



REPORTS AND FURTHER RECOMMENDATIONS

EuroHeart II produced several key studies: 'European Cardiovascular Disease Statistics – 2012 edition', which was downloaded more than 9000 times from the websites of European Heart Network and the European Society of Cardiology, and 'Trends in age-specific coronary heart disease mortality in the European Union over three decades: 1980–2009', which was published in the European Heart Journal in June 2013 and has been downloaded more than 200 times. A further article was published in this journal in September 2013. These publications are frequently cited as reference sources by health professionals and EU and national policy makers.

The preliminary results of the studies, 'Identifying the most effective and cost effective public health nutrition policy options for CVD prevention' and 'Coronary Heart Disease (CHD) mortality projections to 2020 – comparing different policy scenarios' were outlined at major conferences. Furthermore, the director of *EuroHeart II*'s main partner was invited to speak at a conference organised under the Greek presidency of the EU, 'Nutrition and Physical Activity from childhood to old age: challenges and opportunities' (2014).

In summary, the results of the project support several clear policy interventions.

- The project recommends investing in data collection systems in order to monitor trends in CVD risk factors, mortality rates and incidence.
- Policy makers are also encouraged to adopt legislative measures to improve dietary standards and reduce smoking, while at the same time promoting greater physical activity.
- Finally, the project underlines the need for scientific and professional bodies to draw up effective strategies for implementing professional guidelines and overcoming barriers.



This brochure arises from the European Heart Health Strategy II project which has received co-funding from the European Union, in the framework of the Health Programme.

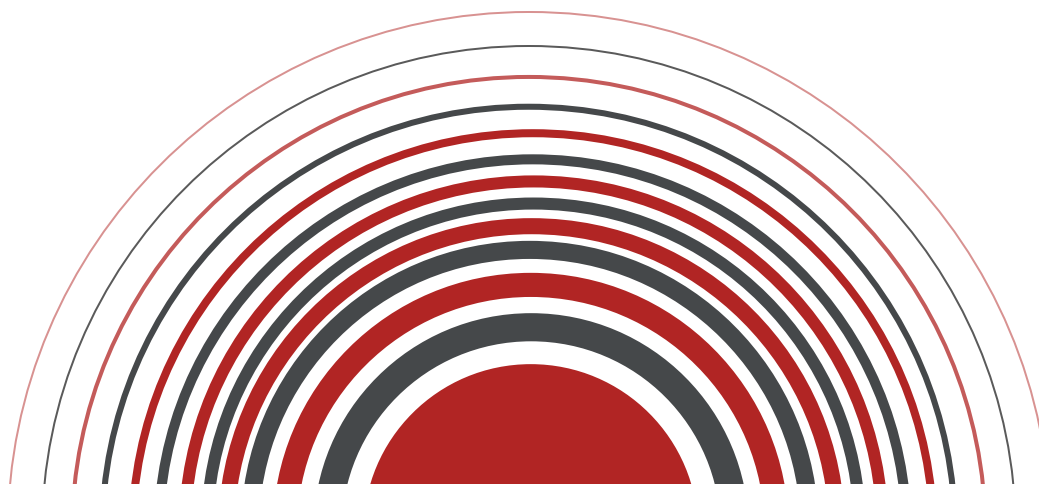


EuroHeart II

**BUILDING
ACTION**
on **HEART DISEASE**
and **STROKE**

EuroHeart II

– long-term prevention
of cardiovascular diseases



Engaging 30 partner organisations from across Europe, the *EuroHeart II* (European Heart Health Strategy II) project analysed the latest figures and trends on cardiovascular diseases (CVD), in order to identify and share the most effective ways and policies for preventing these diseases. The wide-ranging impact of the project will ensure that it continues to influence policy making and prevention practice in Europe for many years to come.

Indeed, a key outcome of the project was the drawing up of recommendations for policy makers and scientific/professional societies. *EuroHeart II* also contributed to the 2008-2013 EU health programme, 'Together for Health', particularly with regards to the promotion of health and the dissemination of knowledge. Moreover, the project outcomes were presented at local, regional and European conferences.



OBJECTIVES AND RESULTS

EuroHeart II was carried out by 30 partner organisations from 17 countries, including academia, research centres, NGOs and health professionals from March 2011 to February 2014. It focused on six specific objectives that had been identified in the European Heart Health Charter. *EuroHeart II* aimed to:

- Provide up-to-date data on CVD, establish mortality trends since 1985 and determine the costs of the disease;
- Build capacity in the cardiovascular patients' community;
- Evaluate existing guidelines on CVD prevention in diabetic patients;
- Share knowledge on nutrition, physical activity and CVD prevention in Europe;
- Identify the most effective and cost-effective CVD prevention policies – reviewing public health nutrition policies; and
- Predict future trends in coronary heart disease in Europe.

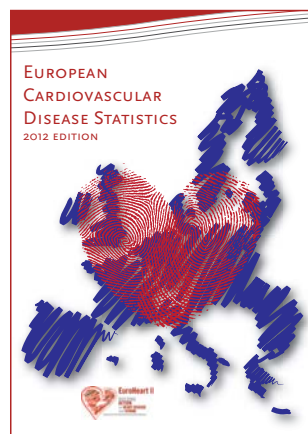
With the guidance of an internal steering committee and an external advisory board made up of representatives from the European Commission and the European regional office of the World Health Organization, the project achieved all its objectives. Data analysis showed that while significant reductions in CVD mortality in Europe have occurred over the

last three decades, these diseases remain the leading cause of death – accounting for over 1.9 million deaths each year in the EU and over 4 million deaths in Europe. The cost to the EU economy is more than €196 billion each year.

Substantial differences in mortality rates were found across EU Member States. Previously falling CVD mortality rates are now plateauing in some age groups in some countries, and are even rising in young people in Greece and Lithuania. To tackle this problem, the project provided evidence to support policies for decreasing salt and trans fat intake and increasing fruit and vegetable consumption. It predicted that even a small reduction in salt and saturated fat intake and a decline in smoking could substantially reduce deaths from Coronary Heart Disease (CHD). Increased levels of physical exercise could also further reduce mortality rates from the disease.

EuroHeart II also showed that interventions that address the whole population are the most cost effective and cost saving. Such policies, however, are not widely implemented across Europe. Furthermore, the problem of CVD could worsen as a result of a growing incidence of high blood pressure and cholesterol levels, obesity and diabetes. Policy interventions to decrease salt and saturated fat intakes are vital and could reduce CVD mortality by up to one third.

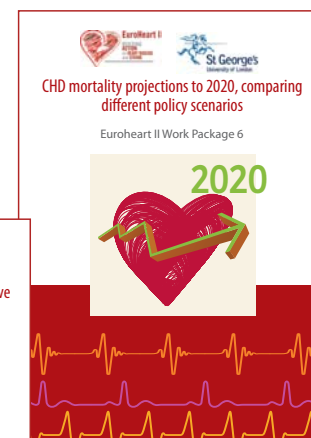
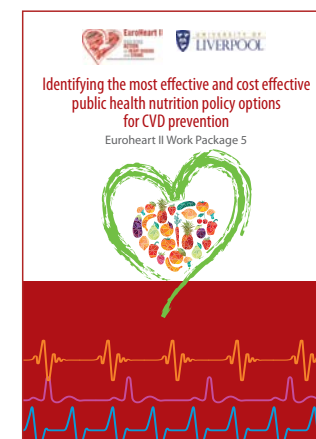
The latest evidence on food, nutrition and physical activity and their impact on preventing CVD, along with policy recommendations for achieving a population-wide shift toward healthier eating habits and increased everyday physical activity were presented at a European Conference on Diet, Physical Activity and Cardiovascular Disease Prevention. This conference, which took place in November 2011 in Brussels, featured high-level speakers such as Paola Testori Coggi, Director General of the European Commission's Directorate General Health and Consumers, and Prof Philip



James of the International Association for the Study of Obesity, as well as representatives from WHO Europe and the OECD. *EuroHeart II* outcomes were also presented at regional conferences in Germany, Italy and Slovakia, with an emphasis on the benefits of a good diet and increased physical activity. Additionally, at seven national meetings, policy recommendations were reviewed by health organisations and government representatives, nutritionists and physical exercise experts. These national and regional events attracted more than 300 participants.

To strengthen the voice of CVD patients, four seminars were held with patient organisations. Over 97% of participants reported that they had benefitted from the opportunity to share experiences with colleagues in Europe and that the information provided was useful for their everyday work.

The project also carried out online surveys to evaluate the impact of guidelines on the prevention of cardiovascular disease in diabetic patients.



followed – for example, they were not always adapted to daily practice and too much extra work was often required. Investigators, who worked on the evaluation, took account of these findings in their review of the ESC-EASD Guidelines that was published in 2013.

Around 90% of all doctors were shown to have a copy of the guidelines at their practices, but barriers often stopped these guidelines being