

PRESS RELEASE

Multi-stakeholder collaboration between countries and regions is urgently needed to improve outcomes for acute heart attack patients across Europe

BRUSSELS – 18 February 2014 - The European Critical Care Foundation has published a survey that makes a key contribution to tackling cross-border inequalities in the care of heart attack patients. Carried out in ten countries across Europe, the survey examines to what extent neighbouring countries collaborate across borders in the management of acute heart attack patients. The survey's preliminary results revealed a surprising absence of collaborative agreements for this critical condition. It appears that this is also due to the lack of implementation of existing bilateral agreements and limited scope of action.

Mrs Antigoni Papadopoulou MEP said "This is a shocking finding. We know that any delays from symptom onset to treatment increases the relative risk of death. One 30 minute delay increases the risk of death after 1 year by approximately 7.5%. We know this and we have a moral duty to act on it in order improve access to this therapy for citizens living in underserved border areas".

However, even domestically, many EU countries are falling short of what could be delivered to patients. Indeed, the cardiologists interviewed in the survey often cited longstanding barriers and challenges between regions within their own countries, preventing optimal implementation of primary angioplasty. On average it is estimated that across Europe, only around 50% of eligible patients are offered primary angioplasty, with wide variations between countries, despite substantial evidence of the benefits of this therapy on mortality and morbidity. These inequalities do not appear to be related to national economic variables, but stem from differences in the organisation of healthcare systems.

Commenting on the report, Mr Antonio Cancian MEP said "Better outcomes for patients are not always a question of new drugs and treatments, but better organisation and use of existing resources. The establishment of networks ensuring non-stop, 24/7 coverage of this intervention could significantly improve outcomes for acute heart attack patients, simply by encouraging collaboration between the various stakeholders. And we must address this situation not just across national borders, but also within countries, between regions."

In the survey, the most commonly mentioned obstacle is reimbursement of treatment and transport costs between systems – which country or region pays for which costs? Another factor is organisation of emergency medical systems which do not often foresee specific procedures when accidents occur in cross-border areas – a third factor is quality of care – acute heart attack patients need to be sure that facilities across the border offer high-quality care than that which is available in their home country. This can only be achieved through joint training and education programs for cardiologists and other healthcare professionals to share best practices. Finally, public awareness is essential in reducing the time from symptom onset to first medical contact - citizens need to know the symptoms of heart attack, and know which number to call in an emergency, wherever they are. Barriers to access to cross-border care can be circumvented by the definition of protocols establishing collaborative policies for optimal management of acute heart attacks between countries with shared borders. ECCF's chairman, professor John Martin said "None of

these issues have anything to do with science or medicine – the outcomes for the patient are largely a question of legal structures, institutional arrangements, economics and politics. The Cross-border Healthcare Directive provides the tools and mechanisms for resolving issues like these, which have a huge impact on individuals and their families as well as on healthcare systems and the economies of EU Member States. All stakeholders need to grasp the opportunity to make timely access to best treatment for acute heart attack patients a reality, wherever they are located across Europe.”

The survey was an initiative supported by the European Commission’s Directorate General for Health & Consumers. It forms part of ECCF’s work to improve the understanding of how life-saving treatment can be better delivered to acute heart attack patients. ECCF actively participates in collaborative research projects with public institutions, professional bodies and academia.