



OPENING REMARKS

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Good afternoon, and welcome to everyone.

At the beginning of the legislative term, we welcomed the announcement of the first European-level strategy for the cardiovascular health of European citizens. In September 2025, my organisation, Cittadinanzattiva-Active Citizenship Network, [participated](#) in the [public consultation](#), alongside 676 other stakeholders. We were convinced of the usefulness of providing a citizens' perspective on the topic and emphasising elements on which we work, especially in the context of primary prevention.

In addition, we strongly emphasised the value of vaccination. This aligns with the message reiterated by the European Society of Cardiology in its paper "[Vaccination as a New Form of Cardiovascular Prevention](#)".

As today's panellists — whom I would like to thank once again for accepting our invitation — will confirm, vaccination is increasingly recognised not only as protection against infectious diseases, but also as an effective preventive measure for cardiovascular conditions. This is the first key message for today.

About it, we were pleased to learn that, under the renamed [EU Safe Hearts Plan](#), the European Commission intends to propose a Council recommendation on immunisation against respiratory infections as a preventive measure for cardiovascular disease, as follows: *“The Commission intends to propose a Council recommendation to promote immunisation¹ as a measure to prevent cardiovascular diseases, taking a lifelong approach and tackling high-risk vulnerable groups” is written in the Plan, which continues: “Member States are envisaged to be offered support in identifying the target population for vaccination, and in monitoring and increasing their vaccination coverage. The proposal for a Council recommendation would aim to encourage all Member States to report vaccination coverage data for influenza and COVID-19, respiratory syncytial virus and pneumococcal disease, and viral infections such as herpes zoster, in individuals with chronic conditions, including cardiovascular diseases, by 2029”.*

With reference to this flagship initiative, we would like to confirm our full willingness to collaborate with the European Commission, which we have of course invited to participate, and to request that this initiative be considered a priority. This is the second key message for today.

At the same time, we are concerned that the [European Parliament SANT Committee’s first draft report on “An EU cardiovascular diseases strategy” \(2025/2132\(INI\)\)](#) (~~dated 16 January 2026~~), does not yet reflect the importance of immunisation against respiratory infections in preventing cardiovascular disease. This omission is not consistent with the approach already taken by the European Commission in the [EU Safe Hearts Plan](#).

¹ New systematic review and meta-analysis show an association between shingles vaccination and lower risk of heart attack and stroke.

In recent weeks, amendments on this topic have been brought to the attention of MEPs for their consideration. We have obviously invited the rapporteur, MEP Romana Jerković, to today's meeting, but she was unable to attend due to other commitments.

Thanks to the hospitality of Cypriot [MEP Michalis Hadjipantela](#) — whom I would like to sincerely thank for this opportunity — and who is a member of the [Committee on Public Health](#) and a supporter of the [MEPs Interest Group “European Patients' Rights & Cross-border Healthcare”](#), we now have the opportunity to share some important messages:

1. To maintain high levels of awareness of vaccine-preventable respiratory diseases (VPRDs).
2. To ensure coherence and consistency between the official commitments and related documents of EU institutions.
3. Addressing immunisation also means addressing non-communicable diseases (NCDs) and cardiovascular diseases (CVDs). Conversely, those dealing with NCDs and CVDs must promote the benefits of vaccination to their patients.

Above all, including vaccination in the European Parliament's final report on an EU cardiovascular diseases strategy would provide a significant opportunity to advance our advocacy efforts and ensure that the prevention of respiratory infections becomes a political priority.

To encourage discussion, two Calls to Action, in which we played an active role, will be presented to the EU institutions today. These Calls collect the voices of associations representing healthcare professionals (HCPs), civil society organisations (CSOs) and patient advocacy groups (PAGs).

Strengthening the integration of vaccination within the EU Safe Hearts Plan could make it a valuable example of improved coordination between adult immunisation strategies and chronic disease management across the European Union.

I hope the upcoming Council Recommendation on the value of immunisation against respiratory infections will also demonstrate the added value of collaboration on public health among institutions, the scientific community, healthcare professionals (HCPs), private stakeholders, patient associations, and civil society organisations.

Above all, if we are able to work effectively together, this Council Recommendation could represent an important step towards a broader European approach to respiratory care.

Ahead of today's meeting, a [journalist wrote](#): "Europe has a Beating Cancer Plan and a new Cardiovascular Health Plan — does it also need an EU Respiratory Health Plan?" It is certainly an interesting question to discuss here today in the European Parliament.

I personally believe that an EU Respiratory Health Plan — as suggested by the title of today's meeting — is indeed necessary. The SARS-CoV-2 pandemic clearly exposed the widespread vulnerability of both populations and healthcare systems across the world.

In this regard, I would very much welcome your suggestions and perspectives.

Thank you for your attention, and I wish you a productive event.