Improving cardiovascular health in Europe: the case for EU and National CVH plans

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What is the ESC?

Uniting Experts. Advancing knowledge.

57 National Cardiac Societies
+100,000 Clinicians, scientists, nurses and allied members professionals
European Alliance of Cardiovascular Health (EACH)

*The Belarusian Scientific Society of Cardiologists and the Russian Society of Cardiology are temporarily suspended from the membership of the ESC.

June 2023
Why are we here?

- **CVD** is EU’s biggest killer
- **1.7 million deaths** per/year
- **+ 5 million** new CVD cases diagnosed annually
- **+ 53 million** people live with CVD

No stand-alone plan to tackle the EU's biggest killer
What does CVD cost the EU economy?

- CVD cost EU **€282 billion** in 2021
- **100 billion euros more** than EU budget
- Cost to healthcare systems and society

Stop paying for CV disease later

**Invest in a CV health now**
Are death rates equal across the EU?

CVD mortality rates vary across EU
• 20% at its lowest to 65% at its highest

Population disparities within countries
• Age, gender, ethnicity, socioeconomic status and region

The fight for CV health is the fight for equality
The wake-up call for **women and CVD**

- More **CVD deaths in women** than all cancers combined
- 40% of all deaths in women are CVD
- Mortality following heart attack is **20% greater in women** vs men
- Women **underrepresented** in research

**CV Health action means Gender equality**

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<table>
<thead>
<tr>
<th>Cause</th>
<th>Female</th>
<th>Male</th>
</tr>
</thead>
<tbody>
<tr>
<td>CVD</td>
<td>40%</td>
<td>34%</td>
</tr>
<tr>
<td>Cancer</td>
<td>23%</td>
<td>30%</td>
</tr>
<tr>
<td>Respiratory disease</td>
<td>7%</td>
<td>8%</td>
</tr>
<tr>
<td>Injuries and poisoning</td>
<td>3%</td>
<td>6%</td>
</tr>
<tr>
<td>All other causes</td>
<td>26%</td>
<td>26%</td>
</tr>
</tbody>
</table>
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Female: 2.3 million  
Male: 2.3 million
Be bold in primary prevention policy

Many CVDs could be prevented

Prevalence of risk factors remain high

Bold and decisive primary prevention regulation

Joint Cardiovascular and Diabetes health check

Health checks save lives

Primary prevention: societal, cultural, political challenge
Why is air pollution a CV health issue?

Air pollution is as deadly as smoking for CVD

Pollution increases the risk of CVD and stroke by:

- **23%**: Ischemic Heart Disease mortality
- **24%**: Stroke mortality
- **13%**: Incident stroke
- **8%**: Incident heart attack

World Heart Federation report shows positive impact of tackling pollution.

Air pollution (PM2.5) **higher** than WHO recommendations.
We need to enhance secondary prevention and early detection of CVD

Early detection of CVDs and its risk factors could prevent premature death and future costs to the healthcare system

- 60–80% heart failure cases diagnosed in emergency department
- Nearly half of all CV events occur in people with established heart disease
- 25–30% of strokes are repeat events
- 1 in 5 patients discharged from hospital after a heart attack has another heart attack, stroke, or dies of CV illness within the first year
Why we need to jointly screen for CVD & diabetes

CVD risk 2 to 3 times higher for people with Type 2 diabetes mellitus

Life expectancy reduced by 10–14 years

Don't wait. Screen.
Why is rehabilitation key?

1 in 5 heart attack patients has a second heart attack, stroke, or dies of CV illness within the first year.

49% of heart attack patients have no cardiac rehabilitation programme.

Our patients need support and care after they leave hospital.
There is urgent need for more innovation in CVD

- 2021 and 2022 **zero** CV drugs approved
- **Funding** to support innovation for personalised patient-care pathways
- Short term **investment** = Long-term proven gains

% of trials started from 2017 – 2022 inclusive

**Key Therapy Areas**

- Oncology
- Infectious Disease
- Neurology
- Hematology
- Endocrinology
- Respiratory
- Dermatology
- Cardiovascular
- Psychiatry
- Ophthalmology
- Rheumatology
- Gastrointestinal
- Women’s / Sexual Health
- Allergy / Immunology
- Hepatology
- Nephrology
- Other*
Where is the funding for CVD data?

- High quality data and real-world evidence is essential
- **Only 25% national CVD registries publicly funded**
- Funding needed to support standardised high-quality data and real-world evidence
- Private sector funding and charity inadequate
- European cardiovascular data centre
Every minute

3 people die from CVD
We can do better

Together we can save lives