

CLOSING REMARKS

Mariano Votta

Responsible for EU Affairs at Cittadinanzattiva, Director of Active Citizenship Network

At the opening of our meeting, I spoke of the vital need to restore dignity to prevention. I firmly believe this is an inescapable imperative that must be prioritised, particularly in a context of scarce resources that are constantly threatened by competing emergencies. The time has truly come to turn “Cinderella” into a princess.

This is, first and foremost, a **political responsibility**: the conscious decision to allocate greater public resources to life-course prevention. This agenda reaches well beyond the “EU Safe Hearts Plan”: it clearly covers it, but it also transcends it in scope and ambition. And that is fundamentally a political choice.

Alongside this, we share a **collective responsibility**. Grounding European recommendations and policy decisions into everyday clinical practice is an obligation for national authorities, and we must assure them, right now, of our full commitment

to collaborate. These recommendations will never truly make their way into general practitioners' and specialists' offices without active engagement, broad ownership, and a shared commitment across all key stakeholders.

In this light, it is crucial that each of us — within our respective professional bodies and entities — openly states today our level of commitment, and what we intend to achieve concretely in 2027.

Let me start. As far as we are concerned, we will continue to do our part:

- **First, by maintaining political pressure on national ministries**, ensuring that the recommendations we discussed today do not end up gathering dust in a drawer, and encouraging Member States to systematically integrate adult vaccination into care pathways for cardiovascular and chronic diseases. We recently brought this message to the national Parliaments of Romania and Poland, and we will soon be in Dublin in the framework of the Irish Presidency of the Council of the EU.
- **Second, by fostering citizen awareness and health literacy**, through European Policy Labs tailored for leaders of civic and patient organisations, alongside broader public awareness campaigns that empower people to actively consult their family doctors for integrated check-ups. When fully implemented, a true *cardiovascular health check* in a doctor's office must not stop at measuring blood pressure and cholesterol; it must routinely assess immunisation status against respiratory pathogens — influenza, COVID-19, pneumococcus, and RSV — which are well-established triggers of Major Adverse Cardiac Events (MACE). Achieving this standard would be a transformative milestone, and delivering it quickly depends on each of us. In this effort, an alliance with scientific societies and medical associations will remain decisive.
- **Third, by keeping respiratory infection prevention high on both the European and national agendas.** We want to ensure that impactful non-institutional

initiatives that are helping shape the European agenda — such as *RespyDay*, celebrated here at the European Parliament some days ago — take root within individual Member States. We have already succeeded in doing so with the European Patients' Rights Day, now approaching its 21st edition and celebrated across Europe by hundreds of institutional and civic health stakeholders. We aim to achieve the exact same pan-European reach for *RespyDay*. About the European Patients' Rights Day, I am pleased to inform you that the upcoming edition in 2027 will be dedicated precisely to respiratory health, and of course we will share full details in due course[1].

Acknowledgements

And now, as usual, I have my long list of acknowledgements:

- Warm thanks once again to all of you for participating, both here in the room and connected online. Throughout the meeting, I noticed many colleagues and friends joining us from several countries.
- Our gratitude goes to the hosting MEP, Michalis Hadjipantela, as well as MEP Tomislav Sokol, for their constant support and for making this initiative at the European Parliament possible.
- A special thank you to our moderator, Gary Finnegan, an award-winning journalist, and to all our distinguished speakers for their invaluable insights.

As always, many thanks to all my colleagues who worked on this initiative, especially Daniela and Bianca, who are here with us today, and all the colleagues working in Italy.

[1] https://juniperpublishers.com/ijoprs/pdf/IJOPRS.MS.ID.555746.pdf

I would also like to mention that this European policy dialogue event was made possible thanks to the EU project #VaccinAction, realized with the unconditional support of CSL Seqirus, MSD, Pfizer, and Sanofi, whom I would like to sincerely thank. Thanks also to our media partners:

- Health Europa;
- TrendSanità – Policy and Procurement in Healthcare;
- And our newest media partner, MedCrave, the online publishing group behind the peer-reviewed *Journal of Cardiology & Current Research*.

As usual, all proceedings and materials from today's session will shortly be made available on our website and circulated via our monthly newsletter.

Finally, mark your calendars: we will be back here at the European Parliament on 10 December 2026 for another high-level EU Policy Dialogue. While we will address a different topic — elevating the rights and unmet needs of adult-onset rare disease patients in Europe, hosted by MEP Vytenis Andriukaitis — we will bring the exact same civic passion and patient-centered perspective[2].

I look forward to seeing you soon.

I wish you all a pleasant rest of the day.

Thank you, and arrivederci.

[2] https://www.activecitizenship.net/events/1459-10-december-2026-eu-parliament-brussels-belgium-elevating-the-rights-of-patients-with-adult-onset-rare-diseases-in-europe.html