

CARDIOVASCULAR SECTOR GROUP

Cardiovascular Health for All

A CALL TO ACTION 2024–2029

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Cardiovascular diseases (CVDs) are the leading cause of death in the European Union (EU), affecting over 13 million people annually and causing around 1.7 million deaths each year about as many as the entire population of Munich. These diseases impact European citizens of all age groups while putting a financial strain on healthcare systems. The COVID-19 pandemic has exacerbated CVDs impact, increasing mortality and limiting access to care.

While medical technology offers numerous solutions to manage and prevent CVDs, **access to innovations is uneven across the EU**. Meanwhile, awareness of CVD risks remains low, and Member States face common challenges that can only be addressed through collaboration and unified action.

In light of the changing EU political landscape, with commitments from leaders like President Ursula von der Leyen on the need to act on CVD in the new European Commission 2024-2029¹, calls on cardiovascular health by European political groups and the ongoing focus of the Hungarian Presidency of the EU on CVDs, **now is the time to act and to adopt a unified European Cardiovascular Health Plan.**

CVDs account for 37% of all deaths in Europe, with significant disparities based on geography and gender. Women, in particular, are less likely to be aware of CVD risk factors, discuss them with their doctors, or undergo regular screenings compared to men². Addressing these inequalities, especially gender-based disparities, is crucial. To do so, modern healthcare technologies like minimally invasive procedures, telemedicine, and Al solutions can improve healthcare efficiency, reduce the strain on the workforce, and help close gaps in care, ultimately enhancing outcomes for all patients.

A European Cardiovascular Health Plan can strengthen healthcare resilience and ensure more equitable care by raising awareness, improving prevention, and ensuring timely access to diagnosis and care.

At the start of the 2024-2029 mandate, **we urge the EU institutions to prioritise Cardiovascular Health** by adopting an ambitious and coordinated policy plan. This initiative will not only help save lives but also ensure the sustainability of our healthcare systems.

Over 60 million Europeans live with CVD and **13 million** Europeans are diagnosed with

CVD every year³

Did you know?

> Informal care for CVD patients is costing the EU **over EUR 78 billion** per year⁴

CVD is **the leading cause of death among women**, yet remains under-studied and under-diagnosed⁵

Complex challenges requiring a coordinated approach

- An ageing population and environmental deterioration, including factors like noise, air pollution, and climate change, are contributing to **the rising prevalence of CVDs in Europe**, underscoring the urgent need for a thorough understanding of its causes and treatments¹⁰.
- Current efforts and investments to combat cardiovascular disease nationally need to be increased as they are insufficient and patchy across Europe. Existing EU policies lack funding and coordination, causing fragmentation across Member States.
- Remote monitoring studies and integrated screenings in vaccination campaigns reveal significant gaps in CVD awareness and a need for coordinated CVD policies, underscoring the urgent need for timely interventions.
- The rapid advancement of innovative technologies has led to the development of high-quality medical devices and digital health tools, as well as the application of AI in the sector, which patients increasingly rely on to manage their diseases. However, burdensome regulatory procedures and the lack of adapted and timely regulatory, reimbursement and funding pathways limit patient access to these innovations, delaying their uptake and reducing their ability to improve and save patient lives.
- The limited adoption of advanced medical technologies, including digital health tools and AI, is also a missed opportunity to reduce the burden on healthcare workers. These technologies can optimise clinical processes, alleviate workloads, and improve overall efficiency, allowing healthcare professionals to focus on more critical tasks and enhance patient care delivery.

- Europe has a strong potential to develop innovative health solutions to address CVDs. However, insufficient funding and support for targeted research and innovation, including advances in medical technology, has limited the translation of these efforts into practical applications. Increased investments and focus in these areas are essential to accelerate the development and implementation of new solutions, ultimately improving patient outcomes and addressing the increasing prevalence of CVDs.
- Sharing health data is crucial for advancing cardiovascular health, and registries are essential for collecting and analysing this data. They provide essential insights into treatments, patient outcomes, and survival rates, fostering a deeper understanding of the diseases. However, their use remains inconsistent across Europe. Implementing the European Health Data Space (EHDS) should streamline data sharing, ensuring that cardiovascular patients and health systems benefit from enhanced research and innovation.
- While **patients** are the primary beneficiaries of treatments and innovations, their voices are **not adequately represented in policy decisions**. Their insights are essential for creating effective prevention and management strategies, as without their input, these strategies are misaligned with actual needs and lead to poorly informed decision-making.

What can policy-makers do?

With a new EU mandate, the time to act on cardiovascular disease is now. By prioritising cardiovascular health in the 2024-2029 EU legislature, we can ensure **longer, healthier lives for all EU citizens**, regardless of birthplace, gender, or socio-economic situation, while strengthening our healthcare systems. Here is how:



Adopt a Comprehensive EU Cardiovascular Health Plan: The European Commission should introduce and implement a detailed Cardiovascular Health Plan as a priority under the upcoming mandate. This plan should address the complete CVD patient pathway, from prevention and early detection to treatment and long-term care, ensuring that every EU citizen can access to high-quality, equitable cardiovascular care. A central component of this plan is establishing a Cardiovascular Health Knowledge Centre and including CVD as a priority within EU funding programmes. This funding should facilitate a comprehensive mapping of the disease burden, considering gender-specific needs and the impact of environmental changes, including climate change.

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Prioritise Primary Prevention and Enhance Secondary Prevention through Timely Screening and Early Detection in the EU-coordinated CVD Plan: Develop and implement primary prevention strategies integrating medical devices and in vitro diagnostics (IVDs) to reduce premature mortality and morbidity from CVDs, including introducing National Action Plans in Member States and establishing a European Cardiovascular Health Check programme focused on secondary prevention. This programme should consist of timely screening and precision diagnosis, leveraging innovative technology to address CVD challenges and precision medicine to identify and manage CVD early, thereby reducing healthcare burdens and improving patient outcomes.

Opportunistic Case Finding (OCF) Programme within a Structured Disease Management (CDM) Programme in Ireland¹²

REGIONAL EXAMPLE

The Opportunistic Case Finding (OCF) Programme in Ireland aims to identify and manage chronic disease risk factors through opportunistic assessments during primary care visits. Targeting individuals with risk factors such as smoking, high BMI, advanced age and a history of gestational diabetes, the programme intervenes early to enhance health outcomes. By seamlessly integrating assessments into routine visits, OCF improves access to preventive care, particularly benefiting older adults and those at heightened risk. This approach supports timely interventions and fosters coordinated care, ultimately leading to more effective disease management and improved health outcomes for the population.



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Improving secondary prevention in only seven European countries (France, Germany, Italy, Spain, Denmark, Poland, and the UK) could **prevent over 670.000 CVD deaths** over the next ten years

Pilot initiative for cardiology screening among citizens aged 65 and older – Italy

The Italian Society of Geriatric Cardiology (SICGe) conducted the first-ever cardiological screening for valvular diseases in Italy, involving 1,200 individuals from 65 villages with under 3,000 inhabitants. The screening revealed that valvular heart diseases, such as aortic stenosis and mitral insufficiency, affect one in three elderly individuals, which is three times higher than previously estimated. These diseases often underestimated and underdiagnosed, have silent symptoms and untreated risk factors that can lead to severe, potentially fatal conditions within 4-5 years in 10% of cases. The PREVASC study's findings highlight the critical need for structured 'lifesaving' screening programmes, akin to those for cancer, to increase early diagnosis rates from 25% to 60% and potentially prevent 150,000 deaths annually through timely interventions¹¹.

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Address inequalities in CVD care: It is essential to ensure equitable access to specialised hospital care and multidisciplinary centres, particularly in underserved regions. Securing this access requires targeted investments in infrastructure, training, and resources to bring all Member States to a higher standard of care. A European Cardiovascular Health Knowledge Centre should be established to support these efforts. Its role would be crucial in addressing the fragmentation and gaps in reliable data by increasing connectivity across the spectrum of CVD and related conditions. By facilitating cross-border collaboration and sharing best practices, approaches to CVD awareness campaigns and interventions can be standardised, ensuring consistency and effectiveness throughout the EU.

Expand Access to Personalised Healthcare and Facilitate Access to Innovative Solutions: To expand access to personalised healthcare and innovative treatments, the European Cardiovascular Health (CVH) Plan must prioritise integrating digital health solutions and cutting-edge medical technology innovations. By leveraging the European Health Data Space (EHDS), the European Commission can create standardised data registries to accelerate research, inform policy-making, and improve patient outcomes. In collaboration with the Public Private Partnership on Health Innovation (IHI), pilot programmes should be launched to ensure efficient and secure access to innovations. By bridging science and clinical practice to facilitate the uptake of innovative technology, any research design can translate its outcome into clinical care tools.

Integrating digital health tools to optimise patient journeys

A 2020 study in the UK demonstrated the efficacy of integrating digital health technologies in managing cardiovascular diseases by utilising mobile health applications and remote monitoring systems. These technologies enabled patients to track their health metrics, such as heart rate and blood pressure and allowed healthcare providers to monitor this data in real-time. The continuous monitoring and immediate feedback led to improved patient engagement, early detection of potential health issues, reduced hospital admissions, and enhanced communication between patients and providers. This personalised and proactive approach resulted in better overall care and significant cost savings for the healthcare system.

REGIONAL EXAMPLE

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CVD costs the EU almost EUR 282 billion per year, equating to an estimated annual

equating to an estimated annual cost of EUR 630 for each European citizen, an increase of over 67% in 18 years⁶

Remote monitoring and medical consultations

Remote monitoring and telehealth services have proven valuable for patients and health systems, as shown by initiatives in France and the Nordics. France launched a nationwide monitoring programme with a new reimbursement model, offering monthly payments to healthcare providers per patient connected to the remote monitoring platform and biannual compensation to device manufacturers. This model underscores the importance of collaboration between health authorities and stakeholders in creating sustainable, effective solutions¹³. In the Nordics, the Renewing Health project used digital tools for heart failure and type 2 diabetes, achieving high adherence rates (91.6% for HF and 95% for DM) and reduced blood pressure among patients. This approach not only improved cardiovascular health but also eased the burden on healthcare professionals, reducing the need for in-person consultations¹⁴. Both examples highlight the benefits of remote healthcare tools in improving care and optimizing resources.

Ensure Quality of Life and Patient-Centred Policy-Making: It is crucial to involve the cardiovascular health community in creating effective policy tools and instruments, including an environment that supports digital innovation in cardiovascular health. Create a standard European CVD information system focused on patient outcomes, treatment options, and quality measurement indicators. This system will improve CVD registries and support better data collection and analysis for future research and innovation.

* These actions, supported by strategic investments, will not only address barriers to innovation but also improve patient outcomes and reduce healthcare costs across Europe. It is time for European institutions to address one of the leading health challenges in Europe. Together, we can foster innovation, improve patient care, and save lives.

About MedTech Europe and the Cardiovascular Sector Group

MedTech Europe is the European trade association for the medical technology industry, including diagnostics, medical devices, and digital health. Our members are national, European, and multinational companies and a network of national medical technology associations that research, develop, manufacture, distribute, and supply health-related technologies, services, and solutions.

The MedTech Europe Cardiovascular Sector Group represents the Cardiovascular Medical Technology Industry, which provides solutions to the burden of CVD on individuals, families and the wider society and economy. Medical technologies play a central role in the fight against CVD. These innovations, which span the full spectrum of patient care from diagnosis to cure, save lives and add tremendous value to European society. High-quality medical technologies are central to Europe's quest for better cardiovascular health and can be found throughout the patient journey, for instance: the blood tests that identify patients with high cholesterol, high risk of heart attack and heart failure; the modern imaging devices that detect narrowing of the arteries; the small cardiac implants such as pacemakers, defibrillators and trans-catheter technologies; the implantable cardiac monitors and associated home monitoring solutions; the minimally invasive heart valve and stent procedures that improve clinical, procedural and patient outcomes, while reducing associated costs and recurrence.

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> For more information, visit www.medtecheurope.org/cardiovascular/

REGIONAL EXAMPLE

Optimising innovative patient pathways can reduce costs and relieve capacity in hospitals (Italy, Parma)

In Italy, new research from Parma University confirms that implementing optimised pathways, leveraging minimally invasive technologies for heart valve disease, can save costs and relieve capacity at the hospital level. The research analysed the utilisation of hospital resources and costs associated with hospitalisation linked to minimal-invasive aortic valve implantation (TAVI) in two settings: before an optimised pathway and after the deployment. The research reviewed data from administrative records and staff interviews. The results show that an optimised pathway guarantees a saving of 3.900 EUR per procedure; more importantly, the hospital can now plan more procedures due to a 30% increase in bed availability. With innovation in process and technology, more cardiovascular patients can get access to treatment whilst enhancing capacity at the hospital level and reducing the burden on healthcare systems¹⁵.



CVD results in **1.7 million deaths every year**, which accounts for 37% of all deaths in the EU , with 20% of all premature deaths being caused by CVD⁸

Remote monitoring reducing heart failure hospitalisations in the Netherlands¹⁶

REGIONAL EXAMPLE

The MONITOR-HF study, a comprehensive investigation into the role of remote pulmonary artery pressure monitoring in chronic heart failure management, underscores the efficiency of integrating this method with standard therapies. By facilitating daily pressure measurements, the study enabled clinicians to tailor treatments more precisely, resulting in a notable 44% reduction in heart failure hospitalisations. This proactive monitoring approach significantly enhanced patients' quality of life and allowed healthcare providers to intervene early, preventing symptomatic deterioration and reducing the strain on hospital resources. The success of this approach highlights its potential to optimise cardiovascular care outcomes and underscores the importance of integrating advanced digital technologies into routine clinical practice.

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