**Health & Growth – Working together for a healthy Europe**

**5 Key Questions & Answers**

**What is the health and growth “strategy”?**

EFPIA’s strategy “Working together for a healthy Europe” outlines a vision for a collaborative effort that will help support health and growth in Europe. It is built on three pillars that outline its primary aims:

1. Improving health outcomes – establish a European framework to improve health outcomes in chronic disease management;
2. Reducing inequalities – remove the current barriers for addressing the vast inequalities in access to medicines across Europe;
3. Advancing patient access – accelerate access for new medicines and create a harmonized assessment approach whilst retaining the independence of national.

**Why is the pharmaceutical industry concerning itself with European economic systems and EU growth?**

As the producer of new and improved medicines, the pharmaceutical industry is an integral part of any healthcare system. In recent decades, we have made huge improvements in health outcomes and life expectancy. Medicines have played a key role in this achievement, notably in areas of infectious disease, chronic conditions – even cancer.[[1]](#endnote-1) In Europe alone, men and women can expect to live a decade longer than they would have in the 1950s.[[2]](#endnote-2)

However, the pharmaceutical industry also has a valuable role to play in European economies, not just European healthcare. The research and development that drives the pharmaceutical industry contributes to European economic success. It creates skilled jobs, employing some 690,000 persons in Europe, and creates a positive trade balance in Europe of some €80 billion.[[3]](#endnote-3)

When it comes providing an attractive environment for the R&D that allows for these gains, the EU is facing increasingly tough competition. Not surprisingly, the pharmaceutical industry is changing its footprint to access these sources of excellence, which also means that European patients suffer, with Europe consistently lagging behind the US as the place where innovators want to test and launch their products first.[[4]](#endnote-4)

**Why is this Strategy being presented now?**

As Europe emerges from the economic crisis, an integrated life sciences sector can thus help build a healthier EU for the future – in terms of citizens’ health, as well as societal wellbeing. EFPIA’s vision for Health and Growth for Europe outlines the strategy that can help achieve such an integrated life sciences sector. Soon new and old European leaders will be coming together to work on ways to make a positive impact in the EU, making this the ideal moment to get the conversation started.

**Who is industry collaborating with on this?**

The Health and Growth strategy is not a “pharmaceutical industry” strategy but a call for a collaborative effort to be made with European policymakers, academia, researchers, and healthcare stakeholders. Open and frank discussion between these parties about the challenges Europe faces is one necessary step. For example, take the case of chronic diseases. Already, chronic diseases account for 75% (over  €700billion) of Europe’s healthcare bill and are responsible for up to a 7% GDP loss in some EU countries. In the years ahead, key risk factors for chronic diseases (age, adult obesity) are projected to increase; with them, we can expect increasing incidence and impact of chronic conditions. A recent study by the European Commission projects that, without new approaches, average healthcare spending could rise from just under 7% of GDP to almost 9% of GDP by 2060.[[5]](#endnote-5) This type of healthcare challenge is one that impacts not only patients, but European healthcare systems and budgets, as well as the researchers who are working towards solutions. When looking at cases like these, it’s clear

**What actions does EFPIA suggest?**

EFPIA has developed a number of concrete proposals to facilitate success of the Health & Growth vision and

1. Improving health outcomes:
	* Establish European-wide standards for data capture and data registries to define standards of care based on findings from clinical development studies as well as robust and standardized real-world evidence studies;
	* Deploy structural funds to encourage the development of health delivery infrastructure in line with best practice standards, where local funding is not available;
	* Facilitate differentiated pricing in Europe, by removing barriers. This will aid pricing by ability to pay, to improve medicines access and coverage. Focusing, in the first instance, on those Member States with lower quartile GDP relative to other Member States.
2. Reducing inequalities:
	* Harmonize the different approaches to Health Technology Assessment in Europe, by establishing a more consistent definition and approach to the evaluation of relative effectiveness, whilst retaining the independence of national HTA authorities;
	* Strengthen collaboration across Member States in joint scientific advice across the medicines life-cycle (pre- and post-approval) to foster convergence in comparators, end-points and levels of evidence considered in clinical trial activities and value dossiers (involving regulators and payers);
	* Adopt best practices in early access to medicines across;
	* Establish a ‘breakthrough designation’ status within the EMA to expedite the development and review of promising new drugs for serious conditions;
	* Develop country-specific frameworks, which provide predictability of funding and encourage appropriate usage of medicines as well as innovative pricing and reimbursement schemes.
3. Advancing patient access:
	* Establish a network of European Institutes of Health Research Excellence to drive priority setting and coordinate research activities and EC funding with the aspiration of encouraging excellence in medical and bioscience research;
	* Build on IMI and IMI2 programs to foster public-private partnerships on open innovation in the life science field;
	* Establish new incentives and intellectual property frameworks to encourage the development of medicines for key unmet needs or medicines that deliver ‘break-through’ clinical advantages aligned with European health priorities.
1. Lichtenberg, F. (2012): Pharmaceutical Innovation and Longevity Growth in 30 Developing and High-  income Countries, 2000-2009 NBER Working Papers 18235, National Bureau of Economic Research, Inc. (2012); Smith, B (2011): The Future of Pharma, Gower Publishing Limited (2011) [↑](#endnote-ref-1)
2. United Nations, Department of Economic and Social Affairs (2011): World Population Prospects – The 2010 Revision; released on 3 May 2011 http://esa.un.org/wpp/index.htm [↑](#endnote-ref-2)
3. EFPIA (2014): The pharmaceutical Industry in Figures: Key Data (2014) [↑](#endnote-ref-3)
4. PAREXEL Biopharmaceutical R&D Statistical Sourcebook 2012/2013 (eStats); Hard copy [↑](#endnote-ref-4)
5. European Commission (2010): Projecting future healthcare expenditure at European level Economic Papers 417 / July 2010 [↑](#endnote-ref-5)