ERS: Roadmap e COPD audit

F. Blasi, Milano
ERS President elect
Cost-of-illness approach: estimates of direct and indirect costs of ill health

US$ BILLIONS

EUROPEAN RESPIRATORY roadmap
RECOMMENDATIONS FOR THE FUTURE OF RESPIRATORY MEDICINE
• 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 function
  – Better translation of research findings into clinical practice

• Only 9 new molecules in the last 40 years
  – Public-private partnerships (IMI)
  – Collaboration Industry-Innovative Academic centers

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

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

Bringing together: patients, public and professionals

“Working in partnership for lung health”
TRANSLATING, DISSEMINATING AND ADVOCATING THE WORK OF ERS TO LAY AUDIENCE

- 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
WORKING WITH PATIENT ORGANISATIONS
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
SMOKING STATUS ON ADMISSION

- Total
- UK
- Turkey
- Spain
- Slovakia
- Romania
- Poland
- Irland
- Greece
- Croatia
- Belgium
- Austria

- never smoker%
- quit smoker %
- current smoker%

50% countries > 30% current smokers
No spirometry on admission

In 4 countries >38% no spirometry on admission

- Total
- UK
- Turkey
- Switzerland
- Spain
- Slovakia
- Romania
- Ireland
- Poland
- Malta
- Greece
- Croatia
- Belgium
- Austria
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

EU: 4.9%
## Organisational factors associated to in-hospital mortality

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

We need a specific EU initiative by Parliament and Commission on COPD.

Joint Motion for a Resolution

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.

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