



EUROPEAN COMMISSION  
DIRECTORATE-GENERAL FOR HEALTH AND FOOD SAFETY

Public health  
Health promotion, disease prevention, financial instruments

## Healthier Together – EU NCD Initiative

The EU NCD Initiative addresses five strands: a) cardiovascular diseases, b) diabetes, c) chronic respiratory diseases, d) mental health and neurological disorders, e) health determinants.

Contribution from health stakeholders is essential to gather:

1. **priorities for action** in each of the above-mentioned strands;
2. **examples of effective policies, best practices, promising approaches**, innovative actions (to be put for consideration of Member States) to effectively address priorities;
3. the **field of work of stakeholders** and actions that stakeholders can do in collaboration with public health authorities and other parties.

Stakeholders may also wish to provide general comments (on the structure of the approach, information gaps, recommendations for better supporting stakeholders, etc.).

### How to contribute

You can provide input –or revise and add to your previous input– at any time until the end of the drafting process of the EU NCD Initiative, expected by June 2022.

However, contributions will be particularly appreciated before the webinars, to feed the debate.

When you are ready to do so,

1. Download the document from the Health Policy Platform;
2. Introduce your input; please be concise;
3. Save and send the document to [contact@euhealthsupport.eu](mailto:contact@euhealthsupport.eu);
4. Revise and resend the document in case you wish to update your input. The previous version will then be replaced.

We may contact member of the Health Policy Platform NCD Stakeholder Group for clarifications. Unless you disagree, responses will be uploaded to the Health Policy Platform and thus readable by other network members. For that reason, please do not include personal information (e.g. names and contact details) in your document.

### Calendar

#### Stakeholders' webinars

- 3 February
- 17 March
- 27 April
- 3 June

#### Member States' webinars

- 28 January
- 3 March
- 8 April
- 19 May

You will receive a notification when new materials are available at the Health Policy Platform, including summaries and drafts of the EU NCD Initiative and/or new questions for stakeholders.

[https://ec.europa.eu/health/non\\_communicable\\_diseases/overview\\_en](https://ec.europa.eu/health/non_communicable_diseases/overview_en)

## Stakeholder input

1. Please provide the **name of the organisation** you represent.\*

*Individual names will not be disclosed; the list of responding organisations may be published.*

### European Alliance for Cardiovascular Health (EACH)

*Input will be considered from organisations listed in the EU Transparency Registry and granted access to the EU NCD Initiative Stakeholder Network at the Health Policy Platform.*

2. On which strands of the EU NCD Initiative would you like to comment? Please select all that apply.

- Health determinants
- Cardiovascular diseases
- Diabetes
- Chronic respiratory diseases
- Mental health and neurological disorders

*You can then fill in the relevant sections below. If you only fill in one section, please add any general comments you may have in the closing section.*

## Cardiovascular diseases

1. Please indicate your **priorities for EU-supported action** in this strand.

*Please select up to five priorities and be as specific as possible.*

*You may provide a short clarification on why these priorities rank high and add relevant links (e.g. scientific literature, reports of reference institutions, policy documents).*

	Priorities	Rationale	References
1	<b>Develop a dedicated EU Cardiovascular Health Plan</b>	Cardiovascular diseases (CVDs) <sup>1</sup> remain the leading cause of death in Europe, further compounded by the COVID-19 pandemic. Affecting over 60 million people in the EU, regardless of their age, gender or location, CVDs heavily impact society, economy, and people's well-being.  A dedicated Cardiovascular Health (CVH) Plan is vital to address Europe's biggest health challenge and number one killer and to achieve the outcomes the EU Institutions, national governments, the scientific community, civil society and most notably patient organisations aspire to.	The European Alliance on Cardiovascular Health (April 2022), <i>A European Cardiovascular Health Plan: The need and the ambition</i>

<sup>1</sup> Cardiovascular diseases is a vast group of disorders, all related to the heart and circulatory (vascular) system, including stroke, with a high prevalence of morbidity and mortality in the EU.

		<p><b>A European Cardiovascular Health Plan should aim at:</b></p> <ul style="list-style-type: none"> <li>➤ reducing premature and preventable deaths in Europe from CVD related causes by one third by 2030, in line the Sustainable Development Goal Target 3.4</li> <li>➤ improving access for all to evidence-based and high quality cardiovascular risk assessment throughout the life course</li> <li>➤ improving access to high quality, multi-disciplinary and patient-centered care pathways for all patients in Europe.</li> </ul> <p>A European CVH plan should therefore <b>focus on</b> and establish specific targets for:</p> <ol style="list-style-type: none"> <li>1. primary prevention at population level</li> <li>2. improvements in secondary prevention through early detection, early and appropriate intervention and effective management, including a focus on maximising adherence to medical direction, in organised, quality-assured and properly resourced pathways</li> <li>3. equal access to high quality, multi-disciplinary and patient-centered healthcare in modernized patient pathways with effective and user-friendly innovations for long term care</li> <li>4. increased uptake of rehabilitation</li> <li>5. improvements in quality of life and other patient reported outcomes in cardiovascular disease.</li> </ol> <p>The EU CVH Plan should be complemented by an EU CVH research Mission to drive a dedicated CVH research and innovation agenda in areas with unmet needs, leveraging existing funding instruments and public-private partnerships, such as the Innovative Health Initiative.</p> <p>We believe that for a CVH plan of this magnitude to achieve its vision, all actions must be underpinned by multi-stakeholders' collaboration. Meaningful involvement of all relevant stakeholders is crucial to ensure that innovations and the future transformation of healthcare systems swift their focus from disease</p>	
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		<p>care to health care and well-being for all at all ages.<sup>2</sup></p> <p>Sufficient funding for cardiovascular projects is equally important to improve CVH for all. Already, there are numerous funding sources, such as EU4Health, Horizon Europe and the Innovative Health Initiative, the Cohesion Fund, the Recovery and Resilience Facility, that can be channelled towards CVH. There should be a consolidated “one stop shop” for CVH stakeholders interested in contributing to implementing the Plan, to understand prospective partnership opportunities and timelines and how these contribute to the overall vision of the Plan.</p> <p>The EU CVH Plan will have a trickle-down effect for the creation of <b>national CVH plans</b>, complementary to national NCD or disease-specific plans (where those exist) and tailored to national contexts and needs.</p>	
2	<p><b>Establish an EU Joint Action on Secondary Prevention through early detection, targeted screening and diagnosis: “European Cardiovascular Health Check”</b></p>	<p>A dedicated EU4Health funded Joint Action on Secondary CVD Prevention should aim to improve cardiovascular health of all people by improving timely access to detection, targeted screening and diagnosis to enable early intervention, treatment and care.</p> <p>As defined by WHO, secondary prevention includes early detection, <b><i>comprising activities such as evidence-based, targeted screening of at-risk populations</i></b> to enable early detection of diseases or for prevention of congenital malformations and preventive drug therapies of proven effectiveness when administered at an early stage of the disease.</p> <p>Current evidence suggests that evidence-based, targeted case-finding in selected settings and to specific population groups known to be at high risk, are more likely to be effective for reducing CVD. Such specific at risk population groups could include people who could have genetic predisposition or metabolic disorders (including people with inherited conditions such as familial hypercholesterolaemia or other dyslipidaemias), people who may develop age-related cardiovascular disease linked</p>	<p>EACH Proposal for a Joint Action on secondary prevention (October 2021): <a href="#">EACH-Proposal-EU4Health-21Oct2021.pdf (cardiovascular-alliance.eu)</a></p> <p>EACH CVH Plan Proposals (April 2022)</p> <p>Screening. When is it appropriate and how to get it right? Policy Brief 35 by the European Observatory on Health Systems and Policies, WHO Regional Office for Europe; 2020</p>

<sup>2</sup> The new Innovative Health Initiative is providing fertile ground for this, but true multi-stakeholder/Public Private Partnerships and shared leadership must pervade other programs and structures to address the burden of CVD, overcome treatment bottlenecks, and positively influence population health.

		<p>to functional decline, and patients with comorbidities.</p> <p>A dedicated Joint Action on secondary prevention would support exchange of best practice, the development of guidelines, and allow for testing and piloting new and innovative approaches towards improving early detection and find most appropriate approaches bearing in mind the individual needs of people.</p> <p>To be effective, any secondary prevention programmes must form a pathway that is evidence-based, targeted, organised and quality-assured with substantial resources - including financial, human and technological resources - across the pathway, and with the engagement of multiple organisations both within and beyond the health system.</p>	
3	<p><b>Establish a European Cardiovascular Health Data Knowledge Centre, facilitated by the creation of a Cardiovascular Health observatory</b></p>	<p>Echoing policy developments in the framework of the European Health Data Space, the creation of a “European Cardiovascular Health Data Knowledge Centre” will ensure appropriate infrastructure, interoperability, data protection, security and stewardship. It should connect existing registries, electronic health record platforms, patient and citizens’ generated data and related initiatives in CVD in one large-scale action. Current fragmentation, significant gaps in comparable CVD data and lack of connectivity across the spectrum of CVD and related conditions should be addressed.</p> <p><b>A European Cardiovascular Health Data Knowledge Centre</b> should aim for better collection of comprehensive and standardised cardiovascular data to:</p> <ul style="list-style-type: none"> <li>• support research and innovation that improves patient-relevant outcomes and quality of life,</li> <li>• support patient-centred and value-based regulatory and political decision-making,</li> <li>• drive investments in better quality prevention, risk stratification and treatment,</li> <li>• develop integrated data driven care pathways focusing on the needs and desired outcomes of the patient,</li> <li>• improve patient access to quality and long-term cardiovascular care,</li> <li>• facilitate the dissemination of high-quality evidence coming from patient groups, which play a crucial role in terms of information sharing</li> </ul>	<p>EACH CVH Plan Proposals (April 2022)</p>

		<p>as well as offering social support for people diagnosed with and living with particular cardiovascular conditions.</p> <p>The <b>CV Health Observatory</b> would capture important developments across the spectrum of cardiovascular health in Europe, highlighting beacons of excellence, good practices and specific methodologies on how these could be replicated, scaled and integrated into member states' national CVH action plans.</p>	
4	<b>A digital transformation incubator</b>	<p>The COVID-19 pandemic led to increased use of digital health tools and remote services to replace, or at least to support, the traditional face-to-face interaction between patients and clinicians, out of need to avoid infections.</p> <p>Prompted by the digital transformation of services and healthcare systems, a dedicated action on cardiovascular health should strengthen out-patient care, including rehabilitation services, to improve patient reported outcomes and quality of life.</p> <p>The EU NCD Initiative should place digital transformation potential to improve CV Health more at the centre to spur investments through existing funding instruments such as the Innovative Health Initiative, EIT Health, EIC Accelerator, Digital Europe, and the EIB Incubation Facility.</p>	EACH CVH Plan Proposals (April 2022)
5	<b>Support national awareness raising campaigns and national educational activities in cardiovascular health</b>	<p>The EU can play a critical role in improving public awareness of cardiovascular health by supporting at member states level:</p> <ul style="list-style-type: none"> <li>➤ all relevant actors, including governments with the support of stakeholders, to conduct public awareness raising campaigns aimed at improving public perception on cardiovascular health</li> <li>➤ all relevant national, regional and local actors to develop educational activities aimed at improving cardiovascular knowledge of healthcare professionals in primary and secondary care.</li> </ul> <p>Public awareness campaigns and targeted educational activities will be amplified if they are part of national cardiovascular health plans.</p>	EACH CVH Plan Proposals (April 2022)

2. Please provide your selection of **effective policies, best practices, promising approaches** and innovative actions (to be put for consideration of Member States) to effectively address the priorities.

*Please list up to ten suggestions and be as specific as possible.*

*You may provide a short clarification on why these suggestions rank high and add relevant links (e.g. scientific literature, reports of reference institutions, policy documents).*

*Please indicate if the action has been evaluated or piloted, whether there is information on (cost-)effectiveness, or why it should be tried as a novel option with high impact.*

	<b>Effective policies, best practices, promising approaches or innovative actions</b>	<b>Rationale</b>	<b>References</b>
1	EACH Partners have listed best practices, effective policies in their individual contributions.		
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3. What could be **role of stakeholders** for achieving the priorities, and the actions that the stakeholders can/should lead and can/should do in collaboration with public health authorities?

*Please list up to five suggestions and be as specific as possible.*

*You may provide a short clarification on why these suggestions rank high and add relevant links (e.g. scientific literature, reports of reference institutions, policy documents).*

	<b>Roles</b>	<b>Rationale</b>	<b>References</b>
1	For all confirmed Healthier Together priorities that are relevant or specific to cardiovascular diseases, EACH partners stand ready to collaborate with and support policy makers and public health authorities to identify and co-create policy initiatives. By leveraging the Alliance's broad range of patient, charity, healthcare professional, health institution, insurance fund and industry expertise, <b>EACH will serve as the reference contact point for making this vast</b>	<p>The European Alliance for Cardiovascular Health (EACH) brings together leading European and international organisations around joint activities to promote cardiovascular health as a policy priority at EU level.</p> <p>Representing a vast network at EU level, with strong national constituencies across the cardiovascular care spectrum, EACH can provide strong input into setting EU policy priorities in terms of cardiovascular health.</p>	<a href="http://cardiovascular-alliance.eu">Homepage - EACH (cardiovascular-alliance.eu)</a>

	<b>stakeholder expertise available to those developing and implementing the Healthier Together actions.</b>		
2	<b>EACH covers all aspects of cardiovascular care:</b> from the patients who suffer from the disease to the clinicians and health professionals who take care of them, from health insurers to research organisations, and industries that develop the medical and technological innovations to improve the management and care of CVD, and advance cardiovascular health in Europe	EACH brings together all relevant stakeholder of the cardiovascular healthcare ecosystem <b>to implement projects, policy priorities, tracking and reporting progress</b>	<a href="https://partnersarchive.euro.who.int/partnersarchive/each">Partners Archive - EACH (cardiovascular-alliance.eu)</a>
3	<b>EACH as facilitator and amplifier of national action.</b>	Every partner of EACH has a widespread network and reach out at national level. EACH could play an amplifying effect to spearhead action on CV health at national level through national CVH plans, but also by supporting the development and implementation of concrete actions and projects financed by EU4Health and other instruments supporting the implementation of the EU Healthier Together Initiative.	<a href="https://partnersarchive.euro.who.int/partnersarchive/each">Partners Archive - EACH (cardiovascular-alliance.eu)</a>

## Closing section

- You may wish to add other comments (e.g. on the structure of the approach, information gaps, recommendations for better supporting stakeholders).

<p><b>Comments</b> <b>(maximum 500 words)</b></p> <p>EACH partners see the great potential of the EU NCD Initiative to contribute, through the lens of NCDs, to health systems' strengthening and resilience, whilst addressing profound health inequalities within and across EU countries.</p> <p>The latest discussion paper on moving forward on "Healthier Together" underlines how critical it is to prevent the onset and progress of CVD, population-wide interventions, secondary prevention approaches and programmatic screening of specific groups. Given the enormous burden of cardiovascular diseases on patients, on people, and on European societies and economies, the EU Initiative should be complemented by a <b>dedicated Cardiovascular Health Plan and Research Mission</b> to address Europe's biggest health challenge and number one killer.</p> <p>EU4Health funding should be significantly expanded beyond the current EU Joint Action on Cardiovascular Diseases and Diabetes in order to contribute to the Sustainable Development Goals to reduce by one third <b>premature and preventable deaths in Europe from CVD related causes by 2030.</b></p>
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Please check the boxes that apply:



- I agree that a PDF of this document is uploaded to the Health Policy Platform NCD Stakeholder Group
- I confirm that the document does not include personal information (e.g. names and contact details)

**Thank you for your contribution**