

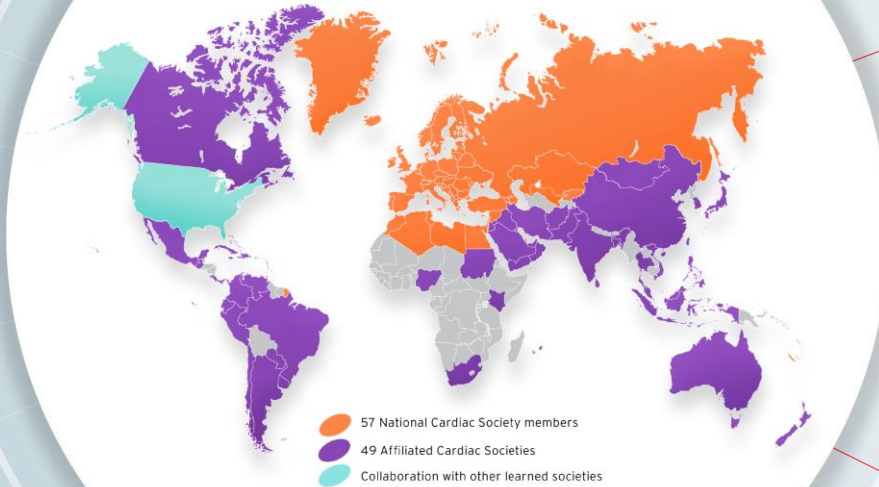
- **Improving cardiovascular health in Europe: the case for EU and National CVH plans**

Professor Franz Weidinger, MD  
*President, European Society of Cardiology*

25 July 2024



*Uniting Experts.  
Advancing knowledge.*



\*The Belorussian Scientific Society of Cardiologists and the Russian Society of Cardiology are temporarily suspended from the membership of the ESC.

June 2023

57

National Cardiac Societies

+100,000

Clinicians, scientists,  
nurses and allied  
members professionals

European Alliance of  
Cardiovascular Health  
(EACH)



**each**

European Alliance for  
Cardiovascular Health

# What is the ESC?

# Why are we here?

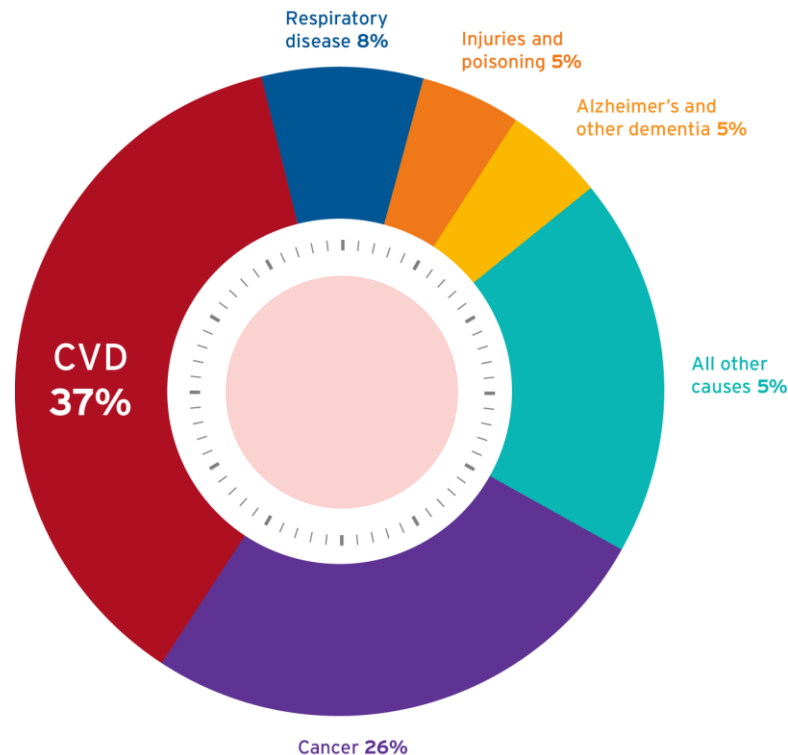
- CVD is EU's biggest killer

- 1,7 million deaths per/year

- + 5 million new CVD cases diagnosed annually

- + 53 million people live with CVD

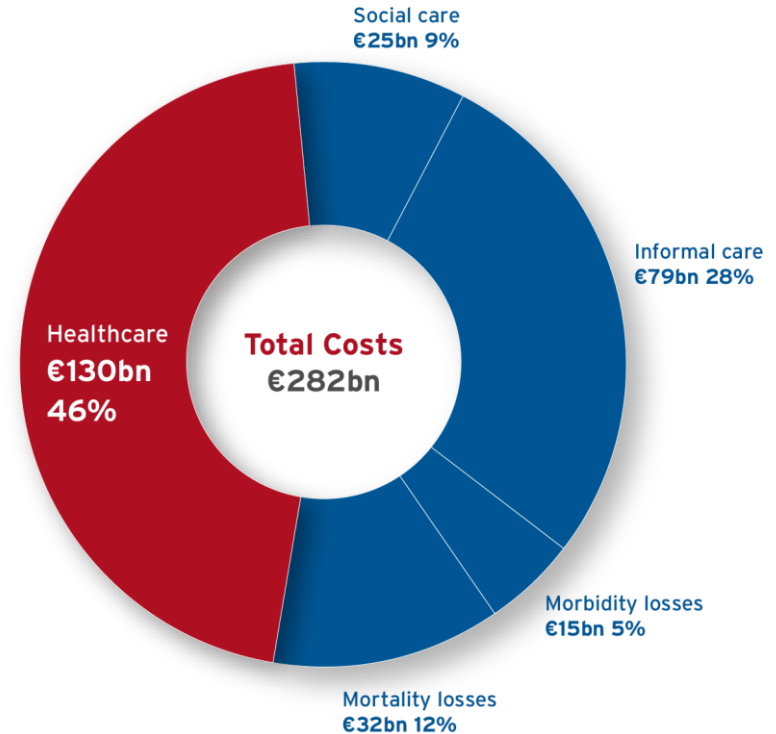
**No stand-alone plan to tackle the EU's biggest killer**



# What does CVD cost the EU economy?

- CVD cost EU **€282 billion** in 2021
- **100 billion euros more** than EU budget
- Cost to healthcare systems and society

Stop paying for CV disease later  
**Invest in a CV health now**



# Are death rates equal across the EU?

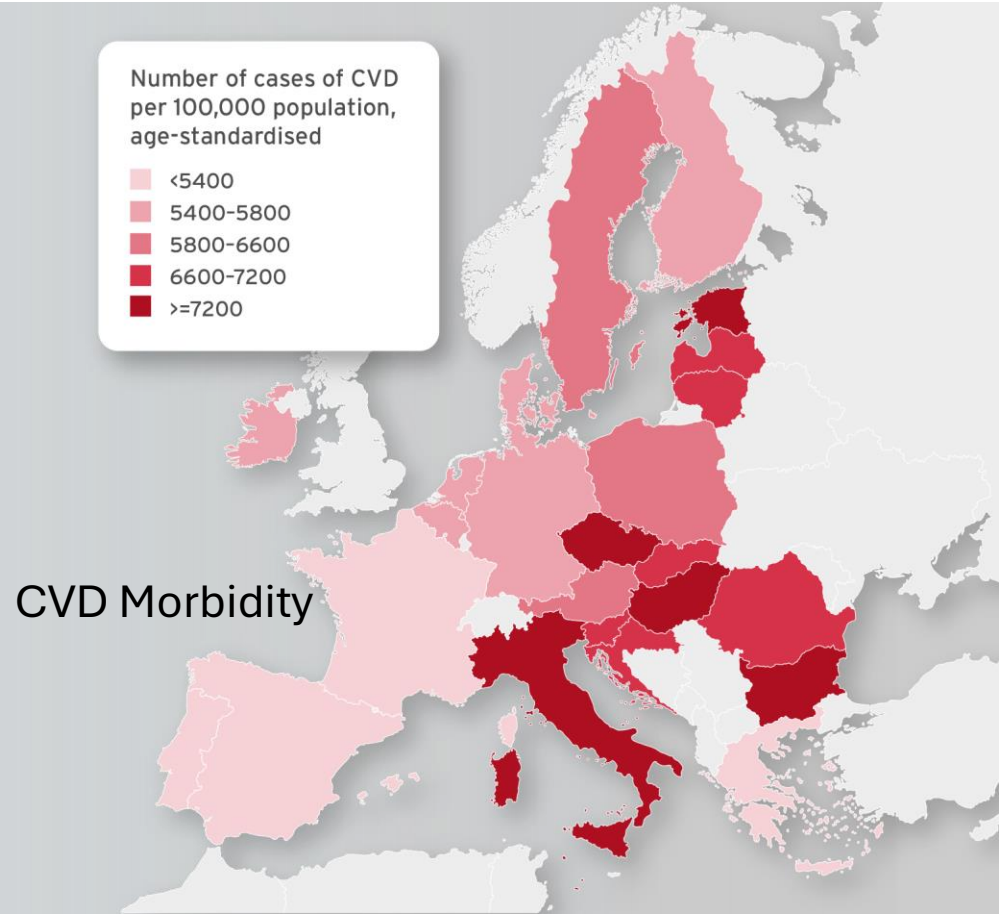
## CVD mortality rates vary across EU

- 20% at its lowest to 65% at its highest

## Population disparities within countries

- Age, gender, ethnicity, socioeconomic status and region

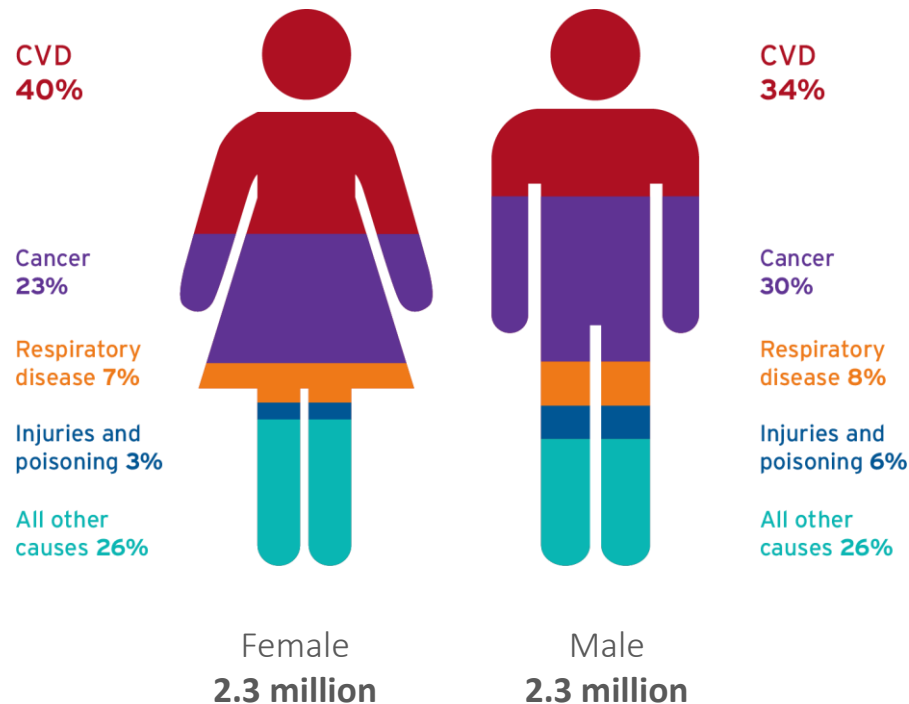
**The fight for CV health is  
the fight for equality**



# The wake-up call for women and CVD

- More **CVD deaths in women** than all cancers combined
- **40% of all deaths** in women are CVD
- Mortality following heart attack is **20% greater in women** vs men
- Women **underrepresented** in research

CV Health action means  
**Gender equality**



# Be bold in primary prevention policy

Many CVDs could be prevented

Prevalence of risk factors remain high

Bold and decisive **primary prevention regulation**

Joint Cardiovascular and Diabetes **health check**

**Health checks save lives**



Primary prevention:  
**societal, cultural, political challenge**



# Why is air pollution a CV health issue?

## Air pollution is as deadly as smoking for CVD

Pollution increases the risk of CVD and stroke by:

- **23%:** Ischemic Heart Disease mortality
- **24%:** Stroke mortality
- **13%:** Incident stroke
- **8%:** Incident heart attack

**World Heart Federation report shows positive impact of tackling pollution.**

Air pollution (PM2.5) **higher** than WHO recommendations.



# We need to enhance secondary prevention and early detection of CVD

Early detection of CVDs and its risk factors could prevent premature death and future costs to the healthcare system



# Why we need to jointly screen for CVD & diabetes



**CVD risk 2 to 3 times higher**  
for people with Type 2  
diabetes mellitus



**Life expectancy** reduced  
by 10–14 years

**Don't wait. Screen.**



# Why is rehabilitation key?

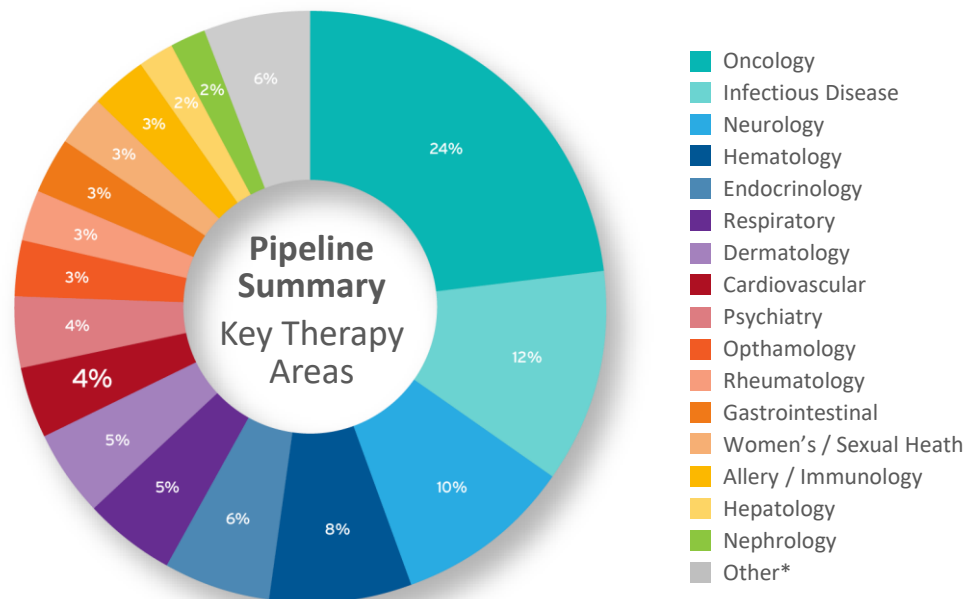
- **1 in 5 heart attack patients** has a second heart attack, stroke, or dies of CV illness within the first year
- **49% of heart attack patients** have no cardiac rehabilitation programme

**Our patients need support and care after they leave hospital**



# There is urgent need for more innovation in CVD

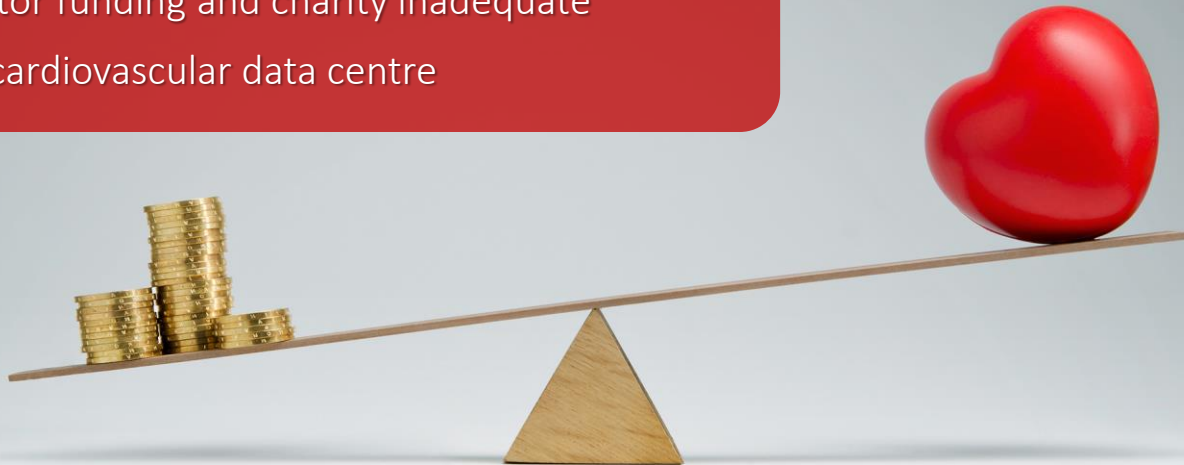
- 2021 and 2022 **zero** CV drugs approved
- **Funding** to support innovation for personalised patient-care pathways
- Short term **investment** = Long-term proven **gains**



% of trials started from 2017 – 2022 inclusive

# Where is the funding for CVD data?

- High quality data and real-world evidence is essential
- **Only 25% national CVD registries publicly funded**
- Funding needed to support standardised high-quality data and real-world evidence
- Private sector funding and charity inadequate
- European cardiovascular data centre



Every minute

3 people

die **from CVD**



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**We can do better**

**Together we can save lives**

