



PRESS RELEASE

Heart Attack Mortality Differs Between EU Member States

Poor access to life-saving therapies for acute heart attack patients is a growing strain on EU health systems

BRUSSELS — 23 JANUARY 2013 – Today, in the European Parliament, the European Critical Care Foundation (ECCF) in collaboration with MEP Antigoni Papadopoulou hosted a debate on improving access to life-saving therapy for acute heart attack patients which highlighted that differences in the organisation of healthcare systems, such as emergency transport systems, hospital networks and treatment reimbursement agreements, cause huge health inequalities across the European Union.

Organised in close collaboration with Stent for Life Initiative, the ECCF debate brought together EU policy makers, cardiologists, medical researchers, industry partners and other concerned stakeholders to identify the existing gaps, give new impetus to cooperation and review the political developments that are needed to address these inequalities in Europe.

“We need to remember that cardiovascular diseases, which can lead to heart attacks, contribute to more fatalities than all cancers combined,” explained MEP Antigoni Papadopoulou. “This is a worrying fact – not just because of the burden on health systems it causes, but also for what it means to those of us whose lives can be changed forever when an acute heart attack occurs.”

“The existing health inequalities across the European Union represent a major public health concern. Our duty as politicians is to do our best to improve access to life-saving therapy for acute heart attack patients throughout Member States” – MEP Maria Da Graça CARVALHO said in a statement.

Commenting on this initiative, MEP Antonio Cancian stated “More has to be done to address the variation in access to care between and within Member States and reduce acute heart attack mortality. Today’s debate has shown that there is a strong political commitment from Members of the European Parliament to work with various stakeholders to call upon the European Union and Member States to address the existing barriers.”

When acute heart attacks occur, timely, effective intervention is key to improving patient outcomes and therefore reducing the risk of further cardiovascular events like death and recurring infarction (e.g. congestive heart failure). Primary Percutaneous Coronary Intervention (p-PCI) is often the most effective method for opening blocked blood vessels that cause heart attacks. Promoting increased access to p-PCI is one of the chief aims of ECCF and Stent for Life’s collaboration.

Most effective when delivered within two hours of the onset of symptoms, barriers to p-PCI include variable time to treatment, differences in staff training and resources, and poor coordination between established centres of excellence.

Commenting on some of the research which ECCF presented during the policy debate, Professor John Martin, Chairman of the Board, ECCF, explained “Our research into access to p-PCI across Europe has shown that patients are not getting the proper treatment because of rather surprising factors, such as emergency transport response times and lack of

The **European Critical Care Foundation** was established to improve understanding of the organisation and delivery of critical care, raise awareness of factors that lead to unequal and inequitable outcomes, and trigger action in European institutions to overcome those barriers. For further information:

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coordination between hospitals.” Elaborating on why access to p-PCI is so essential for treating acute heart attack patients, he said “p-PCI is a life-saving therapy for patients, that provides better recovery, speedier return to work and therefore better quality of life. Currently, access to p-PCI varies anywhere from 5 to 92% depending on the country in which you live. This is an appalling health inequality because governments and care providers have a duty to ensure access to the best possible treatment.”

Just as disease prevention policies have a role to play in mitigating worrying health trends, overcoming barriers in access to p-PCI should be made an integral part of addressing cardiovascular diseases. This will require action from policy makers, hospital administrators, healthcare providers, patient groups and citizens. Today’s debate hosted in the European Parliament has rallied multi-stakeholder partners to take the first step to tackle the vast inequalities in access to care across Europe. Stakeholders are committed to advancing a shared vision to raise standards to the level of the best performing EU countries and encourage the diffusion of p-PCI across Europe.

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Notes to Editors:

The European Critical Care Foundation, ECCF, was established to improve understanding of the organisation and delivery of critical care, raise awareness of factors that lead to unequal and inequitable outcomes, and trigger action in European institutions to overcome those barriers. To learn more, please visit the website at www.euroccf.org.

The Stent for Life is a joint initiative between the European Association of Percutaneous Cardiovascular Interventions (EAPCI), a registered branch of the European Society of Cardiology (ESC), and EuroPCR. To learn more, please visit the website at www.stentforlife.com

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