EHFG Day 2 - The second day of the 17th European Health Forum Gastein kicked off with three diverse forums on public health leadership, building EU health policy and personalized medicine. These were followed by a series of lunchtime workshops before three further forums on deploying eHealth, health system performance and MDGs and the post-2015 agenda ran in the afternoon. The day finished with additional evening workshops and a gala dinner.

An early morning Ebola workshop saw distinguished experts such as Prof Jose Martin-Moreno, Prof Ilona Kickbusch, Nedret Emiroglu, Mario Thaler and others gather to discuss the devastating outbreak of ebola in West Africa. The virus has already infected more than 7,000 people and the number is projected to reach half a million by the end of 2014. The crisis is not just an epidemic, it is a systemic failure of our global health care model. Moreover, it is a failure on governance, international development assistance, and most of all on taking immediate action.

Currently the response speed significantly lags behind the speed of the virus. What we are facing is a humanitarian crisis and we need a strong and coordinated approach, both on an EU and on a global level. But beyond high-level coordination meetings, we desperately require action on the ground. What we are lacking are the basics; well-trained staff alongside technical infrastructure, transport and logistics.

"Armindo Fidler, World Bank, #ebola not very infectious disease like measles or flu. Ebola demonstrates failure of int. development #EHFG2014" – Satu Lipponen (@Lipponen5)

The public health leadership session explored an array of topics linked to good leadership and governance in Taiwan as well as in the European context. The experience from Taiwan emphasized the need to engage senior citizens and change the social norms around ageing. The experiences shared by the Shpend Ahmeti, Mayor of Pristina, Republic of Kosovo, strengthen the belief that public participation has a synergic effect towards reaching public health goals.

Furthermore transparency in regards to public funds and clear action builds trust and leads to better collective action. The idea of health as a political choice at all levels of governance was highlighted by Prof Ilona Kickbusch, together with the need of public health experts to reach out more strategically to politicians.

"Blog on today’s forum on #publichealth leadership - public motivation & involvement is essential http://goo.gl/lgasX” – Hannah Brinsden (@hannahbris)
The EU health policy forum discussed the cooperation of our society as complex, non-linear and in continuous evolution. Therefore collaborations are required to ensure that correct decisions are implemented into actions. To this regard, Hanne Melin (eBay) suggested revisiting the role of policy makers and the use of new depolitised regulatory processes based in the evidence and understanding of experts. In contrary, Prof David Stuckler (Oxford University) considered it would empower the industry which might be prevented to influence in policy.

The work of the EU Scientific Committees is based on transparent and independent meta-analysis. It also relies on the separation between risk assessment and risk management to ensure scientific advice is not the only input and that the final decisions also consider economic and social analysis.

Breda Flood (EFA) demanded more attention for the patients’ perspective although the society she represents successfully persuaded EU scientist commissions to remove several highly allergenic compounds in perfume.

Eduardo Rodríguez-Farré (Scientific Committee on Emerging and Newly Identified Health Risks - SCENIHR) suggested that EU Scientific Committees must increase the international harmonization of health risks and define the unit of reference doses, as other organizations such as “Health Canada” have already done.

Personalized medicine is in the spotlight in recent years. During this morning session the presenters introduced the most recent challenges of personalized technologies. It was emphasised that the number of targeted therapies are growing and these technologies should be an integral part of personalized health care.

The audience got closer to the topic through case studies and very recent technologies were also presented. It was stated that there is strong need for a new framework of pricing and reimbursement decisions, furthermore the Health Technology Assessment (HTA) process should also be revised. From the patients’ perspective, empowerment, health literacy and meaningful, clear consent play very important roles.

"#immuno-oncology and other #personalisedMedicine tools need a more defined regulatory framework. #ATMP is enough?#ehfg2014" - ECPC (@cancereu)

"#PersonalisedMedicine at #EHFG2014. Some interesting concepts but what can we reimburse? Interesting discussion of citizen v patient wants.” - Susan Spillane @Susan_Spillane
Congratulations to the three Young Gasteiners who won the EHFG poster competition,

1. Ute Linnenkamp  
2. Siobhán O’Connor  
3. Sonia Garcia-Perez

The complex phenomenon of health professional mobility in Europe was discussed by a panel of experts during a lunchtime workshop. It was highlighted by Prof James Buchan that national health workforce policy cannot be “isolationist” but countries should accept that mobility is inevitable and ever changing. The varied implications on both provider and receiver countries was highlighted, identifying the need for adequate policies to be implemented to deal with both out and in migration of professionals. Finally policies should primarily seek to mitigate any detrimental effects of mobility on health care quality and service delivery. As noted by Miklós Szócska, the sustainability of health care systems relies heavily on human resources.

“Szócska Miklós: challenges in Hungary: lost 10% of its health workforce, low salaries & fragility of the health system #EHFG2014” – TDussey-Cavassini (@TaniaDussey)

“#EHFG2014 higher wages for health professionals could be financed by higher taxes on alcohol, tobacco and coke #globalhealth #publichealth” – Mathias Bonk (@MathiasBonk)

Health literacy remains one of the challenges in engaging people in healthcare and creating “the empowered citizen”. How to address the different target groups, how to gain their trust, and how to hit the right note to gain their awareness? Health literacy is an important prerequisite to make health systems sustainable and enable future advances in cross-border care. However, for individual citizens, health information may be hard to understand and - especially online - may not be trustworthy, or hard to navigate.

Moreover, commercial information may be difficult to distinguish from neutral advice. As the panel concluded, we are on a good way, but still have a long way ahead to truly reduce challenges of health literacy. What remains is the question of "how": do we need to create something like an information broker, rewrite existing information, or try to address the mammoth task of educating the whole population?

“Challenges in #HealthLiteracy adapt language to target group; access ppl with low levels of HL; address distrust #EHFG2014 @YoungGasteiners” – Svens Henkuzens (@Svens_)

A short message of advice from Prof Helmut Brand for Young Gasteiners: “Try to get involved in policy-making...you have the academic basis to analyse, now it’s about how to CHANGE real lives and the best way to do this is if you have some experience in policy-making or policy-advising. LEARN how to take decisions under risk...don’t be afraid, as even from failure you can learn very much and you will understand how and why political decisions are taken the way they are – then you will become a better politician or a better health policy advisor.

Get involved! That’s the most important!”

Interview extract by Ann Marie Borg – Young Gasteiner Scholar
Matias Wismar opened the core and very crowded afternoon session on **Health System Performance (HSP)**. What’s new in this topic? Probably to skip the country perspective and to analyse the EU wide picture on HSP. Health systems (HS) are essential for EU policy and people wealth and health, as President of the European Commission Jean-Claude Juncker recently acknowledged. HSP will score higher in the new EU health agenda since the EU embraces the idea that, beside the national HS arrangements, core functions make any health system effective, efficient and resilient.

Prof. Peter Smith recalled the WHO theoretical framework to suggest the scope for action at EU level on HSP assessment. Beside the WHO framework of 6 building blocks, the new OECD quality and equity framework was presented as being more ‘granular’ and suitable for comparing HSP across EU Regions. However, as HSP assessment wishes to spread across the EU, country representatives step back, turn skeptical, asking for simple, relevant indicators likely to help them in performing better. HSP assessment will still be at the center of academic debate yet needs to provide policy learning and easy to use evidence for regional and national health policy makers.

**Health Technology Assessment (HTA)** and the **European Pharmaceutical market** were also discussed at this high-level session thanks to sponsorship from MSD who demonstrated that industry and policy makers can jointly discuss these issues, undertake horizon scanning and identify common policy options together.

“If our societies are becoming more and more unequal, how can we get the world we want?” (Bo Goran Pettersson, National Board of Health and Welfare, Sweden). This was a key message from the forum organised by the WHO Europe Regional Office on the **Millennium Development Goals (MDGs) and the agenda post-2015**. Nedret Emiroglu (WHO Europe) gave a brief overview of where we are in respect to the MDGs and where we hope to be post-2015. The overarching goal for the coming years is maximizing healthy lives with a focus on universal health coverage, addressing the challenges of NCDs and acknowledging that health is essential for sustainable development.

Keynote speaker, Bo Goran Pettersson, outlined the lessons learned from the MDG process. He commented on the need for national ownership and the appreciation of the ever changing and fragmented health landscape in the development of the new agenda. Finally he noted the underlying necessity for good sustainable health systems which aim to limit inequalities for the goals to be reached and maintained.

Representatives from Moldova and Armenia gave their country level experiences of implementing the MDGs as a framework to develop national policies and targets. Notwithstanding the improvements made and the positive impact of the MDG framework, it was highlighted that improvements in general national level goals may not indicate reductions in inequalities across groups and national ownership, political climate, good governance and sustainable funding mechanisms influence the ability to maintain targets achieved. Finally it was recommended that horizontal goals may be better placed than vertical disease specific goals to ensure sustainable systems and adequate capacity building.

eHealth is one of the buzzwords of this decade - but what does it take to actually **deploy eHealth** practically? The panel showcased an impressive number of examples from the Netherlands, Estonia, Spain and Denmark. Technical challenges exist in various ways, but the real hurdles revolve around organisation, coordination, and added benefit to, in comparison to traditional health services that also keep developing over time. Also, where does innovation come from? As panelist Claus Duedal Pedersen concluded, adding new technology to an old organisation just creates a costly old organisation. In any case, panelists and plenary unanimously agreed that the time for hesitation is over - we need to create a sense of urgency and deploy eHealth now.

“If there is no change in reimbursement policy, no big chance for wide use of telemedicine solutions says Claus Duedad Pederson #EHFG2014” – Artur Olesch (@ArturOlesch)

“The fact that we will have 2 Commissioners dealing with @DigitalAgendaEU will augment the speed of #ehealth predicts @PZilgalvis #EHFG2014” – EU_eHealth (@EU_eHealth)