

Progress made since 2010 Joint Declaration

Priority Area 1: Innovation

RATIONALE

Research can provide innovative approaches, medicines, devices and tools to better address the burden that Non Communicable Diseases (NCD) as well as infectious diseases (ID) pose in Europe. These innovations, once validated for their effectiveness, need to inform policy makers in the EU and WHO European region. EU – WHO collaboration can facilitate this process. It can also help inform the research agenda.

Collaboration in the field of NCD and ID took essentially place around the problem of ageing and anti-microbial resistance (AMR) respectively. Knowledge translation became more recently also an area for collaboration.

KEY PROGRESS MADE SINCE 2010

- **Chronic Diseases (CDs):**

- The EC has invested some 3 billion in CDs in the 7th Framework Programme (FP7).
- The EC has launched several calls directly addressing challenges of CDs under Horizon2020. Topic examples include: New therapies for chronic non-communicable diseases; Piloting personalised medicine in health and care systems, Health promotion and disease prevention: translating 'omics' into stratified approaches, Development of new diagnostic tools and technologies: in vitro devices, assays and platforms, Development of new diagnostic tools and technologies: in vivo medical imaging technologies, Clinical research for the validation of biomarkers and/or diagnostic medical devices, Innovative treatments and technologies, Clinical research on regenerative medicine, Tools and technologies for advanced therapies.
- The EC has joined the Global Alliance for Chronic Diseases (GACD) in 2012, which facilitates and supports joint research activities on chronic, non-communicable diseases (NCDs) in low and middle-income countries (LMICs) and in vulnerable and indigenous communities in high-income countries (HIC). The overall goal of GACD is to develop interventions which can be applied and scaled up to lessen the burden of multiple NCDs, by addressing their common causes and risk factors, using disease-specific outcomes to demonstrate their efficacy. The GACD has issued 3 calls on: hypertension (2012, 23 M\$, EC had not joined at the time), diabetes (2014, 35 M\$, including 13 M\$ from EC) and lung diseases (2015, total budget not available yet, EC Budget 15 M\$).
- Initially WHO/Europe was an observer of the GACD Board. However, WHO/Europe has not participated to any GACD board meeting during the last 2 years. It would add value to the GACD should WHO/Europe participate again to the GACD Board as an observer, in order to ensure synergies with the WHO Global NCD Action Plan (2013–2020).

- **Ageing:**

- Ageing research is one of the cornerstones of the Horizon2020 "Health, demographic change and wellbeing programme". The 2014–2015 calls of the programme are already providing a comprehensive reply to some of the key outstanding issues: risks factors and disease development processes (Understanding health, ageing and disease: determinants, risk factors and pathways, Understanding diseases: systems medicine, Understanding common mechanisms of diseases and their relevance in co-morbidities: more targeted health interventions, Comparing the effectiveness of existing healthcare interventions in the elderly mobility and independent living, Advancing active and healthy ageing, Advancing active and

healthy ageing with ICT: service robotics within assisted living environments, Advancing active and healthy ageing with ICT: ICT solutions for independent living with cognitive impairment, Advancing active and healthy ageing with ICT: early risk detection and intervention, Mental wellbeing: promoting mental wellbeing in the ageing.

- Launch of the European Innovation Partnership on Active and Healthy Ageing (EIP-AHA) in 2011. Continuous developments since then: WHO/Europe acts as co-chair of the EIP on AHA D4 group on supportive environments; a two-year joint project on Age-friendly environments in Europe is undertaken with DG Employment, Social Affairs and Inclusion to provide further guidance in a European context.

- Launch of the 2nd public-public partnership on Ambient and Assisted living (AAL2) under Horizon2020.

- **Coordinated efforts to address the threat posed by antimicrobial and multidrug resistance:**

WHO and the EC have conducted a number of joint missions to EU/EEA and EU enlargement countries to discuss AMR and healthcare-associated infections (HAI) issues. In 2013, WHO/Europe launched the Central Asia and Eastern European Surveillance on Antimicrobial Resistance network (CAESAR), which helps to build capacity for AMR surveillance and enables data comparison by using the common European Antimicrobial Resistance Surveillance Network (EARS-Net) methodology. WHO/Europe and ECDC have a joint TB Surveillance system, which collects data from Member States using harmonized TB data in both EU/EEA and non-EU countries in the WHO European Region. The joint publication presents a unified approach and messaging to Member States on TB in the Region.

During the WHO Regional Committee meeting in September 2011, all 53 countries of the WHO European Region adopted a resolution and the European strategic action plan on antibiotic resistance. The strategic action plan contains seven strategic objectives, intended to comprehensively cover the complex factors related to bacterial resistance, such as strengthening intersectoral coordination, surveillance of antimicrobial consumption and resistance, infection prevention and control programmes, and promoting antibiotic stewardship, innovation and research, as well as setting-up awareness campaigns. In November 2011 the Commission Action plan against antimicrobial resistance was launched. This foresees twelve key actions, including strengthening research and innovation. Action no. 6: Promote, in a staged approach, unprecedented collaborative research and development efforts to bring new antimicrobials to patients. This led to the establishment of a major AMR programme (New Drugs for Bad Bugs) within the Innovative Medicines Initiative. Action no.11: reinforce and coordinate research efforts. The latter includes supporting the implementation of the Joint Programming Initiative on AMR (JPIAMR). The JPIAMR launched its Strategic Research Agenda in April 2014. A progress report on the implementation of the Commission Action plan is under preparation by DG SANTE and DG RTD (foreseen to be published in November 2014). In 2013 the EU announced the launch of 15 new research projects on AMR within the 7th Framework Programme for Research with a budget of € 90 million. Seven of these new projects aim to develop novel antibiotics, vaccines or alternative treatments for drug-resistant microbial infections.

The EC is supporting WHO/Europe in developing a draft global action plan on AMR, to be submitted to the 2015 World Health Assembly. After the EC and others provided input to the global action plan as well as feedback in response to a consultation, WHO/Headquarters is now finalizing this plan

WHO/Europe works closely with all specialized agencies of the EC (i.e. EMA, EFSA and ECDC) to coordinate AMR activities throughout the WHO European Region. For example, monthly telephone conferences are held between WHO/Europe, ECDC and EC. Since 2012, WHO/Europe has joined ECDC and EC in marking the European Antibiotic Awareness Day.

- **Collaboration between WHO and Commission for uptake of research results – knowledge translation.**

Opportunities for collaboration to ensure better exploitation of research results were sought.

In 2013 and 2014 WHO EURO participated in EC organised workshops on knowledge translation such as in the European Health Forum Gastein. The Commission gave a web presentation during the "Multi-country workshop on using research evidence for policy-making", organised by WHO/EVIPNET Europe (Evidence-informed Policy Network) in Izmir in October 2013. A broad overview of some of the EC funded public health research projects generating evidence for policy was given.

The WHO Regional Office for Europe launched EVIPNet through dedicated workshops in four pilot countries in 2014 and will do so in four further countries in 2015. WHO/Europe conducted a Training-the-trainer course on evidence-informed policy making with 13 Member States in September 2014. Moreover, the Standing Committee of the Regional Committee for Europe (which represents all 53 Member States of the WHO European Region) in its meeting in December 2014 requested WHO to develop a roadmap to enhance evidence-informed policy making in the region with the ultimate goal to develop a regional action plan in due course. This was catalysed by the European Advisory Committee on Health Research (EACHR) which gave the impetus for such an action plan in its meeting in July 2014.