The European Academy of Allergy and Clinical Immunology (EAACI)

Advocacy Manifesto
Tackling the Allergy Crisis in Europe - Concerted Policy Action Needed
Allergy is the most common chronic disease in Europe. Up to 20% of patients with allergies live with a severe debilitating form of their condition, and struggle daily with the fear of a possible asthma attack, anaphylactic shock, or even death from an allergic reaction.

While at the beginning of the 20th century allergy was seen as a rare disease, in the last few decades we have witnessed a dramatic increase in disease burden. Today, more than 150 million Europeans suffer from chronic allergic diseases and the current prediction is that by 2025 half of the entire EU population will be affected.

As well as being devastating for individuals who face a relentless loss in productivity and impairment of their quality of life, dealing with these patients imposes a significant cost on national health systems. The avoidable indirect costs of failure to properly treat allergy in the EU is estimated to range between 55 and 151 billion Euro per annum.

As President of the European Academy of Allergy and Clinical Immunology (EAACI), I feel we have a duty to alert EU policymakers to the growing public health burden posed by allergy in Europe and the need to implement policy actions to help health care practitioners address this problem. The EAACI European Advocacy Manifesto proposes a series of evidence-based recommendations to tackle the burden of allergy in Europe, foster allergy research and help strengthen Allergology as a medical specialty.

The European Commission and Parliament have a duty to act to help millions of European citizens and relieve their suffering from allergies.

EAACI counts on your support.

Prof. Antonella Muraro
President
European Academy of Allergy and Clinical Immunology

**ALLERGY EPIDEMIOLOGY**

150 million EU citizens suffer from chronic allergic disease

by 2025 more than 50% of all Europeans will suffer from allergy

45% of allergy patients are likely to be misdiagnosed in the EU

100 million Europeans suffer from allergic rhinitis

70 million suffer from asthma

7 million Europeans live with a food allergy

8% of which produce acute anaphylaxis and are potentially fatal.

**BURDEN ON DAILY LIVING AND PRODUCTIVITY**

Asthma and allergic rhinitis alone are estimated to result in more than 100 million lost workdays and missed school days in Europe every year.

if patients were treated appropriately with available cost-effective treatments, an average savings of €142 billion per annum could be realised.
UNMET NEEDS OF ALLERGIC DISEASES

1. ALLERGY IN THE EU: A PUBLIC HEALTH CONCERN OF GROWING PROPORTIONS

ALLERGY PREVALENCE

When more than 150 million EU citizens suffer from chronic allergic diseases, half of whom are underdiagnosed or poorly managed due to a lack of awareness and shortage of medical specialists, we are confronted with a public health crisis – one that needs to be promptly addressed.

This 150 million figure is predicted to increase exponentially and it is estimated that by 2025 more than 50% of all Europeans will suffer from at least one type of allergy, with no age, social or geographical distinction.

The prevalence of allergic diseases is growing rapidly in parallel to allergy triggers which include urbanisation, industrialisation, pollution and climate change – factors that are not expected to reduce in the foreseeable future. Further, these figures are considered to be an underestimation, as many patients do not report their symptoms or are not correctly diagnosed, with an estimated 45% of patients having never received an allergy diagnosis.

BURDEN ON DAILY LIVING AND PRODUCTIVITY

Often, allergic patients suffer from a debilitating disease, with the potential for major impact on their quality of life, education performance, career progression and personal development.

Most allergic conditions start in childhood and disproportionately affect children and teenagers, making the chance of a severe allergic reaction during school hours high, yet teachers are often not informed or prepared for such events.

Allergic disease tends to peak during an individual’s high-productivity years, occupying a large share of their daily time. The associated reduction in productivity and the increase in sick leave represent some of the largest negative outputs, thereby impacting national, business and health economies in Europe.

Asthma and allergic rhinitis alone are estimated to result in more than 100 million lost workdays and missed school days in Europe every year. This figure is compounded by an increase in presenteeism, in which a person still goes to work but owing to their condition, is unable to perform to their fullest capacity.

The latest scientific evidence review conducted by the GA²LEN Network of Excellence estimates that avoidable indirect costs for insufficiently treated allergy in the EU range between 55 billion and 151 billion euro per annum due to absenteeism and presenteeism. If patients were treated appropriately with available cost-effective treatments, average savings of 142 billion euro per annum could be realised.

CASE STUDY:

Launched in 2008, the Finnish Allergy Programme is a unique 10-year public health programme with an educational action plan that unites health care professionals and non-governmental organisations (NGOs) in an effort to reduce the burden of allergy.

Taking a ‘holistic’ approach to allergy prevention, the programme seeks to increase tolerance to allergens in the population, improve allergy diagnostics, reduce work-related allergies, focus on severe allergies to reduce exacerbations and attacks, and reduce the health care costs caused by allergies.

Successful implementation of the programme was possible thanks to multi-stakeholder cooperation including patient organisations and taking advantage of a wide network of doctors, nurses, pharmacists – established during a previous asthma programme, (1994-2004). This further allowed the programme to connect 250 primary care centres (including maternal and child health clinics) and approximately 1000 units offering occupational health service.

A key element of the programme was the education of health care professionals and patients, and implementation of public communication and awareness-raising campaigns involving provincial governments, hospital districts, day-care centres, day nurseries, pharmacies and society at large.

The first 5-year results of the Finnish programme indicated rapid changes for the better. With a reach of almost two million Finns, between 2011-2013 the need for food-allergy diets in many day-care centres and schools has decreased by 20-30%. Asthma emergency visits and days in hospital have been halved. Occupational allergies have fallen by 40%. Between 2000 and 2010, the direct allergy and asthma costs together with costs of disability pensions fell by 9%. During the early years of the programme, 2007-2011, these costs have been reduced from € 379 million to € 362 million (5%). Asthma costs decreased by 7% and comprised 65% of all direct allergy and asthma costs.
2. ALLERGIC DISEASES: THE NEED FOR PRIORITY FOCUS IN HEALTH RESEARCH

Allergy is already the most prevalent chronic disease of the 21st century and the burden is growing. The sheer numbers of sufferers merits prioritisation through concerted research efforts and public health programmes involving all stakeholders including patients and health policy-makers, to improve prevention, diagnosis and treatment.

Allergy research priorities include:

- Deciphering phenotypes and endotypes to categorise clinical syndromes into more uniform and treatment-responsive groups so that European citizens can benefit from the potential of personalised allergy medicine.
- Support research efforts to unveil pathways and mechanisms of allergies to allow for the design of novel patient-oriented diagnostic and treatment protocols.
- Support the establishment of pan-European allergy bio-banks and registries to allow for surveillance and monitoring of allergy trends in Europe, improvements in allergy management and data for pharmaco-economic and socio-economic studies.
- Translational research in allergy to bring promising new biotechnological innovations, (e.g. biological agents, vaccines of modified allergen molecules and engineered components for allergy diagnosis) closer to clinical practice.
- Research to prevent and cure allergic disease, actively supporting research in allergen immunotherapy which holds great promise for targeted allergy management.

3. ALLERGOLOGY IN EUROPE: THE NEED TO HARMONISE MEDICAL EDUCATION, DISCIPLINES AND SPECIALTIES

National health systems across Europe differ greatly in terms of allergy services provided and access to specialised health care professionals.

Allergology is recognised as a full medical speciality in only 15 EU countries. This discrepancy between Member States inevitably leads to inequalities in management of allergic diseases in Europe. In addition, recent statistics reveal a deficit and growing disparity in the number of allergists in Europe. And even in countries where allergology is recognised as a full medical speciality, automatic recognition between Member States is often hampered by bureaucracy.

Furthermore, due to the increasing burden of allergy in Europe, primary care doctors are responsible for diagnosing, treating and following half of all identified allergy patients in Europe. However, there is currently a recognised knowledge gap in the level of allergy training given to primary care doctors. This is particularly worrisome when attending to patients with severe and life-threatening allergies.

Recognition and prioritisation of allergy education in primary care is urgently needed to improve patient outcomes and to prevent devastating consequences including the need to:

- Equip primary care doctors with adequate knowledge in allergy; provide them with the competence to administer first aid and understand when to refer to specialised care.
- Include allergic disease in the mandatory general curriculum of all medical schools in the EU.
- Recognise Allergology as a full medical specialty in all EU Member States.
EAACI CALLS ON EU POLICY MAKERS TO COORDINATE ACTIONS TO IMPROVE ALLERGY CARE

PUBLIC HEALTH
- Develop a comprehensive EU framework on chronic diseases by 2017 recognising allergies as part of this public health priority
- Allocate funding under the Health Programme 2014-2020 for pan-European prevention and awareness campaigns to drive recognition of the burden of allergic disease and support cooperation and exchange of best practices between Member States
- Support the establishment of pan-European Centres of Excellence in allergy to guide the implementation of national allergy programmes in Europe

HEALTH RESEARCH
- Foster allergy research in Europe by ensuring allocation of funding under Horizon 2020
- Encourage the creation of pan-European allergy registries and biobanks for the generation of better quality data and to support a targeted and personalised approach to allergy treatment
- Promote awareness of the effectiveness of allergen-specific immunotherapy and support European research to cure allergy

MEDICAL SPECIALTY
- Encourage the formal recognition of a full medical specialty in allergology and of a sub-specialty of pediatric-allergology throughout all EU Member States
- Promote and harmonise allergy training and education for primary care to improve early and accurate diagnosis and treatment
- Develop and implement an educational model of allergology in all medical schools across the EU
EAACI IN THE EU

Founded in 1956, the European Academy of Allergy and Clinical Immunology, EAACI, is a non-profit association comprising 49 European National Societies, more than 9,000 academicians, research investigators and clinicians.

The Vision of EAACI is to lead the way towards better understanding, improved management and eventual cure of allergies, asthma and immunological diseases.

The organisation aims at:
• Promoting basic and clinical research
• Collecting, assessing and diffusing scientific information
• Being a scientific reference body for other scientific, health and political organisations and an advocate towards political organisations and the general public
• Encouraging and providing training, continuous education and professional development
• Collaborating with patients and lay organisations in the area of allergy and clinical immunology

EAACI, as the leading European medical society focusing on allergy, has a key role to play in the formulation of health and research policy at a European level.

In recent years EAACI has led major public awareness campaigns on allergy, developed a series of public declarations on specific advocacy topics (e.g. Immunotherapy, Food Allergy & Anaphylaxis) and organised dedicated policy events in the European Parliament.

In 2014, EAACI opened an EU liaison office in Brussels and streamlined its advocacy work with the development of a dedicated Roadmap for European Advocacy which provides a platform to help place allergy higher on the EU public health and research agenda and translate policy opportunities into meaningful action.

EAACI has also joined forces with the European Chronic Disease Alliance (ECDA) and the Alliance for Biomedical Research in Europe (BioMed Alliance), to unite its voice with those in the fields of chronic diseases and biomedical research, respectively.

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