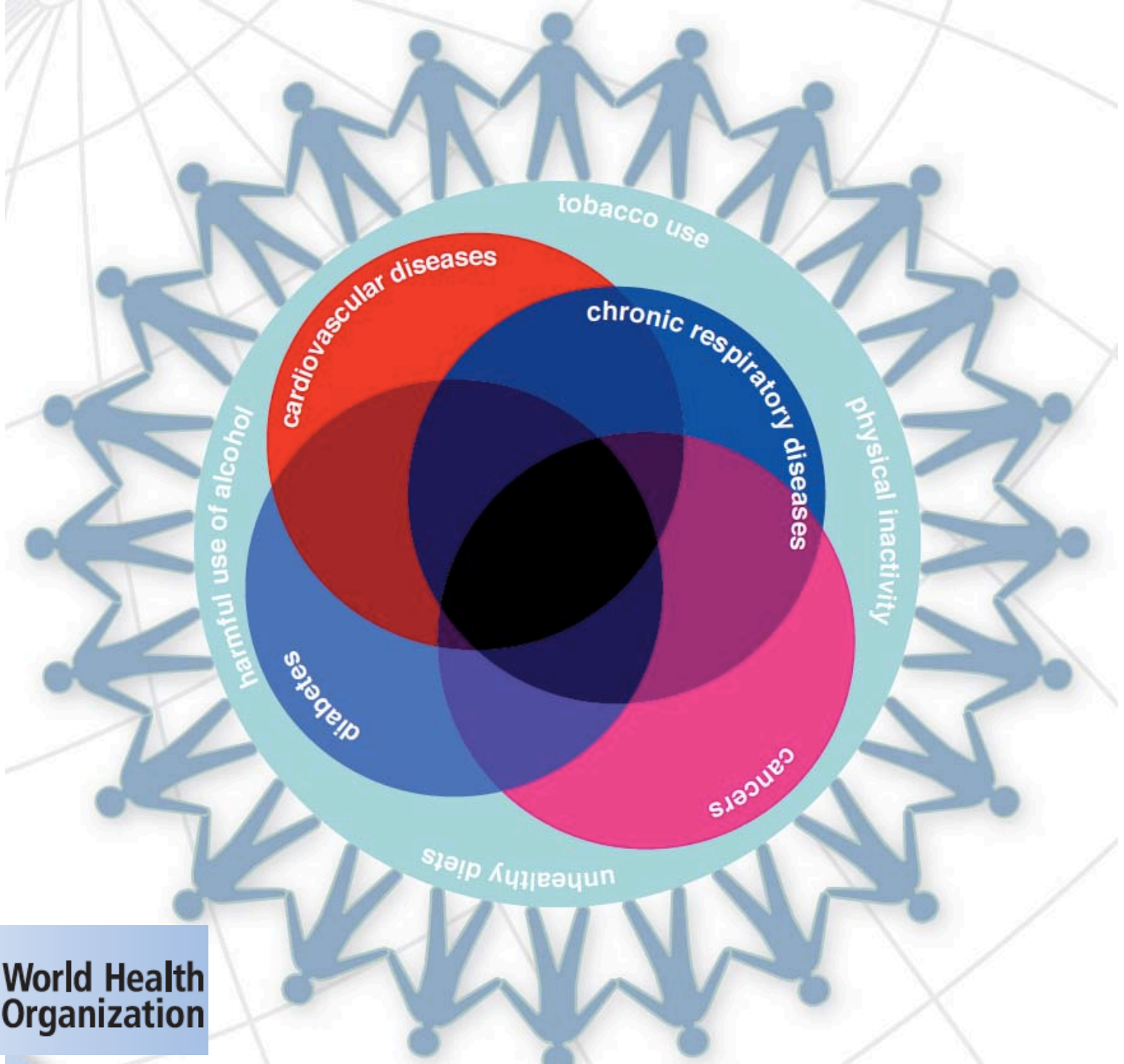


ERS: Roadmap e COPD audit

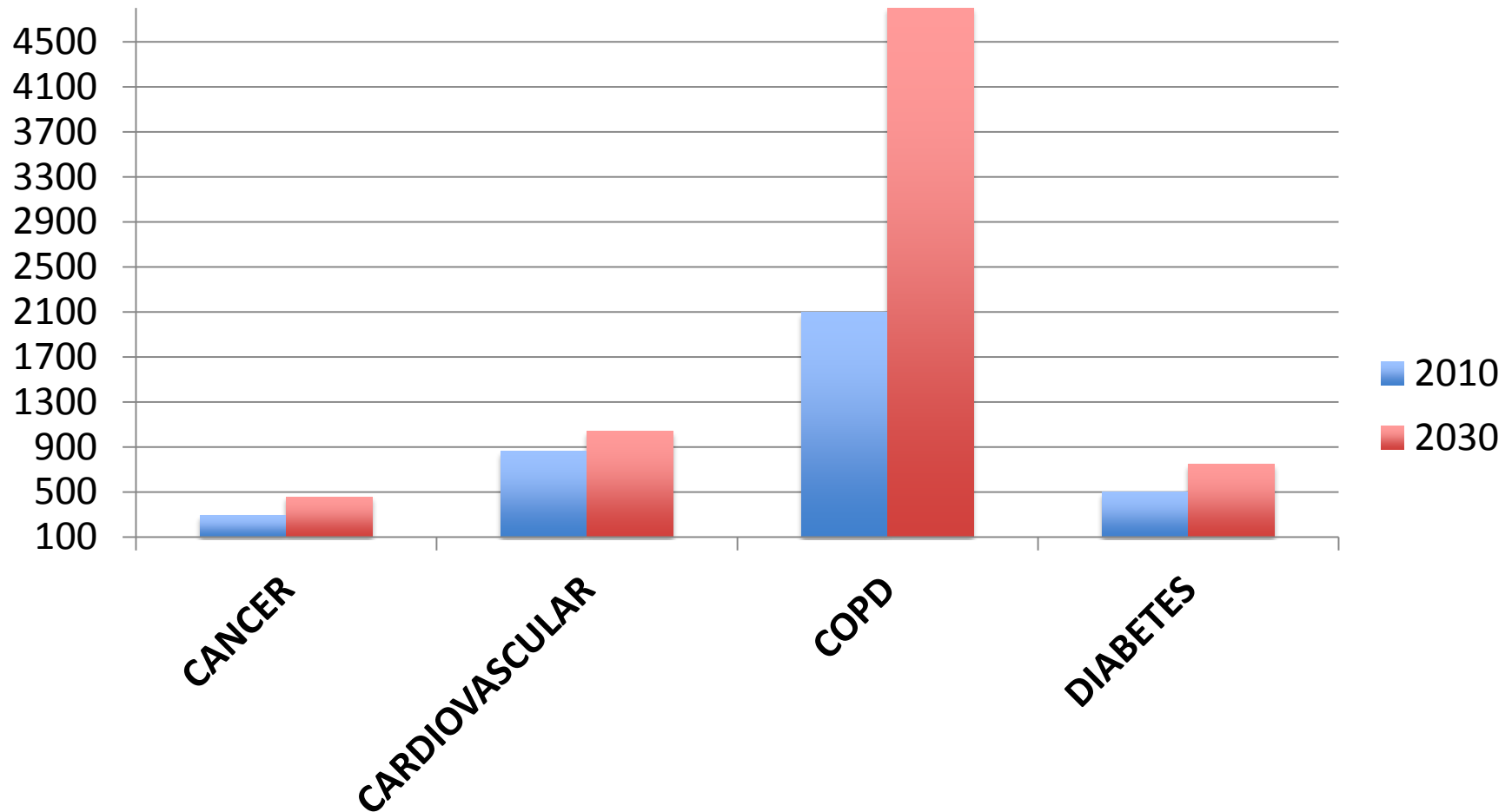
F. Blasi, Milano
ERS President elect



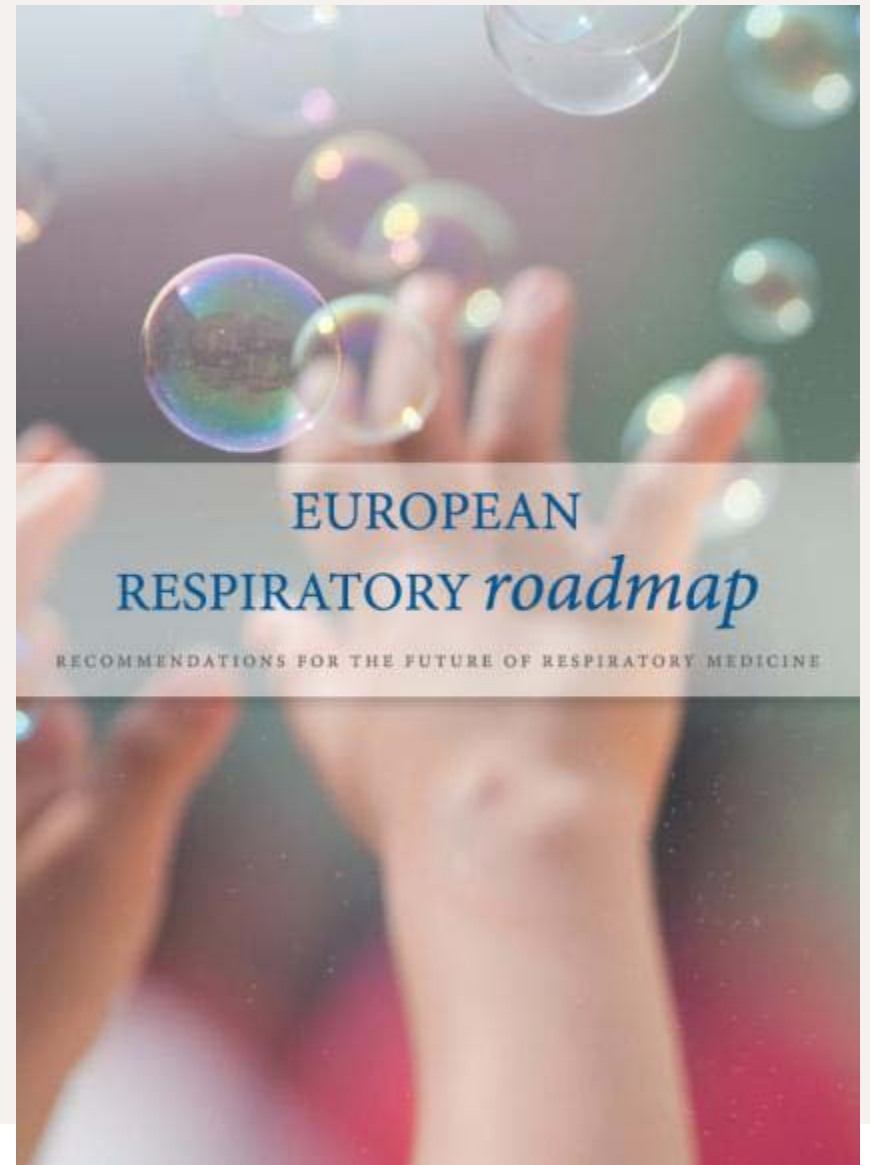
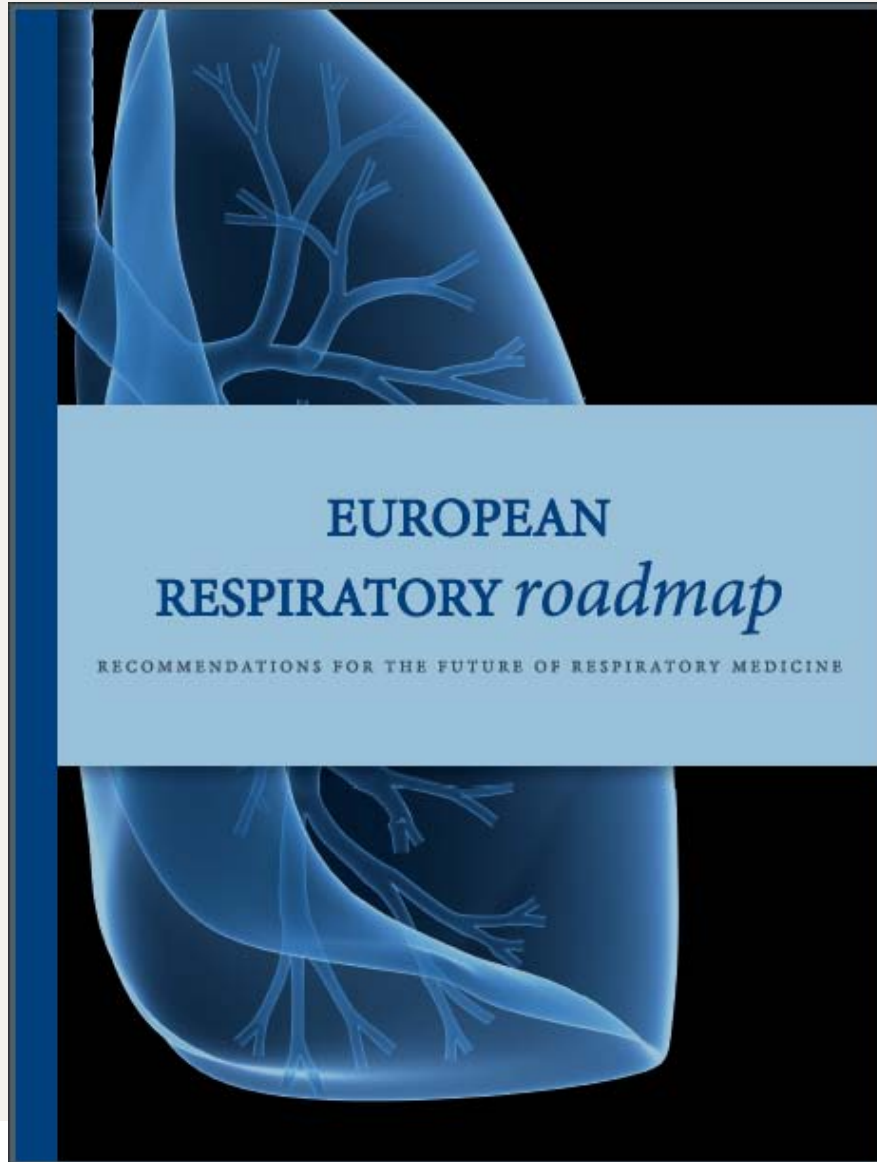
**World Health
Organization**

Cost-of-illness approach: estimates of direct and indirect costs of ill health

US\$ BILLIONS



Bloom, D.E., et al.. (2011). The Global Economic Burden of Non-communicable Diseases. Geneva: World Economic Forum. www.weforum.org/EconomicsOfNCD



LAUNCH

- **European Parliament, Brussels**
- **September 6th 2011**
- **Hosted by Catherine Stihler, MEP**



PREVENTION

- Reduce **inequalities** between countries
- Reduce exposure of children to **intra-uterine** and **secondhand smoke**
- Reduce **urban** air pollution
- Improve **indoor** air quality
- Manage consequences of **natural events** (volcano eruptions, tsunami's and floods, and climate change)



RESEARCH

- **At the verge of formidable breakthroughs**
 - Boosting host defense and innate immunity
 - Personalised care for lung cancer
 - Innovative approaches for restoring pulmonary function¹
 - Better translation of research findings into clinical practice²
- **Only 9 new molecules in the last 40 years**
 - Public-private partnerships (IMI)³
 - Collaboration Industry-Innovative Academic centers

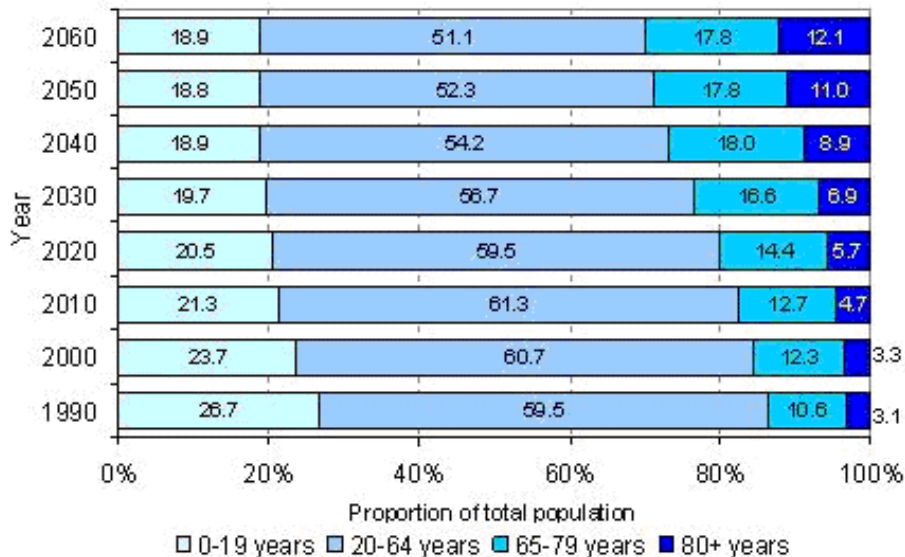
1. Time magazine, December 2010. Best innovations of 2010.

2. Macklem PT. Am J Respir Crit Care Med 2004; 169: 438-439.

3. Kamel N et al. Eur Respir J 2008; 31: 924-926.

CLINICAL MEDICINE

- Costs of health care **10.5 %** GDP in the EU
- Forecasted to be **16%** by 2020
- Shortage of health care workers of **1,000,000**, leaving up to **15%** of care uncovered, by 2020
- **Quality** effective by avoiding catastrophic events resulting from poor quality



Division of European Union population by age group. European Commission. Demography Report, Report 2010

EDUCATION

- Improving standards by **harmonisation** (HERMES)
- **Innovative modalities** such as e-learning and skills labs
- Physician and patient **mobility**
 - by 2015, 11.2% of retired UK population abroad¹



EUROPEAN LUNG FOUNDATION



**Bringing together: patients, public
and professionals**

“ Working in partnership for lung health ”

TRANSLATING, DISSEMINATING AND ADVOCATING THE WORK OF ERS TO LAY AUDIENCE



The screenshot shows the ELF website interface. At the top, there are language selection flags and navigation links for 'Glossary', 'Contact', and 'Accessibility'. The main header features the ELF logo and the text 'EUROPEAN LUNG FOUNDATION'. Below this, a paragraph states: 'Lung diseases are the leading cause of death and disease in Europe and throughout the world. Anyone can be affected by lung diseases, not just smokers. Lung diseases impact on almost every family in Europe.' A grid of six categories is displayed: 'Lung Diseases', 'Smoking Cessation', 'Health Risks', 'Factsheets', 'Science Update', and 'Air Travel Database'. A 'Latest news updates from around the world...' section highlights a headline: 'Smoking increases heart risk more in women than men', with a sub-headline: 'Women who start smoking have a higher risk of a heart attack than men, according to new research.' Below this, there is a link for 'More...' and another headline: 'Withdrawal of CPAP treatment results in a rapid return of sleep apnoea symptoms'. The right sidebar features a search bar, a 'Working in partnership with the ERS' logo, and a 'Latest factsheet: Living an active life with COPD' link. At the bottom of the sidebar, there is a question box: 'Do you have a question relating to this factsheet that you would like answered by an ERS expert?' with a 'Send us your questions' button.

- News, press, social media for ERS
- Public awareness campaigns
- Dissemination of EU projects
- Patient versions of ERS guidelines
- Range of 30 patient factsheets
- Website in 8 European languages

LISTENING TO, INVOLVING AND ENGAGING PATIENTS IN THE LIFE OF ERS



- Identifying patient organisations in Europe
- Patient Advisory Committee
- Developing patient pool to input into ERS
- Patient village at ERS Congress
- Patient-orientated symposia at ERS Congress
- Patient input into ERS guidelines

COPD NEEDS TO BECOME A PRIORITY FOR EUROPE

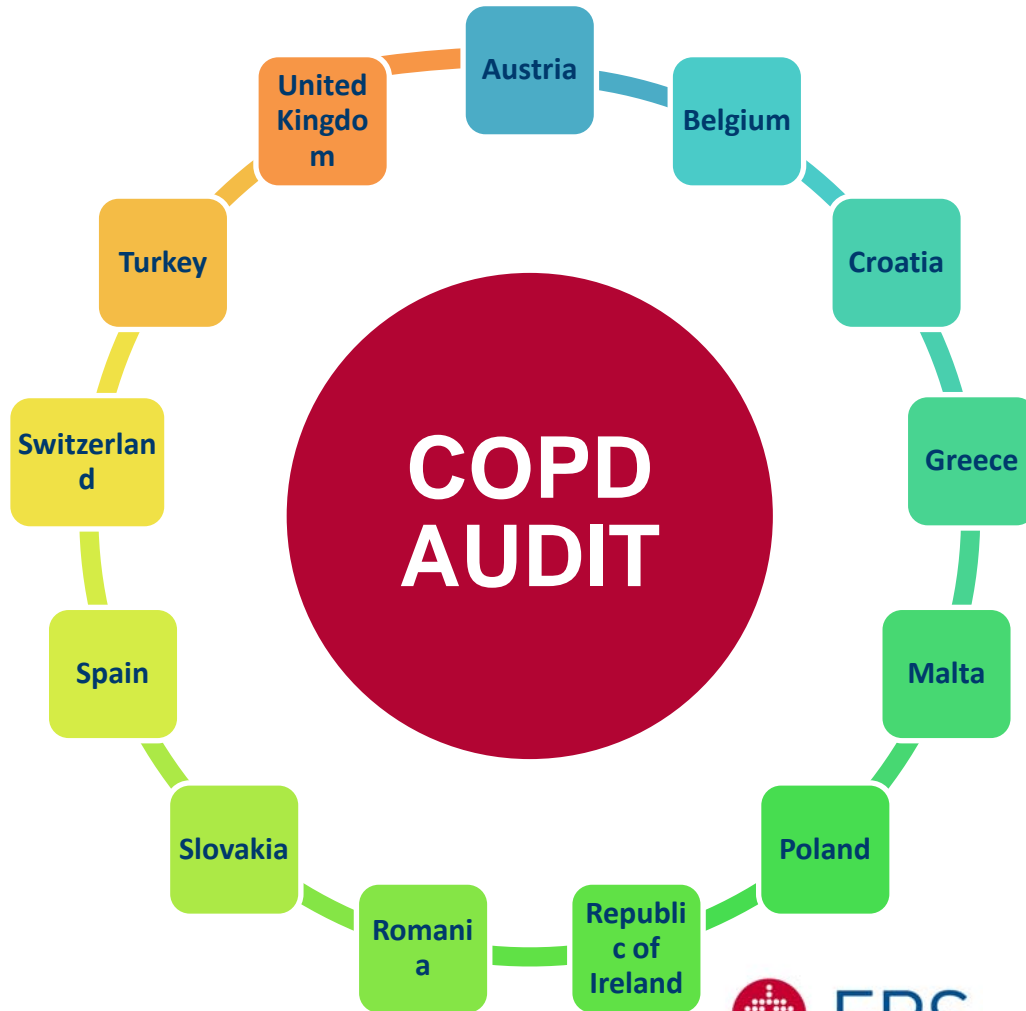
- **Prevalence varies in EU from 4-10% of the adult population**
- **75% of COPD cases in the general population remain undiagnosed**
- **Death of min. 300,000 Europeans each year**
- **Leading healthcare cost, with productivity losses due to COPD amounting to €29.5 billion annually**
- **Only major cause of death whose incidence is on the *increase***

OBJECTIVES

- **Raise the standards for COPD**
- **Provide guideline developers with clinical cases and information on organisation of care**
- **Develop educational resources, from good and poor examples, to improve clinical practice**
- **Develop numerous research elements**
- **Promote respiratory medicine in Europe and beyond**

THE ERS COPD AUDIT

REDUCING INEQUALITIES IN COPD CARE ACROSS EUROPE

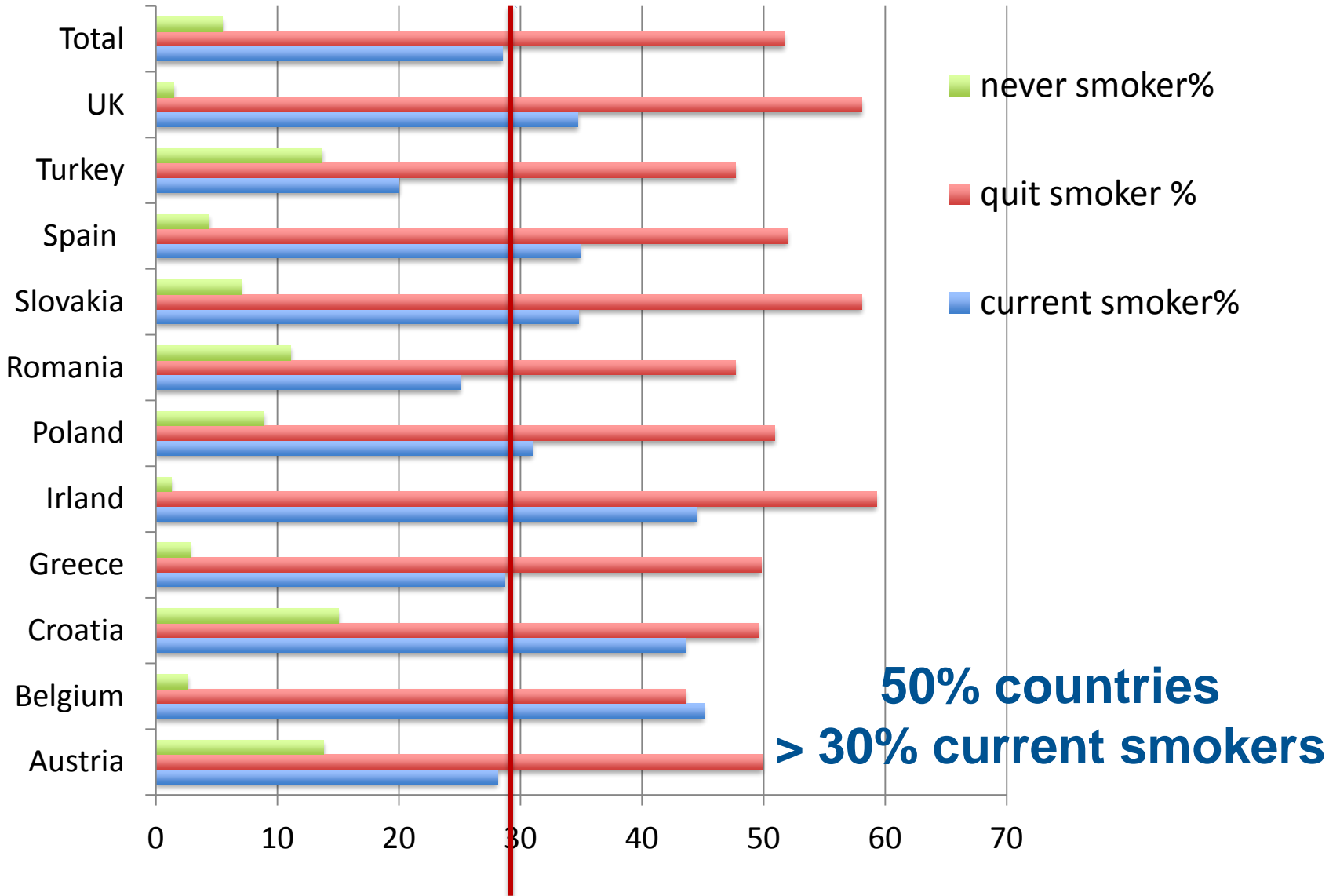




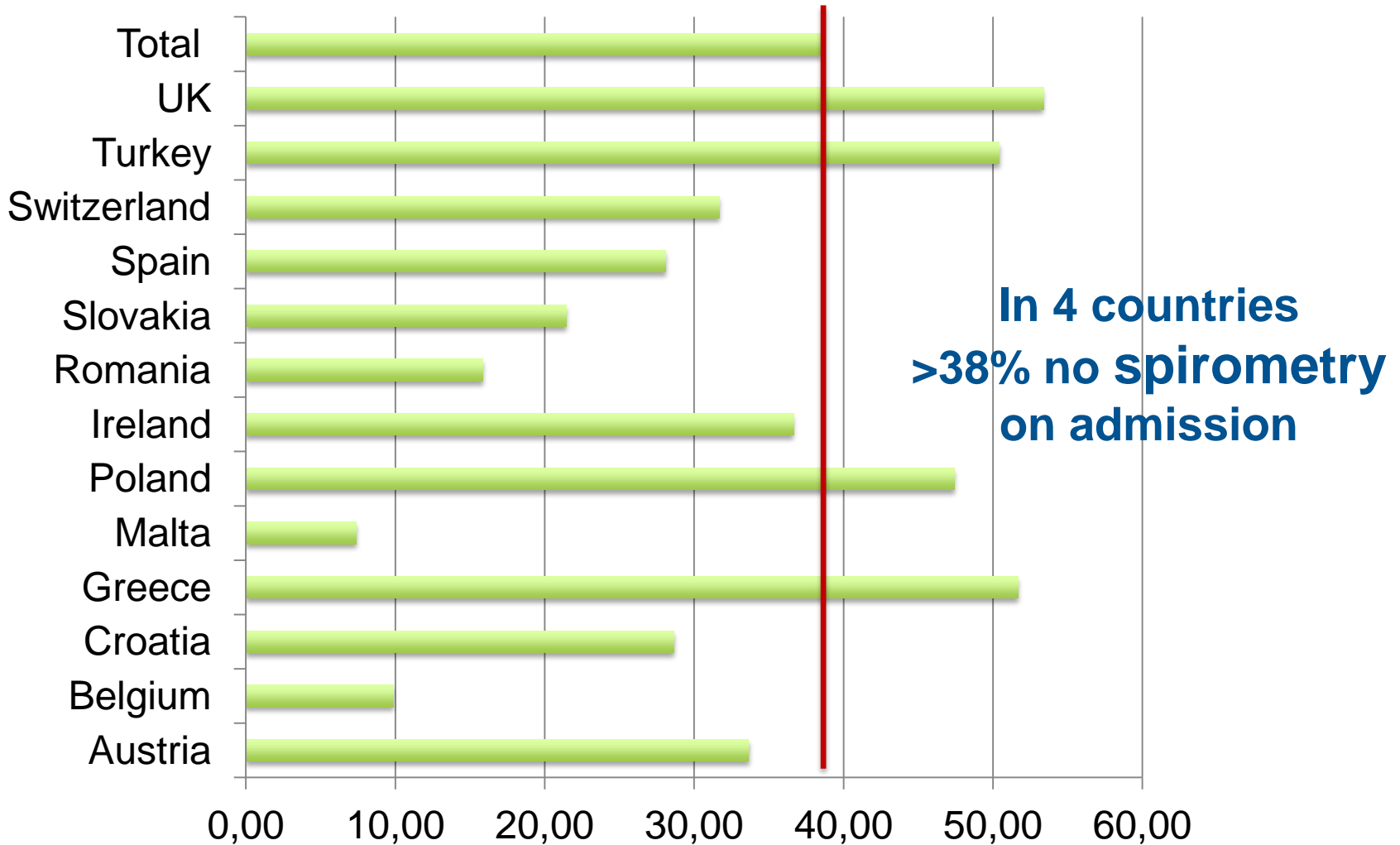
ERS

copd audit

SMOKING STATUS ON ADMISSION



NO SPIROMETRY ON ADMISSION



Factors associated to outcomes

Clinical practice variability:

Variability in clinical presentation

Variability in response to treatment

Adaptation to guidelines to local clinical reality

Health care expenses increase

Ageing of population

Health care systems traditionally focused on acute pathologies

Fragmentation of health care (Primary, secondary, tertiary care, ...)

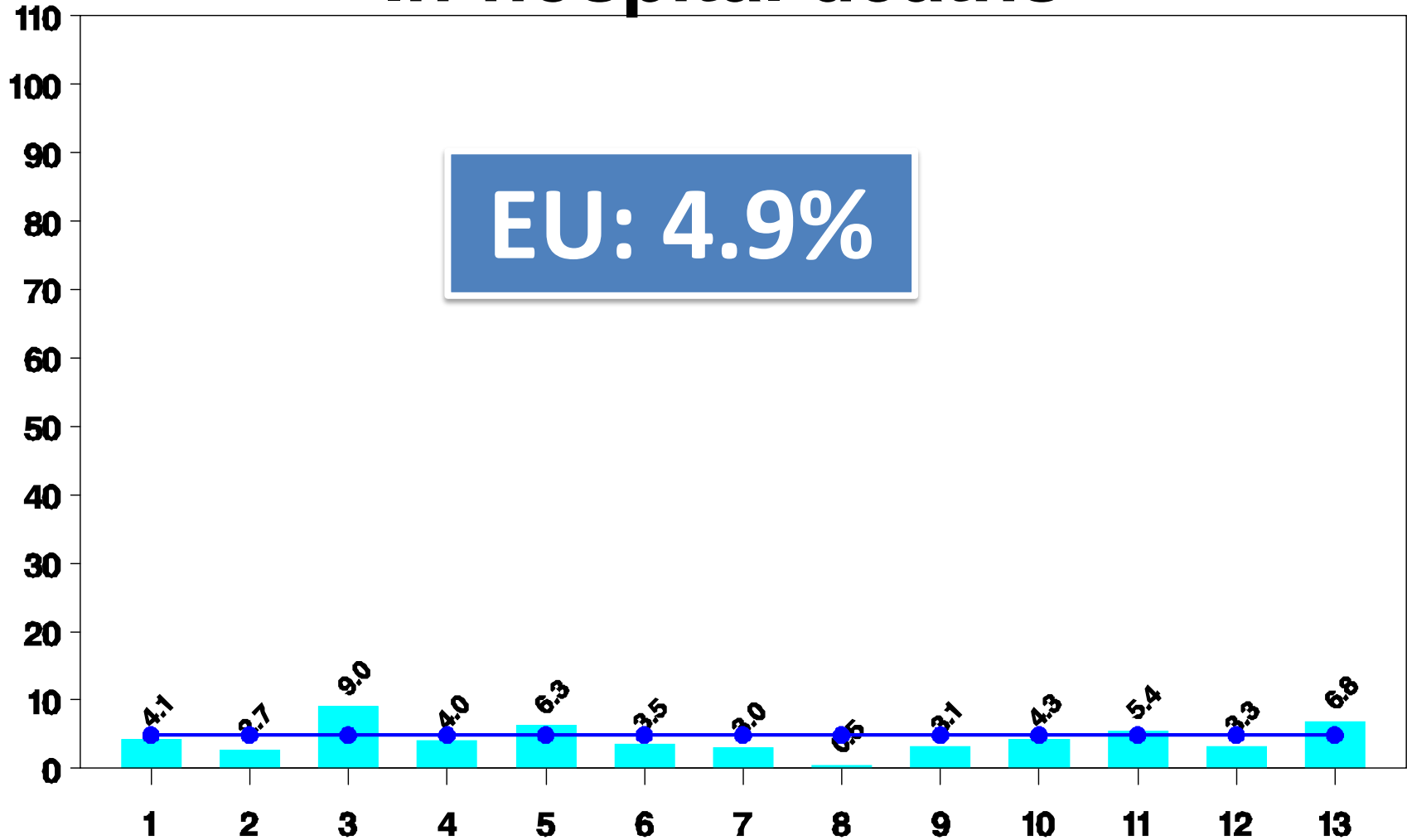
CAUSES OF HEALTH INEQUALITIES

- Funding direct to health care
- Access to health care
- Socio-economic class
- Education
- Ethnicity
- Age
- Environment

Quality of health care delivered to the patient



In-hospital deaths





Organisational factors associated to in-hospital mortality

Variables	Crude OR
Number of respiratory specialists	0.98 (0.97 – 0.99)
Number of respiratory trainees	0.98 (0.97 – 0.99)
Number of physiotherapists	0.96 (0.93 – 0.99)
% seen by respiratory specialist	0.996 (0.994 – 0.999)
University hospital	0.80 (0.69 – 0.92)
Hospital with ICU	1.86 (1.24 – 2.7)
Respiratory Specialist on call everyday	0.76 (0.65 – 0.88)
Outpatient clinic	0.60 (0.41 – 0.89)
With HDU	1.40 (1.21 – 1.62)
Respiratory ward	0.67 (0.58 – 0.77)

RESEARCH NEEDS

- **Substantial needs for EU funding with regard biomedical research for COPD. Programme - Horizon 2020**
- **Dedicated infrastructure for health and biomedical research at EU-level e.g. EU Institutes of Health**
- **Promote translational and clinical research at European level.**
- **New drugs with new mechanisms of action → improve collaboration between industry, scientist, Scientific societies....**

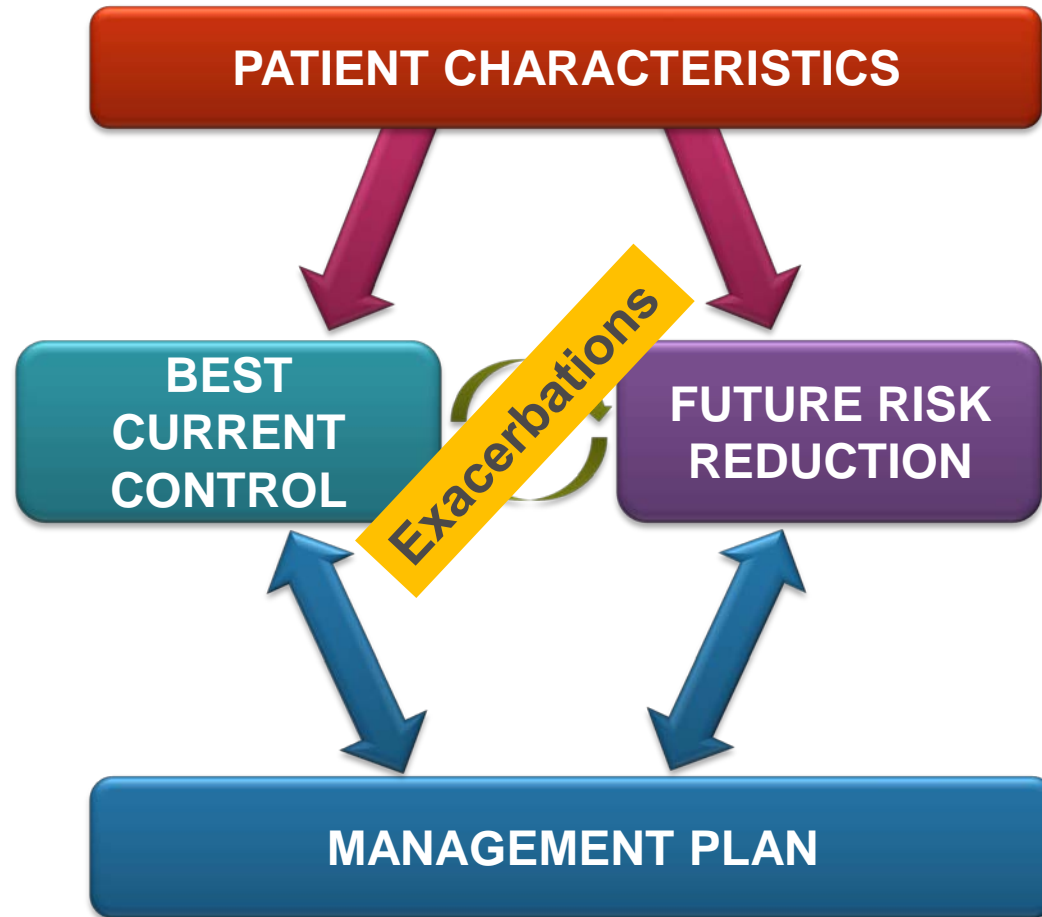


A new perspective on 'optimal care' for patients with COPD



- The terminologies introduced in this concept paper are – ‘optimal COPD care’, ‘best current control’, and ‘future risk reduction’ reflecting the concept that , to a COPD patient, **prevention of future risk is of equal importance to the immediate impact of treating symptoms.**
- **The impact an intervention may have on long-term disease progression is sometimes independent of any effect it may have on current symptoms.**
- **Clinicians already apply this broader approach to risk factors such as hypertension and hypercholesterolaemia.** Treatments that reduce high blood pressure and serum cholesterol are nowadays prescribed independently of any acute effects on current symptoms. It has now been suggested that this approach should also be considered in COPD.

A new perspective on 'optimal care' for patients with COPD



EP Resolution on non-communicable diseases (NCDs)



EUROPEAN PARLIAMENT

2009 - 20

Plenary sitting

13.9.2011

B7-0488/2011 }
B7-0489/2011 } R

JOINT MOTION FOR A RESOLUTION

WE NEED A SPECIFIC EU INITIATIVE BY PARLIAMENT AND COMMISSION ON COPD

on European Union position and commitment in advance to the UN high-level meeting on the prevention and control of non-communicable diseases

Corien Wortmann-Kool, Peter Liese, Simon Busuttil
on behalf of the PPE Group

- B. whereas the four most common NCDs are cardiovascular diseases, respiratory diseases, cancer and diabetes; whereas other important NCDs should not be neglected;
- C. whereas cardiovascular diseases are the largest cause of death, killing more than 2 million people every year; whereas the most common cardiovascular diseases are coronary heart disease and strokes, which account respectively for over a third (i.e. 741 000) and just over a quarter (i.e. 508 000) of all cardiovascular disease-related deaths;
- D. whereas cancer is the second-largest cause of death, with a population prevalence of 3-4%, which increases to 10-15% among the elderly; whereas every year an estimated 2.45 million people in the EU are diagnosed with cancer and 1.23 million deaths from the disease are recorded; whereas the prevalence of childhood cancer is increasing at a rate of more than 1% per year in Europe;
- E. whereas preventable chronic respiratory diseases, such as asthma and chronic obstructive pulmonary disease (COPD), affect millions of people in Europe;
- G. whereas four risk factors together account for a majority of chronic NCDs: tobacco consumption, unbalanced diets, alcohol intake and lack of physical activity; whereas exposure to environmental contaminants is the fifth important factor to be considered;
- H. whereas tobacco consumption is the leading cause of preventable deaths and kills up to one in every two long-term tobacco users;

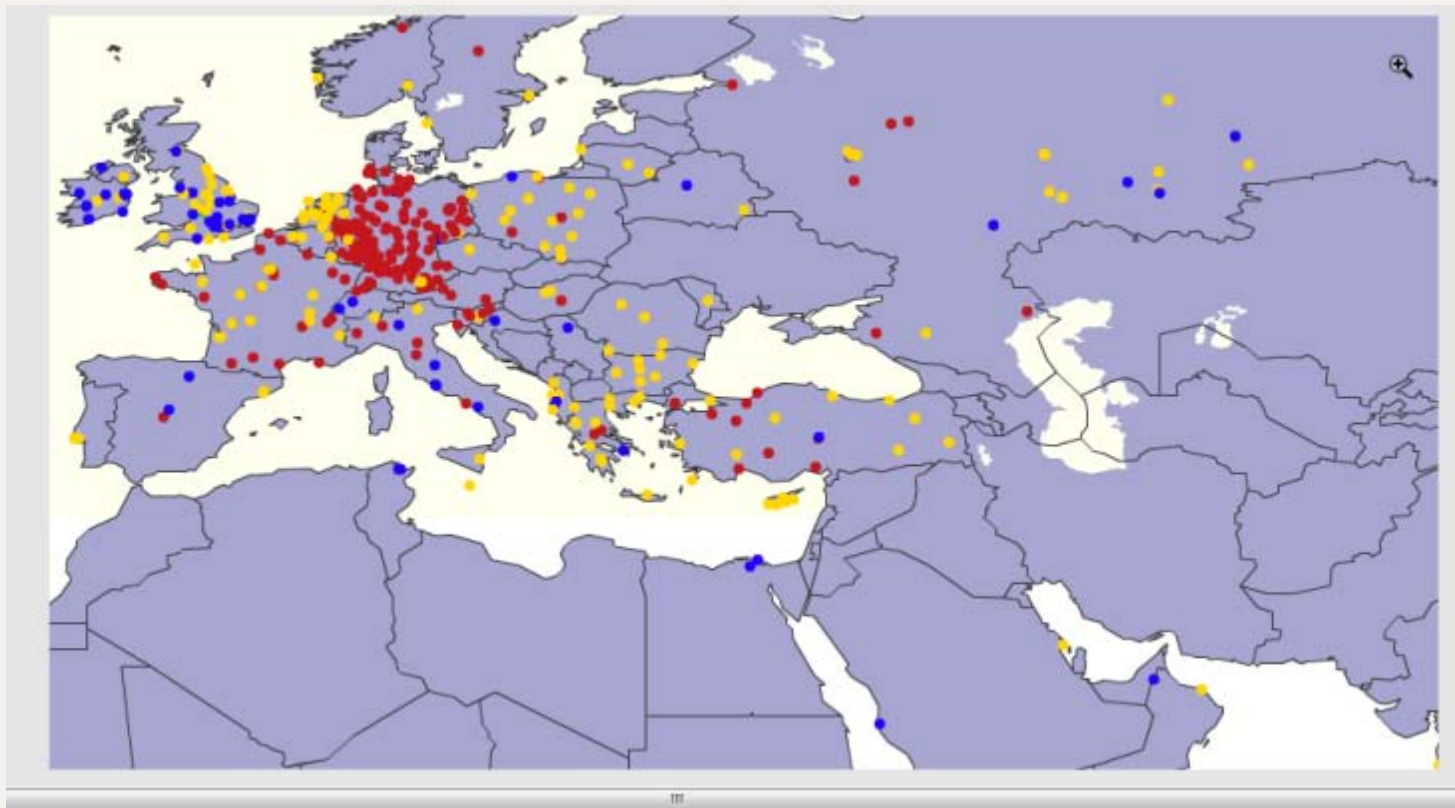
¹ http://www.consilium.europa.eu/uedocs/cms_data/docs/pressdata/en/lsa/118282.pdf

² http://www.consilium.europa.eu/uedocs/cms_data/docs/pressdata/en/lsa/122395.pdf

³ http://www.consilium.europa.eu/uedocs/cms_data/docs/pressdata/EN/foraff/114352.pdf

WORLD SPIROMETRY DAY 2010

102,487 tests from 490 events







In the Olympic year -
join the race for healthy lungs

World Spirometry Day 27 June 2012

to receive all the latest information and updates go to

www.WSD2012.european-lung-foundation.org



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