



EUROPEAN HEALTH FORUM GASTEIN 2011 INNOVATION & WELLBEING: LIVING LONGER – BUT ARE WE LIVING BETTER?

- ***86% OF DEATHS CAUSED BY AVOIDABLE ILLNESS***
- ***FIRST HEALTHY HABITS SURVEY OF MEPS***
- ***OVER-TREATMENT DESPITE BUDGETARY RESTRAINTS***
- ***MAKING A DIFFERENCE? SOCIAL INNOVATIONS IN HEALTH***
- ***14 YEARS ON: WHO COMES TO GASTEIN?***

Brussels, September 8, 2011 – Unnecessary medical treatments are a Europe-wide issue which needs to be confronted head-on, **Günther Leiner, founder-President of the European Health Forum Gastein (EHFG)**, said today. The EHFG is the leading health policy conference in Europe.

Speaking ahead of the annual EHFG conference in Bad Hofgastein, Austria (October 5 – 8, 2011), Prof. Leiner said it bordered on the absurd that a debate was raging everywhere in Europe on the limits of affordable health services “yet there is blatant and increasing over-treatment in hospitals.” Prof. Leiner pinpointed the growing number of unnecessary operations as “especially alarming”. They had, he said, “an obvious economic basis.”

Fully 80% of back operations were unnecessary, he said, quoting the latest data from the Technicians’ Health Insurance (TK) in Germany. OECD figures from last year showed enormous differences across Europe in the number of hip and knee replacements, with 289 hip operations per 100,000 people in Germany, 243 in Austria – but in Poland 39, and in Cyprus 15. Knee operations per 100,000 ranged from 206 in Germany to five in Romania. “It is hard to imagine such differences being explained on purely clinical grounds,” said Prof Leiner.

As for over-prescription of drugs, this was also becoming chronic, especially among elderly patients, he said. A study by Salzburg Medical University (PMU) showed that prescriptions issued to patients averaging 82-years old were unnecessary in 36% of cases and in 30% of cases the drugs they were given were inappropriate.

Innovation, personalised medicine, eHealth, and Health Technology Assessments will be among the strategies for relieving pressure on health budgets being discussed at next month’s EHFG conference on “Innovation & Wellbeing, Europe’s Health 2020 and beyond”.

The European Commission, a key partner of the annual European Health Forum Gastein, has long been concerned by these issues. This year at Gastein the Commission is focussing on Europe’s potential for social innovation in health, patients’ access to personal health data, and the European Innovation Partnership on Active and Healthy Ageing which is part of the EU’s Innovation Union Strategy, one of the Europe 2020 flagship initiatives.

A girl born in the EU today has an average life expectancy of 82 years. For the last half-century, EU citizens have outlived their parents by 10 years. By 2060 average European life-expectancy will have increased by an additional five years. The strains imposed by this development are felt at every level of European societies, not least in finance and health ministries.

“Many health problems go beyond the borders of individual countries and need to be solved through international co-operation and collaboration. When it comes to Europeans' health in an ageing population, it is clear that prevention is an investment for the future. Europe therefore needs to invest more in promoting good health,” said **Paola Testori-Coggi, Director General for Health & Consumers, European Commission**. “We therefore wish to see how innovation can help people maximise their chances of ageing in good health.”

Although many of us live to a grand old age, more of us still are dying prematurely because of preventable diseases caused by risk factors such as lack of exercise, smoking, alcohol abuse and chronic obesity. October's EHFG conference will examine why, despite the quantum leaps in medical science, three out of four Europeans die of these lifestyle related diseases, which kill off 36 million people a year worldwide.

Cardio-vascular diseases, chronic respiratory diseases, diabetes and cancer account for 77% of the illnesses burdening the 53 countries of the WHO Region Europe, and are the cause of 86% of all deaths. Developments in non-communicable diseases, *inter alia* the conclusions of the upcoming UN High Level Summit on Non-Communicable Diseases in New York (September 19 - 20, 2011), will feature high on the agenda at Gastein in October.

This is a massive challenge for health policymakers. “The risks posed by lifestyle diseases are well known, and many are avoidable,” says **Karin Kadenbach, Austrian Member of the European Parliament and its Committee on Public Health**. “That means we are not condemned to suffer from them.” She calls for more investment in prevention. “At present, 97% of public health expenditure worldwide is on treatment, but just 3% on prevention. This makes no sense. With better prevention, millions of premature deaths could be avoided”, the member of the Socialist Party says.

But how healthy are the policymakers themselves? High-pressure jobs – such as being an MEP – rarely allow for a healthy lifestyle. So this year the EHFG is undertaking the first-ever survey of MEPs' health and lifestyle habits.

A session at Gastein is also being devoted to the idea of social innovation. At a time of major budgetary constraints, it is seen by many as an effective way of realising people's creativity, making better use of scarce resources, and encouraging better organisation, financial planning, and coordination between services. Are they right? This year's EHFG conference will put these claims about social innovation for health under the microscope, looking at how it can be encouraged in practice, and what research, structures, and regulatory environment may be needed if it is to work.

Slovenian MEP Alojz Peterle will give a keynote address on this topic in October. “The economic crisis has wiped out years of economic and social progress and exposed structural weaknesses in Europe's economy”, he said at the EHFG presentation in Brussels. “Worrying health trends mean that one of the most important values in people's lives is increasingly under threat. If we wish to improve the general level of health we will need to implement as soon as possible a coherent, cross sectoral health policy which is coordinated between the various levels. That is why we have to encourage in particular social innovation that contributes to greater productivity and competitiveness at national and EU level.”

The EHFG attracts more than 600 politicians, decision-makers, representatives of special interest groups, business and industry, civil society, science and research, and policy and administration experts, coming from more than 40 countries.

“For 14 years now the EHFG has been a key reference for all public health stakeholders in Europe and beyond,” says **Bulgarian MEP Antonia Parvanova**, who has been active at this meeting for many years. “It is a most valuable source of information and recommendations for policy makers in the European Union. The Forum this year will address innovation and ‘Wellness’ or well-being, looking towards 2020 and beyond. That chimes in with our discussion in Gastein last year, when the big public health challenges were put on the table - in particular the ageing of the European population. Innovation is one of the ways to address those challenges and achieve concrete health outcomes, among which the overall health of Europeans should be a priority.”

Further details at www.ehfg.org.

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