Chronic non-communicable diseases (NCDs) account for 86% of deaths in the WHO European Region. They are the number one killer in Europe, as 9 out of 10 people die of a chronic disease. Major chronic diseases include cardiovascular diseases, cancer, respiratory diseases, diabetes, allergies, hypertension, kidney and liver diseases.

In Europe, 77% of the total disease burden (measured in DALYs) is accounted for by chronic diseases and 60% of the disease burden is due to common risk factors, including tobacco, poor diet, alcohol, environmental factors and lack of physical activity.

In OECD countries, on average only 3% of total health expenditure goes towards population-wide public prevention and 97% of health expenses are spent on treatment. It is estimated that chronic diseases cost the EU economy € 700 billion annually. By investing additional funds in prevention the EU can promote good health for its citizens and reduce the socio-economic burden of chronic diseases.

ECDA MANIFESTO

COMMON SENSE ON CHRONIC DISEASES

PATIENTS AND HEALTHCARE PROFESSIONALS
UNITE TO CALL FOR A COMPREHENSIVE EUROPEAN FRAMEWORK ON CHRONIC DISEASES BY THE END OF 2017

ECDA CALLS ON THE EUROPEAN UNION TO DEVELOP BY THE END OF 2017 A COMPREHENSIVE EUROPEAN FRAMEWORK ON CHRONIC DISEASES.

For decades, the EU has been addressing risk factors common to all NCDs. This approach has proven to be insufficient as **NCDs remain the N°1 killers in Europe** as well as one of the **primary causes of health expenditure**. At the same time, some EU disease-specific strategies (e.g. cancer and HIV/AIDS) have been implemented and the extremely positive outcomes of such enhanced framework are widely recognised.

Further to the policy and legal framework that has emerged from the UN Political declaration on the Prevention and Control of NCDs adopted in September 2011 and the related European Parliament's Resolution of 15 September 2011, **the EU has a fundamental duty to establish a strategy and create a European Framework for Chronic Diseases** to address them in a holistic manner.

A comprehensive European Framework for Chronic Diseases will contribute to achieving the best outcomes for the health and wealth of the EU and its citizens. It will leverage the EU and Member States' regulatory competences and resources in all policies.

Most chronic diseases are largely preventable and many of their complications can either be prevented or delayed. Yet, chronic diseases impose a huge socio-economic toll on European citizens and costs of treatment and care are unsustainable for European healthcare systems.

This is why 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. The Framework also needs to address screening and earlier diagnosis. It needs to emphasise the crucial importance of multi-disciplinary management of chronic diseases such as long-term follow up and investment in research. Keeping the patients at the centre and healthcare professionals involved in all policy initiatives is essential to ensure that real needs are addressed.

A European Framework on Chronic Diseases must:

1. **Include the targets set out in the WHO Global Non-Communicable Disease Monitoring Framework** as well as key measures to reduce chronic diseases listed in existing EU documents and policy recommendations at global level. These commitments have been echoed in the recently adopted UN Sustainable Development Goal proposals (July 2014) whereby Goal 3.4 states "*by 2030 reduce by one-third pre-mature mortality from non-communicable diseases (NCDs) through prevention and treatment, and promote mental health and wellbeing*".

2. **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; prioritise legislative approaches over self-regulatory approaches to ensure equality across the EU.

3. **Incorporate interventions on other health determinants** such as harmful exposure to various environmental factors, and socio-economic gradients.

4. **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.

5. **Improve and strengthen cooperation among all stakeholders**, including health authorities, insurers, health professionals, researchers, trade unions, employers and patients to streamline their efforts

and improve health services to respond to the growing burden of chronic diseases, demographic changes and the ageing population and the increasing prevalence of co-morbidities.

6. **Encourage citizens to make healthy choices** and build an environment that promotes health and individual responsibility.

7. **Set up EU registries for incidence, prevalence and health outcomes.** Policy makers and stakeholders must understand the scale of the problem and need quality data that are comparable.

8. **Address any persisting health inequalities** such as through awareness-raising on patient rights in cross-border healthcare in line with Directive 2011/24/EU.

9. **Identify gaps in research** such as on shared risk factors and co-morbidities, and overcome existing fragmentation and duplication of research in Europe.

The **European Chronic Disease Alliance** (ECDA) is a coalition of European health associations sharing the same interests in combating preventable chronic non communicable diseases (NCDs), through European public health policies. ECDA is 11 European health organisations representing millions of chronic disease patients and over 200 000 health **professionals**.

ECDA's mission is to reverse the alarming rise in chronic diseases by providing leadership and policy recommendations based on contemporary evidence.

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