also the broader economic impacts related to productivity losses and the burden of informal care. The significant economic costs highlight the urgent need for action.

Moreover, available medical and technological advancements in the cardiovascular field are underutilised. Innovations in treatment and diagnostic processes exist, yet they are not equally accessible across the EU. This creates a significant gap between scientific progress and actual clinical practice, hindering the potential benefits these advancements might offer to the population at large. In addition, support and prioritization of public health initiatives aiming at mitigating cardiovascular risks at EU level could also be further improved, otherwise, the effectiveness and reach of these initiatives remain limited, failing to make the impact needed on health outcomes.

CVDs necessitate a comprehensive and coordinated response that transcends national boundaries and leverages the collective resources and knowledge within the EU. The concept paper annexed to this note suggests fostering a unified strategy that not only promotes advanced medical treatments and innovations but also emphasizes preventive measures that can address the root causes of CVD. This includes advocating for healthier lifestyles, greater public health education, and more accessible healthcare services across all member states. Furthermore, leveraging technology and data can lead to better monitoring of CVH trends and more personalized approaches to treatment and prevention.

**What has been done?**

The European Commission presented the Healthier together – EU non-communicable diseases initiative in June 2022 which was co-created with Member States and stakeholders as a strategic framework to support EU countries in identifying and implementing effective policies and actions to reduce the burden of major NCDs and improve citizens’ health and well-being[[1]](#footnote-1). The Healthier Together guidance document puts forward an efficient and sustainable way of addressing the common challenges of prevention of NCDs by addressing key health determinants. Under this initiative, EUR 76 million is being used to facilitate Member State collaboration to tackle shared risk factors with a broader focus on health determinants, including commercial influences (JAPreventNCD[[2]](#footnote-2)), setting a precedent for future national planning.

Additionally, in response to these challenges, the EU has initiated a joint action on CVDs and diabetes (JACARDI[[3]](#footnote-3)), supported by a EUR 53 million allocation from the EU4Health programme. This initiative lays a foundational framework for Member States to develop comprehensive national strategies addressing both CVDs and diabetes, along with their interconnected risk factors. Through this joint action, Member States will work together to develop a sustainable framework for the collection of data to improve its quality and availability.

Member States may leverage funding opportunities via the EU4Health programme, Next Generation Recovery Funds, and Horizon research funds, to improve prevention, early diagnosis, screening and treatment of cardiovascular diseases in a targeted and needs-based manner. Under Horizon 2020 and Horizon Europe funding opportunities of EUR 1.6 million have been made available for research projects on cardiovascular diseases.

Furthermore, a comprehensive mapping of national policies and programmes related to non-communicable diseases has been agreed upon by the Sub-group on Prevention of the Public Health Expert Group (PHEG)[[4]](#footnote-4), marking an important step in future action planning.

Recognising the unique impact of CVDs on women, the European Commission has funded the GenCAD (Gender-specific mechanisms in coronary artery disease) project[[5]](#footnote-5), which not only explores the gender-specific mechanisms of these diseases but also provides multilingual fact sheets for both health professionals and the public.

Furthermore, the Schools4Health project[[6]](#footnote-6) involving partners from multiple EU countries, leverages vast expertise in school health and health promotion to extend its benefits EU-wide.

A holistic approach to mental health, which is vital for addressing cardiovascular risk factors, has been outlined in the Commission communication on comprehensive approach to mental health[[7]](#footnote-7). This framework supports Member States in deploying best and promising practices for mental health, which are accessible through the European Commission’s dedicated EU Best Practices Portal[[8]](#footnote-8). A tracking framework[[9]](#footnote-9), published on 13 May 2024, allows for regular updates on implementation of the flagship initiatives of the Communication.

**What more could be done?**

According to the attached concept paper, effectively tackling the escalating crisis of CVDs within the EU necessitates a holistic and well-coordinated strategy. It is vital to develop robust and comprehensive CVH plans at both national and EU levels. These plans could cover all aspects of health management, including prevention, diagnosis, treatment, and rehabilitation, to ensure a continuum of care that addresses the full spectrum of CVH needs.

Central to these CVH plans, as outlined in the concept paper, is the strengthening of public health policies. Such policies should aim to promote healthier lifestyles across all demographics within the EU. This includes implementing comprehensive programmes focused on reducing tobacco and alcohol use and exposure which are two of the most significant risk factors associated with CVD. Additionally, promoting physical activity and advocating for better dietary habits are crucial measures that can significantly reduce the incidence of CVDs. To improve primary prevention, the concept paper recommends comprehensive programmes targeting major lifestyle risk factors. These include reducing tobacco and alcohol related harms, promoting physical activity, advocating for better dietary habits, and improving overall nutrition. Public health campaigns and educational programs should be intensified to raise awareness about the importance of these lifestyle changes in preventing heart disease.

The concept paper also emphasises the importance of enhancing healthcare infrastructure to ensure that every EU citizen, irrespective of their geographic location, has access to quality cardiovascular care. This initiative would involve not only the expansion of existing medical facilities but also the integration of modern healthcare delivery methods such as telemedicine and other digital health services. These technologies are particularly vital in reaching underserved and rural areas, thereby minimizing geographical disparities in healthcare access.

Furthermore, comprehensive screening strategies are essential for early detection of CVDs, which is critical for timely intervention. Screening for cardiovascular risk factors such as high blood pressure, cholesterol, and early signs of heart disease could facilitate earlier diagnosis and treatment, significantly improving health outcomes.

Additionally, rehabilitation after a cardiovascular event is fundamental, involving multidisciplinary teams that provide medical treatment, counselling, psychological support, exercise prescriptions, and educational resources to enhance recovery and reduce recurrence risks. These services should be integrated smoothly from hospital care to community-based support, ensuring patients have continuous access to necessary rehabilitation resources.

Moreover, the issue of common data collection related to CVH is crucial for the effective monitoring and evaluation of strategies. The concept paper recommends creating a ‘European Cardiovascular Health Data Knowledge Centre’ to bring together existing data and initiatives. This centre would provide comprehensive and standardized data to support treatment and care innovation, personalized management, and the enhancement of care delivery through integrated, data-driven care pathways and outcomes measurement, all based on the latest real-world evidence.

In order to keep pace with the increase in CVD, there is a pressing need to foster research and innovation within the field. Increasing funding for cardiovascular research and providing incentives for innovation are pivotal steps that can lead to the development of ground-breaking treatments and technologies. Furthermore, it is crucial to improve the integration of these evidence-based innovations into the healthcare system, ensuring that all patients, regardless of where they live or their economic status, benefit from the latest advancements in cardiovascular care.

Another critical element highlighted in the concept paper involves addressing societal disparities in CVH outcomes where it is feasible. This means specifically targeting interventions to help vulnerable groups who are disproportionately affected by CVD. Tailoring public health interventions to meet the specific needs of diverse populations ensures that no one is left behind in the fight against these life-threatening conditions.

The concept paper further underscores that stemming the tide of CVD in the EU will require a comprehensive approach that incorporates effective public health policies, enhanced healthcare infrastructure, and a strong emphasis on research and innovation.

**Questions for Discussion**

*Delegations are invited to limit their intervention to a maximum of three minutes. (Given the number of questions, please be concise and to the point in your intervention).*

1. In what ways does the burden of CVDs impact your Member State, and what specific challenges do you face in addressing this issue?
2. What support or initiatives could the EU provide or develop further to enhance your Member State's efforts in managing and reducing CVDs?

1. <https://health.ec.europa.eu/non-communicable-diseases/healthier-together-eu-non-communicable-diseases-initiative_en> [↑](#footnote-ref-1)
2. [JA PreventNCD - Reducing Europe's cancer and NCD burden through coordinated strategies on health determinants. Focusing on effective policies, societal and personal risk factors.](https://www.preventncd.eu/) [↑](#footnote-ref-2)
3. https://jacardi.eu/. [↑](#footnote-ref-3)
4. Established by Commission Decision of 7.12.2022 setting up a Commission expert group on public health and repealing Commission Decision setting up a Commission expert group ‘Steering Group on Health Promotion, Disease Prevention and Management of Non-Communicable Diseases’. [↑](#footnote-ref-4)
5. <https://health.ec.europa.eu/system/files/2017-11/2017_gencad_gendercoronaryarterydisease_flyer_en_0.pdf> [↑](#footnote-ref-5)
6. <https://schools4health.eu/> [↑](#footnote-ref-6)
7. <https://health.ec.europa.eu/publications/comprehensive-approach-mental-health_en> [↑](#footnote-ref-7)
8. [Best practices Portal (europa.eu)](https://webgate.ec.europa.eu/dyna/bp-portal/) [↑](#footnote-ref-8)
9. https://health.ec.europa.eu/document/download/6317c605-5f5d-4d4f-9c8a-d5c93e869814\_en?filename=ncd\_tracking-framework-mh\_en.pdf [↑](#footnote-ref-9)