

# CONFERENCE REPORT

**S·A·F·E**

Stroke Alliance For Europe

THE STROKE PATIENT  
VOICE IN EUROPE



## Joining forces to prevent and control non-communicable diseases: **The role of policy in tackling stroke**

Putting the Stroke Action Plan for Europe  
2018-2030 in the spotlight

*28 March 2019*

*European Committee of the Regions*



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## Executive Summary

The event 'Joining forces to prevent and control non-communicable diseases: The role of policy in tackling stroke' took place on 28 March 2019 in Brussels, at the Committee of the Regions (CoR). The event, held under the patronage of the Romanian Presidency of the Council of the European Union (EU), was organised by the Stroke Alliance for Europe (SAFE) in collaboration with the European Stroke Organisation (ESO) and the Romanian National Association of Stroke (ANRS), and kindly supported by our corporate partners: the Angels Initiative, Amgen and the BMS-Pfizer Alliance. The agenda and speakers' bios can be found in the event webpage<sup>1</sup>.

The conference represented an important opportunity to bring together European, national and local policy stakeholders to foster discussions on the need for policy action in the area of stroke. In particular, as identified by SAFE's Burden of Stroke in Europe Report, a priority was to address the disparities between and within European countries across the stroke care pathway - from primary prevention to life after stroke. The event also looked into the role of policy and policy stakeholders in achieving the ambitious targets of the 'Stroke Action Plan for Europe 2018-2030'. We are hopeful that the discussions will feed into the Romanian and upcoming Finnish and Croatian presidencies' health priorities, as well as current and future EU action for preventing and controlling non-communicable diseases (NCDs).

During the panel discussion, patient representatives and clinical experts called on the EU Institutions to recognise the burden of stroke as its own incredibly important entity, rather than diluting it in the wider classification of cardiovascular diseases. Panellists representing patients and clinicians also called for the EU to facilitate discussions between its Member States on the implementation of the Stroke Action Plan for Europe.

A number of actions were identified as viable options for EU action on stroke during the event. Firstly, Martin Seychell, Deputy Director General at DG SANTE, offered to facilitate discussions

on the Stroke Action Plan for Europe within the NCDs Steering Group, as well as to assist Member States with the identification and transfer of best practices. Then, Rokas Navickas, Scientific coordinator at the CHRODIS+ Joint Action, proposed a collaboration between SAFE, ESO and the CHRODIS + Joint Action, including a potential future project on stroke. Finally, Mikel Irujo Amezaga, member of the CoR, proposed moving forward with an own-initiative report driven by the CoR and encouraged SAFE and ESO to pursue different available opportunities for regional collaboration and funding, including the EP Pilot Projects and the Interreg Thematic Platforms.

As a next step to this meeting, SAFE and ESO will follow-up with speakers and participants to move forward with the identified opportunities. Joining forces with EU policy-makers to address the burden of stroke that stroke survivors, their families and the overall society is currently facing is essential. We need to call on them to follow through on their suggestions to help implement the Stroke Action Plan for Europe and, together, make a difference!



<sup>1</sup> <https://www.safestroke.eu/2019-joint-event-with-romanian-presidency-of-the-council-presidency/>

## Setting the Scene

**JON BARRICK**, President of SAFE, opened the conference by welcoming all participants and expressing his gratitude to the Romanian Presidency of the Council of the EU for endorsing the event.



*"There will be a 34% increase in stroke by 2035. SAFE is committed to promoting the implementation of the Stroke Action Plan for Europe to reverse this trend."*

**Jon Barrick**

He reminded everyone that, between 2015 and 2035, the absolute number of strokes is expected to rise by 34% in Europe. Mr. Barrick highlighted that the Stroke Action Plan for Europe 2018-2030, launched by SAFE and ESO in 2018, provides European countries with the tools to reverse this trend. The report proposes an approach to stroke management, from primary prevention to acute care, rehabilitation and life after stroke. It sets out minimum targets to be reached in every European country by 2030, to equalise quality of care across Europe.

### **TIBERIUS-MARIUS BRĂDĂȚAN,**



Secretary of State of the Romanian Ministry of Health (MoH), addressed the conference on behalf of the Romanian Minister of Health, Sorina Pintea. He reiterated the alarming statistics on stroke before presenting the progress

made by Romania in dramatically increasing the availability of stroke treatment across the country.

Dr. Brădățan pointed to the commitment of the Romanian MoH to a Priority Action for Stroke Interventional Treatment. He called on all European countries to align their national stroke strategy with the Stroke Action Plan for Europe, in order to successfully reduce the burden of stroke on individuals, families and countries' economies.

The session was continued by Jon Barrick, who presented the Stroke Action Plan for Europe 2018-2030. He explained how the findings from the Burden of Stroke report, which unveiled shocking disparities along the entire stroke care pathway between and within European countries, led to the creation of the Stroke Action Plan for Europe together with ESO. Mr. Barrick outlined the targets set by the Action Plan, pointing out how the Plan is complementary to key policies – including the World Health Organization (WHO) Development Goals (SDGs) and the WHO-Europe Action Plan for the Prevention and Control of NCDs - therefore supporting countries in achieving wider European and global goals.

He concluded by proposing several opportunities for future cooperation between the EU and its Member States on stroke, including leveraging the EU Steering Group on Health Promotion, Disease Prevention and Management of NCDs to facilitate discussions on the implementation of the Action Plan, as well as the exchange of evidence-based best practices.

**BO NORRVING**, Neurology Professor at Lund University in Sweden and Coordinator of the Stroke Action Plan for Europe, brought the perspective of the medical experts to the discussions. He emphasised how the period 1995-2018 demonstrated remarkable progress in terms of organised stroke care, acute therapies, secondary prevention and rehabilitation. He also explained how this was partially supported by the adoption of three major Action Plans during this period: the 1st Helsingborg Declaration, in 1995; the 2nd Helsingborg Declaration, in 2006; and, more recently, the Stroke Action Plan for Europe 2018-2030, in 2018.



*“While we are discussing the implementation of the European Stroke Action Plan, strokes continue to occur, and patients continue to get substandard care.”*

**Bo Norrving**

Building on the Swedish experience, where there has been remarkable progress in stroke care in the last decade, Prof. Norrving stressed that with the right level of attention to and investment in stroke prevention and care, strokes can be substantially prevented therefore alleviating the burden put on society. He went on to outline the role of the healthcare professional in supporting the implementation of the Stroke Action Plan for Europe. Prof. Norrving concluded his presentation by reinforcing SAFE’s President’s messages that all stakeholders, from Stroke Support Organisations to policy-makers, should work together to implement the Stroke Action Plan and improve stroke care.



**SORIN TUTA**, Vice-President of ANRS, and **CRISTINA TIU**, Elected Future President of the Romanian Neurology Society (SNR) for 2021-2025, focused on the current situation for stroke in Romania. They mentioned

that Romania is unfortunately still part of the Eastern European stroke red belt, demonstrating high numbers of stroke incidence, prevalence and mortality. Dr. Tuta and Dr. Tiu emphasised some of the national responses adopted to address the burden of stroke, such as the creation of 32 new stroke ready hospitals in 2019. Whilst progress is being made, several gaps and challenges remain: there is a lack of stroke awareness and

educational campaigns targeted at the general population and doctors; less than 8% (vs. the 90% target set by the Action Plan) of stroke patients are admitted in stroke units for first level of care; only 1,3% (vs. the 15% target set by the Action Plan) of patients are treated with I.V. thrombolysis; and less than 5% of stroke survivors are admitted to a rehabilitation unit post-stroke. On the other hand, some best practices were identified, including the establishment of an interventional treatment registry, the adoption of updated clinical guidelines and treatment almost exclusively delivered by neurologists. Finally, ANRS and SNR showcased their commitment to the implementation of the Stroke Action Plan for Europe at country level.



**TIINA LAATIKAINEN**, Research Professor at the National Institute for Health and Welfare of Finland, presented the successes and challenges of stroke care in Finland and shared insights on key activities to be rolled-out in the framework of the Finish Presidency of the Council of the EU. Prof. Laatikainen showed how stroke incidence, mortality and case-fatality have been declining in Finland as a result of continuous improvements in the health system.



*“Supporting legislation and financial mechanisms as well as involvement of the third sector are needed to guarantee appropriate resources for rehabilitation.”*

**Tiina Laatikainen**

She emphasised that in Finland standard clinical guidelines, funded by the government, are a result of consensus between several national medical societies, therefore facilitating their implementation in practice.



She also mentioned that stroke units exist in all central hospitals, emergency care is well organised, telestroke services are available 24/7 if neurologists are not available, and preventive efforts are actively conducted by many stakeholders, including non-governmental organisations. Yet, Finland also faces several challenges: atrial fibrillation treatment needs to be improved; endovascular treatment is not always available; and secondary prevention should be better implemented. Rehabilitation was highlighted as the major challenge; less than 15% of survivors achieve adequate and comprehensive rehabilitation and, consequently, 1 in 4 working aged stroke survivors do not return to work. Finally, Prof. Laatikainen detailed the planned activities for the upcoming Finnish Presidency in relation to stroke: a 'Demographic Change and Policy Integration seminar' (October 2019, Helsinki) and an event on 'Supporting Health and Social Care Innovation to Enhance Wellbeing of European Citizens' (November 2019, Brussels).

Joining this event through a video message, **MILAN KUJUNDŽIĆ**, Minister of Health of the Republic of Croatia, highlighted the actions that have been taken by Croatia to tackle the burden of stroke. Stroke is the second highest cause of death in Croatia. This led to Croatia adopting a national strategy for the prevention and treatment of stroke, whose main goal is to provide timely and quality care for patients experiencing acute ischaemic stroke. With the Healthy Living Programme, Croatia has also secured grants for improving knowledge and practice in relation to key areas such as nutrition, promotion of physical activity, and mental health. Finally, Dr. Kujundžić welcomed SAFE and ESO's joint activities stressing that, by working together, stakeholders can reduce the burden of stroke as well as improve the overall health of European citizens.

Ahead of the panel discussion, **MARTIN SEYCHELL**, Deputy Director General for Health and Food Safety, focussed on the overarching actions led by the European Commission (EC) that have contributed to a reduction of the burden of stroke. Mr. Seychell explained how the EC's preferred approach is to identify and tackle horizontal challenges rather than disease-specific issues. He noted a number of relevant EC-led

actions on NCDs, nutrition, tobacco, among others. In the area of NCDs he highlighted the role of the EC in supporting Member States achieve the voluntary NCDs targets set by WHO, as well as the SDGs, whilst contributing to the reduction of health inequalities across the EU.



*"Stroke and heart diseases are major killers in Europe."*

**Martin Seychell**

One of the actions taken in this framework was the creation of the high-level Steering Group on Health Promotion, Disease Prevention and Management of NCDs, whose main aim is to support Member States with the identification and transfer of best practices based on priorities defined by the group. Priority issues in the 2017-2019 period included, amongst others, cardiovascular diseases, nutrition, physical activity and mental health. Mr. Seychell also mentioned the CHRODIS+ Joint Action, which assists Member States in the identification and implementation of best practices in preventing and managing chronic diseases. Whilst the Joint Action is not working specifically on stroke, several tools could be relevant to stroke survivors (e.g. the multimorbidity integrated care model). He pointed out that the next Multiannual Financial Framework provides an unprecedented opportunity to fund health projects through programmes such as Horizon Europe, the European Social Fund +, the Invest EU Programme, Digital Europe, and the European Regional Development Fund. He concluded by congratulating SAFE and ESO for the development of the Stroke Action Plan for Europe and stressed that now is the right time to step up efforts to ensure European citizens, regardless of where they live, have the right to receive the same quality care, from prevention to life after stroke.



## Panel Discussion 'The Role of Policy in Tackling Stroke'

The panel discussion brought together key stakeholders to discuss the role of policy in addressing the current burden of stroke across Europe. Panellists also discussed what national and regional policy stakeholders should do moving forward, to advance stroke policy through the implementation of the recommendations outlined in the Stroke Action Plan for Europe. The discussion featured the following speakers:

**Martin Seychell,**  
Deputy Director General for Health and  
Food Safety, DG SANTE

**Tiberius-Marius Brădăţan,**  
Secretary of State, MoH of Romania

**Rokas Navickas,**  
Scientific Coordinator of the CHRODIS  
PLUS Joint Action

**Mikel Irujo Amezaga,**  
Member of the European Committee of the  
Regions

**Bart van der Worp,**  
President of the European Stroke  
Organisation

**Grethe Lunde,**  
Stroke Survivor & SAFE Board Member

The session was moderated by Cathy Smith, a professional moderator from SpeakEasy. The section on the next page highlights the main take-aways from the panel discussion:



## Prioritising stroke in policy

Patient and clinical expert representatives called on the EU to recognise the burden of stroke as a priority health issue. Given that stroke is the number one cause of disability across Europe, and in line with WHO, stroke should be singled out by EU policy-makers rather than included in the basket of cardiovascular diseases and, therefore, forgotten.

The implementation of the Stroke Action Plan for Europe was noted as the solution to reduce disparities between, and within, countries across the whole stroke care pathway - from primary prevention to life after stroke. This is essential to guarantee that European citizens, regardless of where they live, receive the same quality of care. Other national disparities, such as available health budgets or organisation of health systems (centralised or decentralised) are also a challenge to the implementation of Action Plan itself.

To effectively tackle the burden of stroke, stakeholders need to agree on the priority issues - both stroke-specific challenges and horizontal issues, which are common to other diseases – to understand how to speed up the transfer of best practices, so that they become standard practices. The Stroke Action Plan for Europe provides a great foundation for this exercise.

Martin Seychell highlighted that horizontal issues, such as the organisation of healthcare systems, are often the cause of health inequalities. This is where the EU can play a bigger role, for instance, by supporting Member States in strengthening health systems, including primary care.





## Prioritising stroke in research funding and innovation

Although the implementation of the Stroke Action Plan's recommendations has to be accomplished at national level, it was stressed that the **EU should facilitate discussions between Member States and support them with the transfer of best practices**. The EU should **dedicate research and innovation funds to stroke-specific projects**.

Martin Seychell highlighted the next Multifinancial Framework as an opportunity for stroke. In the framework of the future Horizon Europe Research Programme, the budget for health-applied research has significantly increased (7.7 billion euros over a 7-year period) and the EC will also guarantee a bigger involvement of the health community in setting the research priorities. The Digital Europe and the Structural Reform Support Programmes were flagged as new programmes with a potential impact on stroke too.

Mikel Irujo Amezaga mentioned the EP Pilot Projects and the Interreg Europe Thematic Platforms as regional funding/cooperation instruments that could be leveraged for stroke. He encouraged SAFE and ESO to consider pursuing these options.





## Opportunities for future EU and national collaboration on stroke

Martin Seychell and Rokas Navickas proposed leveraging existing platforms facilitated by the EU - namely the CHRODIS + Joint Action, the Steering Group on Health Promotion, Disease Prevention and Management of NCD, and the Health Policy Platform - for future action on stroke.

Martin Seychell offered to facilitate discussions on the Stroke Action Plan for Europe within the Steering Group on Health Promotion, Disease Prevention and Management of NCDs, as well as to assist Member States in identifying priority actions, transferring best practices and assessing areas where the EU can add value through existing EU platforms.

Rokas Navickas proposed collaboration between SAFE, ESO and the CHRODIS + Joint Action, including the preparation of a potential future project on stroke. The Joint Action could contribute by helping identify stroke best practices currently implemented across Europe and supporting the development and implementation of a strategy for the transfer of those to different countries.

Martin Seychell also invited patient groups and medical societies to join the Health Policy Platform, to interact with other key policy stakeholders, help raise the profile of stroke at EU level and drive community consensus on stroke specific policy issues.

Further options for future work were raised by Mikel Irujo Amezaga, namely a European Committee of the Regions own-initiative report, which he offered to support with, or an EP resolution. If issued, these could be leveraged by local patient groups and medical societies when engaging with national policy-makers to call for the implementation of the Stroke Action Plan for Europe's recommendations.

During his closing remarks, **Jon Barrick** highlighted the need for recognising stroke as an investable proposition and closing the gap between research and policy by ensuring the implementation of coherent and evidence-based stroke care pathways across the different European countries.



## Next Steps

As a follow-up to the meeting, SAFE & ESO propose a number of policy actions that different EU policy-makers could take to assist EU Member States in decreasing the burden of stroke.

SAFE and ESO call on:

<b><i>Steering Group on Health Promotion, Disease Prevention and Management of NCDs</i></b>	DG SANTE to facilitate discussions within the Steering Group on the implementation of the Action Plan as well the exchange of stroke best practices, in addition to the provision of support where Member States see the EU can be of added value.
<b><i>DG SANTE Best Practices Portal</i></b>	DG SANTE to open a new call for best practices in public health so that the Stroke Action Plan can be submitted for evaluation.
<b><i>CHRODIS + Joint Action</i></b>	CHRODIS + Joint Action to support SAFE and ESO with the planning and implementation of a pilot project for the transfer of best practices outlined in the Stroke Action Plan for Europe across different EU Countries.
<b><i>Smart Specialisation Thematic Platforms</i></b>	Interreg Europe to create a Thematic Platform that enables interregional cooperation on stroke in the area of research & innovation to fill current knowledge gaps.
<b><i>Knowledge Exchange Platforms</i></b>	CoR to adopt stroke as a priority area for interregional cooperation in 2020 and form a Knowledge Exchange Platform on stroke to foster policy discussions at EU level on stroke.
<b><i>CoR own-initiative opinion</i></b>	CoR to adopt an own-initiative opinion, highlighting the need for action to tackle the stroke burden, including through the implementation of the Action Plan at national and local levels.
<b><i>EP Resolution</i></b>	Members of the EP to adopt a resolution, potentially building on the CoR own-initiative report, calling on Member States to implement the recommendations of the Action Plan and on EU Institutions to leverage existing platforms, to put stroke more prominently on the agenda and truly facilitate the exchange of best practice.
<b><i>EP Pilot Project</i></b>	EP and the EC to consider supporting and approving a pilot project for reducing the societal and economic burden of stroke in Europe.



## Glossary of Terms

<b>ANRS</b>	Romanian National Association of Stroke
<b>CoR</b>	European Committee of the Regions
<b>DG SANTE</b>	European Commission's Directorate General for Health and Food Safety
<b>EC</b>	European Commission
<b>EP</b>	European Parliament
<b>ESO</b>	European Stroke Organisation
<b>EU</b>	European Union
<b>MoH</b>	Ministry of Health
<b>MS</b>	Member States
<b>NCDs</b>	Non-communicable diseases
<b>SAFE</b>	Stroke Alliance for Europe
<b>SDG</b>	Sustainable Development Goals
<b>SNR</b>	Romanian Neurology Society
<b>WHO</b>	World Health Organization



## About SAFE

# S·A·F·E

Stroke Alliance For Europe

THE STROKE PATIENT  
VOICE IN EUROPE



***THE STROKE ALLIANCE FOR EUROPE (SAFE)*** is a non-profit-making organisation formed in 2004. It is the voice of stroke patients in Europe, representing a range of patient groups from more than 30 European countries.

SAFE's goal is to decrease the number of strokes in Europe by advocating for better prevention, access to adequate treatment, post-stroke care and rehabilitation.

For more information about SAFE, please visit [www.safestroke.eu](http://www.safestroke.eu).



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