

# THE GASTEIN GAZETTE 2016

## Demographics & Diversity in Europe New Solutions for Health



### DAY 2- EHFG2016

The second day of the European Health Forum Gastein was filled with thought-provoking talks and challenging debates focused on how to provide affordable, accessible and efficient healthcare across Europe for all citizens. From Nobel Laureate Prof. Krugman's lecture to the feisty debate on innovative medicines, the forum highlighted the need to intensify the dialogue between key stakeholders in order to make healthcare systems sustainable but also allow new cures to be translated from the lab to the clinic.

While at the moment, the synergistic potential of novel drug discovery with stem cell therapeutics seems promising; it is true that clinically validated results might be akin to that rare needle in a large and complex haystack. However, if collaborative efforts across the scientific community, the industry, regulators and governmental bodies can be fostered in conjunction with investment on research under transparent and efficient terms, those needles will only multiply rendering the haystack much easier to search.

Eleni Antoniadou  
Editor & President of the European Health Parliament

### PLENARY- GREYING BABY BOOMERS- A TWOFOLD CHALLENGE

By Tatiana Paduraru

Health is a basic human right, however, when it comes to affordable medicines, quality of life, access to quality healthcare, it seems economy and development comes as an argument for everything. From another side "health" proved to drive development and economy, although during any kind of crisis the chain does not work backwards and the investments do not come as a priority to the health sector. Nowadays the demographic challenges impact economy on the short and long run: there is a diminishing population who actually produces and there is a growing trend not only in the life expectancy but also in the number of people who are eligible for pensions. Paul Krugman suggested a way for governments to boost economy might be to lower the interest rates, increase the public expenditures and employment even if that means a short-term higher public budget deficit in order to increase investments and on the long run generate gains. To make this a reality, political capital, common responsibility and solidarity are needed. In this context, Fabio Pammolli, professor at the IMT Institute for Advanced Studies, Lucca, suggested as an alternative to the consumer-driven economy the shared economy as key to service providing. The concept seems appealing to stakeholders of different sectors across the world. It has even been proposed as an alternative to the geriatric care service provision. Either way, the critical mass around the topic is continuously growing and it might be a new path worth exploring.



### F4 DESPERATE MIGRATION AND HEALTH-IMPACT REMEDIES

By Lena Lepuschuetz

Although migrants face diverse and pressing health needs, universal health coverage generally does not apply to them. The health needs of the groups of migrants that are currently on the move are perhaps the most acute and visible. Furthermore, there are people stuck at borders and camps and people who have settled. Then there are vulnerable groups that are less visible. There are people returning to their home countries, forced or voluntarily, receiving no support in the process. There are the host communities with increasing frustration and fear, often facing large inequalities in access to health themselves. Lastly, there are those who are left behind in areas of high emigration. Migration will continue over the coming decades and what is desperately needed is long-term planning. A constant crisis approach won't enable to fulfill the health needs of these groups.



## F5 Maternal Healthcare in Europe

By Tatiana Paduraru

Women need to be able to make an “informed choice” that consists of various parts: quality of care, access, system accountability, privacy, safety, evidence-based practices, autonomy, reliable statistics, dignity, and long-term health. Maternal health must be seen as being wider than addressing pathologies. But maternal health policies and practices must also be designed in cooperation with women and take a person-centric approach. That is perhaps especially relevant when it comes to policies and practices targeting the migrant population who need to have equal health opportunities. 1800 women died in Europe of pregnancy and childbirth complications in 2015. Most of these cases were avoidable.



## L2 Personalised Prevention

By Oana Motea

A group of leading experts coming from civil society, academia and industry and national administration emphasised the importance of clinical and political leadership towards more patient-centered healthcare systems. A prerequisite here is the successful integration of ICT applications into the national health systems. The panelists agreed that health systems are clearly lagging behind in comparison to other sectors. Indicative was the comment by Daniel Forslund who was sitting on the panel of experts on behalf of the Stockholm County: “We have fancy apps for anything, but in the field of health we stick to our old computers”, as well as “Our health systems are often still based on a world without internet”.

## F6 Healthy ageing: West meets East

By Clemens Sigl

Countries around the world face challenges of an aging population. The Thursday morning session on healthy aging showed how different countries adopt their provision of service, the design of cities and system funding. One key message is to see older people as an asset and not just as a burden. That means also not to try to stop people aging at any costs, but to let them get old in a healthy way. The older generation itself is responsible for encouraging the younger ones that will follow. Healthy aging starts with investing in health at an early age.



## L1 Life-course vaccination

By Wojciech Blogowski

Immunisation is a proven tool for controlling and even eradicating diseases. While in Europe one observes a general acceptance towards vaccinating children, still it is important to remember that the use of vaccines may provide a fundamental contribution to the well-being of an ageing population. Therefore, the projected changes to the EU's demographic structure highlight the need to rethink our life-course approach to vaccination. During this workshop the speakers reflected on the significance of equitable access to vaccinations across all ages and social groups, as well as shed light on various challenges faced by healthcare systems in Europe in making this happen.

Collectively EU countries form the biggest monopsony power in the world aiming to become informed and intelligent buyers, not lousy ones. Healthcare should be at the forefront of our collective efforts to make it accessible to all. However the starting point of negotiations should not be set unilaterally but rationally, based on evidence and value preferences.





## L3 ICP 4 CO-MORBID PATIENTS

By Corina Vasilescu

ICP essentially equates to creating a network of expertise support services for patients, rather than exposing them to different blocks in a chain of healthcare services which are disconnected from their actual social and psychosocial needs. Under the moderation of Tamsin Rose, Nick Guldemond (Utrecht University) and Bert Vrijhoef (Maastricht University) kicked us off with two thought-provoking presentations. Tamsin then introduced participants to “Design Thinking”, an iterative process to create tailored solutions for specific problems. To achieve this, a different persona with a specific age and lifestyle was assigned to each group of participants. The participants then were encouraged to build empathy with their personas, with their emotional life and physical medical needs; based on that, they had to identify health and social challenges, develop prototype solutions and last but not least, pitch these to the audience under timed conditions. Some of the innovative solutions spanned a wide range of tailor-made ideas, from patches connected to health apps to active family breaks in the countryside. The prototypes feed into a broader policy process involving an exhibition in the European Parliament, “The Standing Men: Technologies for life” supported by MedTech, on delivering integrated care for the management of diabetes and comorbidities. Members of YFG moderated breakout sessions: a design mindset, anyone?



## F7 PROJECT SESSION: RESEARCH ON MULTIMORBIDITY PAVES THE WAY FOR ADVANCES IN POLICY AND PRACTICE

By Corina Vasilescu

Under the moderation of Johan Hansen (NIVEL), project leaders presented the main findings of their research. Prof. Erkka Valovirta (University of Turku, Finland) presented evidence on compliance and adherence of adolescents in the asthma therapy. MEP Karin Kadenbach supported the project actively. Tim Lobstein and Melania Manco introduced the audience to DAPHNE, an mHealth application. Roza Adany and Magor Papp from Debrecen University presented GPs cluster Model Programme. Last but not least, Wilm Quentin and Ewout Van Ginneken (both from the European Observatory on Health Systems and Policies) walked us through some of the findings of ICARE4EU, caring for people with multimorbidity, outlining policy options for payment methods to support patient-centered integrated care. Since many challenges remain, research on demographics and diversity in Europe benefits from further scrutiny.



## L4 Health Literacy

By Alessandra Lafranconi

It has been the 10th year here in Gastein on health literacy. Do we still have things to discuss?

Maybe we talked a lot about health literacy at the individual level, but we definitely have a lot to say on health literacy at the decision making level.

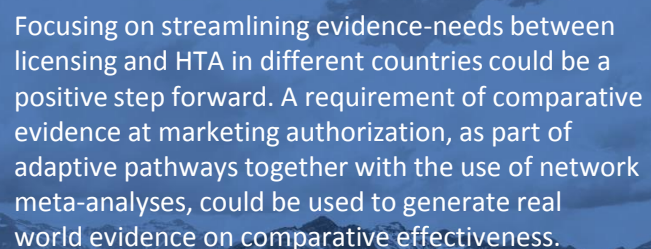
There are different tools and surveys to map the level of health literacy; collected data can be linked with other important information, such as occupational, socio-demographic or environmental data. People with high health literacy are more likely to feel well and to score high in self reported health. The relationship needs to be addressed and studied!

Health literacy at the individual and patient level should be accompanied by literacy in healthcare organizations, healthcare professionals and providers.

Among the many health literacy stakeholders, education plays a crucial role. Schools and educational facilities should promote not only theoretical knowledge but also practical skills in the wider context of empowerment and health resilience.

The benefits of health literacy are not limited to health: on the contrary, there are many co-benefits. The related publication from the European Observatory, commissioned by WHO Europe, is out for interested readers!

The inclusion of more stakeholders goes in the direction of a whole-in-government approach, strongly supported and facilitated by WHO Europe, in order to serve the people in need, and to reduce health inequalities.



Focusing on streamlining evidence-needs between licensing and HTA in different countries could be a positive step forward. A requirement of comparative evidence at marketing authorization, as part of adaptive pathways together with the use of network meta-analyses, could be used to generate real world evidence on comparative effectiveness.



## F8 INNOVATIVE MEDICINES

By Wojciech Blogowski

European healthcare systems are currently facing financial challenges regarding affordability and sustainability of access to highly priced medications. Therefore, it is not surprising that the “Innovative Medicines” Forum was of particular interest for participants of the EHFG. In this interactive debate the speakers were presenting several issues associated with finding a stable balance between accessibility, value and profit of innovative medicines. Specifically, they discussed the reasoning behind high costs of innovative medicines in Europe, as well as the key challenges in providing broad accessibility to these pharmaceuticals. During the panel discussion and interactive debate with the audience various solutions to these challenges were proposed and discussed.



## REMEMBER!

For more summaries, blogs, tweets and other information about this years EHFG visit the website [www.ehfg.org](http://www.ehfg.org) or follow them on twitter [#ehfg2016](https://twitter.com/ehfg2016)

## F9 “REALITY MEETS REALITY”

By Anna Gallinat

Data privacy as well as reliability and validity of data used and gathered by health apps were the central topics of the “Reality meets Reality” forum. The need for harmonising approaches in these areas and adherence to European data protection law are key for the bringing together the industry’s as well as the users’ interests.

The session organised by DG CONNECT covered the Code of Conduct for mHealth apps, which was developed following the EC’s consultation on mHealth applications. A working group consisting of industry representatives drafted the Code for industry, i.e. app developers. The Code is a practical guide and checklist on how to adhere to European data protection law, which is the main concern of users raised in the consultation. Apps, which comply with the Code of Conduct, will be included in a public website and in this way create an economic advantage for themselves.

The second part of the forum addressed the reliability and validity of mHealth apps’ data. Another EC working group drafted guidelines for this, which address healthcare organisations as main targets. Assessment of risks, which apps pose for example in terms of health or technological, is also covered by the guidelines.

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Innovative medicines: the increasing tension between value, profit and accessibility.

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Almost 1/2 European might have serious problems making health decisions based on their health literacy competences

