Today’s EHFG press point was themed “A healthy dose of disruption? Transformative change for health and societal well-being”. It set out to explore what level of disruption is needed across healthcare systems to better meet the new demands put upon it by changes in society. Beyond the digital and technological disruption, press point participants warned that while digitalisation offers great potential to transform healthcare, it should not be viewed as the aim in itself but as a tool to ultimately achieve better health for all.

Stephen Klasko, President, Thomas Jefferson University (Philadelphia)/ CEO, Jefferson Health

“Over the past 40 years, how I handle individual patients has changed dramatically, but how healthcare is delivered has not changed at all, and I think a part of the problem is patients. Patients do not demand in healthcare what they demand in everything else. We have found that by creating a different mindset among patients, industry would start to catch up. And you can change the mindset of patients by telling them “no you don’t have to wait two weeks to get an appointment, we will guarantee an appointment the same day through internet-scheduling” and “yes we will offer transportation options.”

“We have to stop: incentivising pharma to direct consumers advertising for their most expensive drugs; payers to literally keep things fragmented; government to not take advantage of technology.”

“We have to make healthcare global! And we have to look around the world at things that work. These will not always be more medical surgeries. We have to be more open to other approaches.”

Martin Seychell, Deputy Director General for Health, European Commission, Director General for Health and Food Safety (DG SANTE)

“Digital transformation is happening. I think in some aspects, the main failure is that we are only now realising that we have to be at the table, and not just on the menu. First of all, we have to understand that digitisation is not in itself the aim. “Digital” is a tool as countless other tools. However, “digital” offers us the possibility to achieve a paradigm shift.”

“We have been talking for many years about patient or human-centred care. But in the past this was unwishful thinking because you had to go to a physical point, a location, to be treated. So a lot of things were dependent on where you lived, who you were, the distance to the place. Digital can change that.”

“We always had a problem accessing all our health data and digital can help remove the barriers. It can help different professions work together as a team, to provide a common glue, a common basis for information. Of course there is great potential, but the challenge for the next few years will be whether we can translate this potential into practice.”
“We have to use the new players that are entering the healthcare sphere. In addition to the traditional players, the pharma companies, medtech companies or companies from the ICT world can be a very powerful addition. But only as long as they also understand what the clear objectives of health systems in the European context are, as these companies are often non-European. They need to understand that issues such as equity and privacy are of great importance in Europe.”

Christopher Fearne, Deputy Prime Minister and Minister of Health, Malta

“The members of the Valetta Declaration came together to start negotiating with big pharmaceutical industries to bring fairer pricing to new, innovative medicines. The reason for doing this is because the prices of new medicines, especially of orphan and oncology drugs, were very high. Most conversations between Member States, buyers and pharmaceutical companies are held in secret. We need to break the web of secrecy. Many people don’t know what other people in other countries pay for the same medicine.”

“The high prices of medicines are not just a question of costs, but also a question of sustainability of healthcare systems and access to medicines.”

“At the end of the day, we hope to achieve a negotiated solution agreed between all stakeholders to enable new medicines to come onto the market, but also to have the new medicines available for everyone in a sustainable way.”

“Unless there is a compromise between Member States and a true willingness on the part of the pharmaceutical industry to come around the table and recognise that it is not only in the interest of governments to make medicines affordable, but of patients as well, extreme views (for example those presented by the leader of the UK Labour Party, Jeremy Corbyn) will hold up.”

Anna Gilmore, Tobacco Control Research Group (TCRG) – Winner of the European Health Leadership Award

“We have disrupted the tobacco industry’s ability to influence government. We have shed new light on the commercial influences on health, by creating innovative solutions. We have needed to be brave in the face of repeated threats and challenges.”

“The idea of our project came about because we found that the ones that that needed our findings didn't have access to them. The right knowledge was not accessible. That's why we set up a website, TobaccoTactics, which translates our findings into accessible information to everyone, including policy makers and journalists.”

“During the negotiations on the European Tobacco Products Directive, over 120 organisations lobbied on behalf of the big tobacco companies. Our website provides trustful information on this situation. Sometimes you need information very quickly- that's what the website is for.”

In her award speech, Prof Gilmore thanks EHFG for the award, which “comes as a pivotal time. We have made progress with tobacco control by addressing the commercial determinants. Now we need to address the same challenges associated with obesity and alcohol.”

If you have any questions or comments, please feel free to contact: European Health Forum Gastein 2019 – Press office E: press@ehfg.org