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| **Improving Health Outcomes & Removing Inequalities in Europe** | **Supporting Sustainable Healthcare Systems** | **Building a Thriving Innovative Life Sciences Sector** |
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| Advances in healthcare have moved society beyond the concern of simply extending life. We also must concern ourselves with improving life in later years, especially as age-related diseases become more prevalent. A person’s life isn’t just about quantity, but quality.   * Every European lives on average 18.4 years with disability or illness. This is set to rise as the share of disability life-years, as a percentage of total life-years, increased in all but two EU-28 countries from 1990-2010. * An ageing population increases the prevalence of age-related diseases (predicted two-fold increase in late-stage Alzheimer’s to 7.5m by 2050). * Demographic and lifestyle changes are predicted to result in an increased incidence of cancer (400,000 new cases projected between 2010 – 2020). | While there is a perception that medicines are the cause of rising healthcare costs in Europe, this is not the case. In Europe, medicines expenditure accounts for less than 15% of total healthcare expenditure – far behind other interventions, e.g. inpatient care and long-term nursing care.   * Medicines accounted for less that 15% of the growth in healthcare expenditure across OECD-countries in the period 2004-2010. * Medicines prices are actually down, thanks largely to both price control measures and the highly competitive market that exists for medicines post-expiry. This has led to the average unit costs of medicines having declined by 16% since 2000, against a 25% increase in general consumer prices. | The EU is facing increasingly tough competition, with Europe consistently lagging behind the US as the place where innovators want to test and launch their products first.   * In the 1960s, Europe was the pharmacy capital of the world, accounting for nearly 60% of all new chemical entities. While the US has since caught and overtaken Europe, the continent remains a medicines powerhouse * Out of the Top 100 centres for medical research, 56 are American and only 37 are European. Bearing further scrutiny, eight of the Top 10 academic centres are American and Asia is catching-up fast. |
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| 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.   * In Europe alone, men and women can expect to live a decade longer than they would have in the 1950s. * Cancer – once seen as a major killer with poor prognosis for survival – is in many cases now considered treatable, particularly with early diagnosis. | 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.   * 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. * 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. | Pharmaceutical R&D creates skilled labor that contributes to European economies.   * The pharmaceutical industry employs over 700,000 people in Europe, contributing 17% of total business enterprise R&D employment. |
| Despite progress, inequalities persist across Europe, both between and within countries. The pharmaceutical industry is dedicated to reducing healthcare inequalities – but it cannot accomplish this alone. Greater equilibrium will require a collaborative effort bringing together policy-makers and healthcare stakeholders.   * Life expectancy in Romania is 9 years less than in Spain; the vast differences in access to healthcare and medicines between these two countries is a contributing factor. * In the UK, each London Underground station travelling east from Westminster represents nearly one year of life expectancy lost. | Early, appropriate use of medicines is one of the most effective interventions a health system can make. Medicines help keep costs down.   * Medicines play a key role in many chronic disease pathways, with some of the lowest cost pathways - such as cardiovascular disease, respiratory disease and diabetes - encompassing a pharmacological approach at their heart. Even in these cases, the cost of medicines comprises a relatively small proportion of the total costs of the condition – as an example just 5% in the treatment of coronary heart failure in Germany. * Early and appropriate use of medicines can help avoid far more costly interventions, like hospital admissions. A patient who remain adherent to pharmaceutical treatment costs the system anywhere between 50% less (e.g. in dyslipidaemia) and 90% less (e.g. in hypertension) than a patient who does not stay on treatment. |  |
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**“Access to healthcare is everyone’s right. It is also a precondition for economic prosperity. People’s health influences economic outcomes in terms of productivity, labour supply, human capital and public spending” - European Commission Working Document on Social Investment for Growth (Feb 2013)**

**QUOTES FOR USE: EFPIA President and Sanofi CEO Christopher Viehbacher on Working Towards a #HealthyEU**

* “Only a significant improvement in health outcomes, supported by increased innovation, can keep healthcare expenditure under control. This requires collaboration and a change in perception. We need to better understand the environmental and demographic factors driving healthcare spending,, what are the future needs in terms of prevention and disease management, what is the value of investment in different areas and what innovative approaches will have the most effect. If we want sustainable systems, we can’t revamp just one area; we need to address the system as a whole.”
* “The pharmaceutical industry is driven by research & development. That R&D contributes to society in many other ways than simply creating medicines. A thriving life sciences sector is good news for Europe and European citizens. Efforts made to nurture the life sciences in Europe will pay off, in terms of health outcomes and will drive economic growth.”
* “Although Europe has many of the required components for leading in the life sciences sector, including boasting the highest number of the world’s research scientists and a large proportion of its biotechnology patents, it faces increasingly tough competition from other areas in the world.”

**QUOTES FOR USE: EFPIA Director General Richard Bergstrom on Working Towards a #HealthyEU**

* “Advances in science and technology have allowed for great strides in medicines research and development, benefitting patients around the world. But with progress come new hurdles – ensuring equal access to healthcare being one of them. This is a challenge that goes beyond R&D – it requires a collaborative effort among policy-makers, payers, and industry.”
* “As an industry, we are now facing two distinct challenges: Improving quality of life, not just quantity of life years; and ensuring that all patients have equal access to healthcare advances. Medicine and healthcare are not just about extending lives, but making lives better.”
* “Medicines add a different kind of value to healthcare – this needs to be recognised. Through its clinical trial activities, the industry actively contributes to the revenues of many healthy systems. In areas like oncology, the industry may be under-writing anywhere between 5 to 15 % of medicine costs. Essentially, this means that between 5% and 15% of the total value of oncology medicines used is provided free, through clinical trials.”
* “It remains true that further efficiencies in medicines expenditure can – and should – be made. But such efficiencies should not compensate for, nor subsidise, the failure of other parts of the system to drive out inefficiencies.”