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EU Health Research Policies


On 13 October, the European Commission adopted a new Work Programme for 2016-17, which includes almost €16 billion to be invested in research and innovation in the next two years under Horizon 2020, the EU’s research and innovation funding scheme. The programme focuses on the EU’s long-term priorities and the most pressing societal challenges while allowing it to swiftly address emerging problems such as outbreaks of diseases.

The new Work Programme will also ensure more money is available for innovative companies thanks to new leveraging opportunities supported by the European Fund for Strategic Investments (EFSI), in addition to over €740 million dedicated to support research and innovation activities in nearly 2000 small and medium enterprises (SMEs). More will also be done to improve synergies with other EU funding programmes, as well as support researchers in their applications with clearer guidance and impact criteria.

In agreement with the draft version that we reported on in September, the specific Work Programme for Health, demographic change and well-being includes:

- A call on new therapies for chronic diseases: this focuses on clinical trial(s), supporting proof of concept of clinical safety and efficacy in humans of novel therapies (pharmacological as well as nonpharmacological) or the optimisation of available therapies (e.g. repurposing) for chronic noncommunicable or chronic infectious diseases.
- A call related to the Global Alliance for Chronic Diseases (GACD) : topic details to be provided during the course of 2016.
- A Commission’s grant to the GACD, in order to take part in the alliance.

b. European Research Council opens 2016 grant competition for mid-career researchers

Set up in 2007 by the EU, the European Research Council (ERC) is the first European funding organisation for excellent frontier research. The ERC complements other funding activities in Europe such as those of the national research funding agencies, and is a flagship component of the EU research and innovation programme Horizon 2020.

This October, the European Research Council (ERC) has opened the next competition for its Consolidator Grants. More than €600 million is earmarked for an estimated 335 grants (each with the maximum duration of 5 years). The deadline for submission of research proposals is 2 February 2016.

ERC Consolidator Grants are designed to support excellent individual researchers who have 7 to 12 years of experience since the completion of their PhD, and are consolidating their own independent research team. The competition is open to researchers worldwide of any nationality and in any scientific area, and candidates must apply together with any university or research institution based in Europe.

Action Recommendation

- EAACI to inform membership and draw their attention on the call on new therapies for chronic diseases.
EU Public Health Policies

a. WHO publishes the “World report on ageing and health 2015”

On the 30th September, WHO published the "World report on ageing and health 2015", which outlines a framework for action to foster Healthy Ageing built around the new concept of functional ability.

The report rejects the stereotype of older people as frail and dependent and says the many contributions that older people make (to families, communities and society more broadly) are often overlooked. At the same time, the report finds that there is very little evidence that the added years of life are being experienced in better health than in the previous generations, particularly for less advantaged segments of society.

The document hence stresses that governments must ensure policies that enable older people to continue participating in society and that avoid reinforcing the inequities that often underpin poor health in older age.

The report highlights 3 key areas for action which will require a fundamental shift in the way society thinks about ageing and older people:

- Make the places we live in much more friendly to older people
- Realign health systems to the needs of older people. This will require a shift from systems that are designed around curing acute disease, to systems that can provide ongoing care for the chronic conditions that are more prevalent in older age.
- Develop long-term care systems that can reduce inappropriate use of acute health services and ensure people live their last years with dignity.

The report finds that making these investments will have valuable social and economic returns, both in terms of health and wellbeing of older people and in enabling their on-going participation in society.

b. Commission publishes final report on communication to tackle chronic diseases

On the 19th October, the Directorate General for Health and Food Safety of the European Commission (DG SANTE) released the Final Report on the scoping study on communication in preventing and addressing chronic diseases.

The study's purpose was to provide evidence and insights to inform DG SANTE’s work in future cross-border campaigning to tackle chronic disease at European level. It provides an overview of the key communication issues and identifies differences and characteristics of existing good practice.

The study focused on the four main risk factors of smoking, unhealthy diet, sedentary lifestyle and alcohol consumption, and gathered a varied and wide evidence base, highlighting the role of formative research and strategic partnerships in successful campaigning. The focus was on behaviour change – rather than awareness raising - as the primary outcome of interest.
c. EC Conference: “Which priorities for a European policy on multimorbidity?”

On 28th October, the European Commission organised a first conference on ‘which priorities for an European policy on multimorbidity’.

Multimorbidity is defined as having two or more chronic medical conditions simultaneously. There are already an estimated 50 million people in the EU suffering from two or more long-term conditions. By 2020 a quarter of Europeans will be over 60 years of age and multimorbidity will be the norm rather than the exception.

The conference was opened by DG SANTE’s Director-General Xavier Prats Monné who emphasized that: “Multimorbidity is a long word that hides long suffering” and that an EU Policy to tackle multimorbidity means “breaking silos, not treating patients one discipline at a time. A paradigm shift from a disease-oriented approach to a patient-oriented approach is necessary to adopt efficient and effective prevention and cure measures: we need to look to the patients’ lens”

The event gathered all stakeholders interested in the management of patients with multiple illnesses to:

- Raise awareness on the relevance and urgency to deal with multimorbidity
- Share experiences and practices in the management of multimorbidity
- Learn from innovative healthcare approaches

The conference concluded that multimorbidity has significant implications for the European economy, labour market, social security and healthcare systems and the quality of life of European citizens. Understanding and tackling it from a research, clinical and community care perspective is an opportunity to bring about this paradigm shift from a disease-oriented approach to a patient-oriented one. Martin Seychell, DG SANTE’s Deputy Director-General, further ensured participants that the European Commission will work to support and facilitate the implementation of interventions at national and regional level to address the challenges posed by multimorbidity.

The agenda of the conference can be found here. The Commission is preparing a full report that will be released in the coming month.

Action Recommendation

- EAACI secretariat to share with full membership for their general knowledge

- Explore together how to address the barriers to address a common framework on multimorbidity
- Create a common engagement across stakeholders to start addressing the issue at European level

The conference recommended:

- EAACI secretariat to share with full membership for their general knowledge

- EAACI secretariat to monitor progress in discussions at EU level around multi-morbidity and use multi-morbidity as a policy hook to position the ‘allergic patient’ higher on the EU health and research agenda


d. 8th EU Public Health Conference: Chafea workshop on EU level cooperation in health

On the 14th October the Consumers, Health, Agriculture and Food Executive Agency of the European Commission (Chafea), organised a satellite workshop in the framework of the 8th European Public Health Conference.
The workshop was focused on challenges and opportunities arising from EU level cooperation in the area of health systems. Its aim was to showcase how the 3rd Health Programme contributes to such cooperation, through funding several actions in the areas identified in the European Commission's communication on effective, accessible and resilient health systems as being key to health systems performance and sustainability.

Bringing together experts, health professionals and policy makers, the event also highlighted the role played by public health professionals in sharing experiences and transferring knowledge across the EU.

**Action Recommendation**

- EAACI secretariat to share with membership for their general knowledge.

**Environmental Health**


On 28 October, the European Parliament (EP) in plenary voted its position on the new National Emission Ceilings (NEC) Directive, a piece of legislation that sets maximum binding air pollution levels within the European Union for the next 15 years.

After the clear message in favour of health sent by the Environment and Health Committee in July (please see Volume 14 of this newsletter), the EP plenary positioned itself somewhat half way between its Committee and the Commission proposal (with weaker commitments).

The final position of the EP is friendlier to health interests than the Commission’s proposal, with intermediate binding targets for 2025 for all pollutants. However, it contains less ambitious emission levels than what was proposed by the Committee. For more information, please find the official EP press release here.

The European Parliament is now going to enter into negotiations with the Council of the European Union and the Commission in view of reaching an agreement in first reading.

**EAACI’s action on the dossier**

To address this important dossier, EAACI has partnered with major European environment and health organizations, working within two different coalitions:

1) In the European Chronic Disease Alliance, EAACI has contributed to the development of the paper *Particulates Matter: why the EU must do more to tackle air pollution*. The paper was disseminated to all MEPs ahead of the NEC vote by the chairs of the European Parliament health interest groups, including MEP Sirpa Pietikäinen, chair of the Interest Group on Allergy and Asthma.

2) EAACI has also worked within a coalition of major European Environment and Health NGOs. Together and in order to influence the Parliament towards putting health above any other interest in the NEC vote, they sent an open letter to MEPs; have conducted a campaign for MEPs to measure air pollution in Brussels; written voting recommendations for MEPs ahead of the vote; and conducted social media campaigns.

**Action Recommendation**

- EAACI secretariat to inform the full membership of the successful involvement of the society in advocating for environmental health at EU level and to highlight the strong link EAACI has strengthened further with key health and environment stakeholders in Brussels.
b. COP21: negotiations on contentious areas continue

The 21st UN conference on climate change conference (COP 21) is to take place in Paris in December and is aimed at reaching an agreement to replace the Kyoto Protocol, the object of which was to reduce CO2 emissions between 2008 and 2012.

In October, a new round of negotiations took place in Bonn in preparation for the Paris meeting. To date, the main areas of disagreement are:

- The contentious term ‘decarbonisation’, which means stopping to rely on coal as a major source of energy. The EU refuses to use the term, due to some Member State’s positions
- The term ‘developed country’, given that those would have to pay for the greenhouse gases they have been emitting since the industrial revolution. The problem is that great powers such as South Korea, Singapore, Brazil, Saudi Arabia and China are out of the definition.

According to observers, reaching an agreement – whether with legally binding targets for emissions reduction or not- is the priority. EU Climate Commissioner Miguel Arias Cañete pointed out in October that a legally binding overarching target may not be possible and that “we cannot make the mistake we made in Kyoto”. The Kyoto Protocol was indeed a binding agreement, but was only signed by 35 countries, covering only 13% of global emissions.

At EU level, the European Parliament has organised a delegation of MEPs to attend COP 21 with the mandate to call for a 40% cut in greenhouse gas emissions by 2030, a 40% energy-efficiency target and a binding 30% target for renewable energy. Further details on the EP Delegation Roadmap for COP21 can be found here.

c. Specifications for health warnings on cigarette packages adopted

In October, the EU adopted specifications for the new combined health warnings on packages of tobacco products for smoking (in particular cigarettes and roll-your-own tobacco). The new health warnings should cover 65% of the front and back of packages.

The implementing decision gives technical specifications for the layout, design and shape of the combined health warnings taking into account different packet shapes and will appear on packages from May 2016. To see a mock up on how those would look like, please click here.

More on the fight against Tobacco in Europe

In the frame of its campaign ‘Ex-Smokers are Unstoppable’, the Commission is celebrating the ‘Day of the Ex-smoker’: ex-smokers all over Europe will be able to light a virtual sparkler on a digital map of Europe. They may do the same to recognise the success of a loved one who also quit the habit. The final map of Europe with all the sparklers will be revealed in Brussels by Health and Food Safety Commissioner, Vytenis Andriukaitis.

Since 1st October, smoking in cars with children is banned in England and Wales. It is now also against the law for a driver not to stop someone smoking in these circumstances. The fine for both offences is £50. For more information, please click here.

Action Recommendation

- EAACI secretariat to share with membership for their general knowledge.
Annexes

Parliamentary Questions

Questions answered in October

- Horizon 2020 - Science Advice Mechanism (SAM)
- Incorrect implementation of health directive
- Inclusion of health sector in future treaty reform

Questions tabled in October

- Link between air pollution and respiratory disease
- Combating respiratory diseases in the EU
- The EU role in Global Health (Programme for Action)
- Cross-border healthcare by the Member States

EU events tracker

- 17-19 November, 3rd European Health Literacy Conference, Brussels
- 17-20 November, Knowledge4Innovation, 6th European Innovation Summit, Brussels
- 1-2 December, Joint Digital Healthcare 2015 Symposium, Brussels
- 7-10 December, Knowledge4Innovation, 7th European Innovation Summit, Brussels