

Promoting civic information to better address the collateral damage of COVID-19 on cardiovascular disease across Europe

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11.30 to 13.00 CEST

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Opening remarks

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Welcome and good morning also from me.

Today we take the freedom - for a moment - to put in the background the current vaccination campaign against Covid-19 to better focus on the so-called "side impacts" of the pandemic, convinced that, even more in this historical moment, prevention activities, on one side, and chronic patient care on the other must go hand in hand with the progress being made in the fight against Covid-19. Especially if, as today, in occasion of the Annual "World Heart Day", we are talking about heart disease, which is the leading cause of death in the world, and the Covid-19 will expand this primacy.

In fact, according to the 2021 update from the American Heart Association's Heart Disease and Stroke Statistics, heart disease not only remains the leading cause of death worldwide but, as the experts here present can confirm, the global burden of cardiovascular disease will grow exponentially in the coming years due to the long-term effects of the Covid-19 pandemic. Covid-19 will directly and indirectly affect the prevalence and death rates of cardiovascular disease for years to come.

Research is showing that coronavirus can cause heart damage. In addition, people are delaying the treatment of heart attacks and strokes, which can lead to worse outcomes. And another even more critical problem is linked to the behaviors and lifestyle that prevailed during the pandemic, many of which increase the risk of heart disease and stroke: Unhealthy eating habits, increased alcohol consumption, lack of physical activity and the mental cost of quarantine isolation, and even the fear of contracting the virus, can have a negative impact on a person's risk of cardiovascular disease.

For example, in Italy, where I live, [the fear of contagion has tripled the mortality rate due to heart attacks](#) from 4.1% to 13.7%. A situation that risks of burning 20 years of prevention. The cause?

According to the Italian Society of Cardiology (Sic), the causes range from lack of care (the reduction in hospitalizations was of 60%) to delays (times increased by 39%), linked to the fear of contagion. The data is the result of a national study of Sic, conducted in 54 hospitals.

Although the Covid pandemic was concentrated in the north of Italy, [the reduction in hospitalizations for heart attacks has been homogeneously recorded throughout the country](#): 52.1% in the North and South and 59.3% in the Centre. [Heart attacks and strokes kill 240,000 people every year in Italy](#) and represent the first cause of death and disability.

Across Europe, the number of heart attack patients seeking urgent hospital care has dropped by more than 50% during the COVID-19 outbreak, according to an extensive worldwide [survey](#) by the European Society of Cardiology (ESC) that will be described in a while.

One year after, what is the situation across Europe? How have the vulnerable target groups and CVDs patients' been treated during the pandemic? How to increase awareness of a more than just primary prevention among people? What are the lessons learned by more resilient Health Care Systems in the area of CVDs? What should we expect from the implementation of the Recovery Plans across Europe?

I am sure that the experts invited today will be able to help us better understand the situation, even by referring to concrete initiatives that are being structured in this period, including appeals to institutions like the joint statement drafted just before summer to call on the EU to develop a comprehensive EU Plan on cardiovascular disease, advocacy activities like the "European Alliance for Cardiovascular Health" launched two days ago, and initiatives to raise awareness, like our communication campaign realized in 10 languages that will be showed by my colleague Daniela later on.

For my part, I would like to make a few general and specific premises.

The first relates to the need to take into consideration and join efforts to implement the [recommendations](#) sent by civic & patients organizations to the EU and National Institutions in occasion of the Global Health Summit in May and the most recent G20 Health Ministers' Meeting 2021, held at the beginning of September: we can find – among the others - the need to better monitor COVID-19 impact on non-COVID-19 patients; to support the Digital Healthcare transition; to affirm a life-course approach for chronic disease prevention; to address the specific rights of patients living with co-morbidity. All recommendations that fit well also for the community of the CVDs patients'.

The second premise is that also today's initiative, like the previous ones realized last June and July by Active Citizenship Network, is held in the framework of the cycle of EU Webinars «Health at the heart of the future of Europe», which my organization is holding to contribute to the debate of the Conference for the Future of Europe. And we are happy to know that this initiative has been hosted in the EU portal futureu, the hub-platform of the Conference on the Future of Europe, where European citizens, that is each one of us, are invited to speak up, to say what kind of Europe we want to live in, and to help shape our future.

Not only, as always our initiatives are hosted by the MEPs Interest Group “European patients' rights & cross-border healthcare”, promoted in 2015 by Active Citizenship Network and endorsed by 34 MEPs and almost 100 associations across Europe.

In this second term (2019-2024), the Interest Group has renewed its commitment to be a place of dialogue – a sort of citizens' agora about healthcare related issues - for the development of the policy making process at the EU level, with the objective to increase - with a multi-stakeholder perspective – the cooperation among EU Institutions, citizen & patient organizations. Its work is focused on the priorities underlined by the EU Commissioner for Health and Food Safety Stella Kyriakides, the promotion of patients' rights & the reduction of health inequalities.

Finally, let me thank in advance all the panelists invited, in particular MEP Kateřina Konečná for confirming also in this occasion her great attention to hearing the civic & patients' perspective, Donata Meroni from DG Santé for providing us the EU Commission's perspective, and the moderator: Jacqueline Bowman-Busato, patient advocacy consultant at the EU level and policy activist who strongly believes in empowering all actors to be effective and engaged in optimising health ecosystems for health outcomes relevant to all. She is the right person to chair our event today.

I wish you a fruitful webinar.