

## EULAR 2024 – 2029 European Manifesto:

### 'Promoting a European response to the health and socio-economic challenges of Rheumatic and Musculoskeletal Diseases (RMDs)'

A coordinated European response is urgently needed to protect European citizens, health and social care systems, as well as the economy from the impact of Rheumatic and Musculoskeletal Diseases (RMDs). RMDs are often referred to as 'the invisible diseases'. There is a very low awareness of RMDs and their impact amongst policymakers and the European public, and they have been ignored too often when political and financial priorities have been defined. Whilst they are the second most common reason for consulting a doctor, and in most countries constitute 10 - 20% of primary care practice,<sup>1</sup> their prevalence can make them difficult to grasp.

#### **Virtually every EU citizen will experience the impact of RMDs directly or indirectly.**

There are over 200 RMDs affecting approximately 120 million, or one in five, Europeans. There is a popular misconception that RMDs are a natural consequence of ageing. While some RMDs (e.g., osteoarthritis, osteoporosis) do occur with increasing frequency later in life, the reality is that RMDs occur at all ages, including in children (from their first years) and young adults. Women and socio-economically deprived groups are also more likely to develop RMDs. Virtually every EU citizen is likely to experience some of the physical or psychological health, economic, and social impacts of RMDs personally, or through a family member, friend or colleague.

#### **Amongst the most prevalent, disabling and burdensome NCDs; contributing to early mortality.**

The burden of RMDs is dramatic. RMD-driven inflammation contributes directly to the development of high-mortality NCDs, including cancer, cardiovascular disease, diabetes, and mental health problems.<sup>2,3</sup> RMDs are the largest cause of physical disability in the EU, accounting for over 50% of Years Lived with Disabilities (YLDs) in Europe.<sup>4</sup> They represent 38% of all occupational diseases and account for about 60% of all workplace health problems.<sup>5</sup> They represent an economic burden of an estimated 240 billion Euros per annum, and the direct cost of RMDs within the EU is estimated to be 2% of its GDP.<sup>6</sup>

#### **Europe's innovative, cost-effective, outpatient RMD treatment model is under threat.**

There have been massive advances over the last few decades in the treatment of RMDs. The development of anti-inflammatory, immunomodulatory, and immunosuppressive drugs enabled European health systems to pioneer a cost-effective, outpatient, multidisciplinary treatment model, resulting in fewer people requiring inpatient treatment, wheelchairs, or surgery. More people can live independent lives and contribute fully to society. Worryingly, these advances are now threatened by a combination of devastating health trends, (chronic shortages of rheumatologists and rheumatology healthcare professionals, as well as unsustainable healthcare costs), European demographics (an ageing population and shrinking workforce), and negative lifestyle trends (an overweight population with reduced physical activity).

#### **What are Rheumatic and Musculoskeletal Diseases (RMDs)?**

RMDs fall into two broad categories: inflammatory and non-inflammatory. Inflammatory diseases are usually systemic immune-mediated diseases (e.g., rheumatoid arthritis, lupus, spondyloarthritides, connective tissue diseases and vasculitides etc.) that affect the whole body and can have potentially lethal complications. The non-inflammatory conditions include a range of short-term and long-term conditions that affect the musculoskeletal system, including many highly prevalent disorders (osteoarthritis, osteoporosis, and chronic back pain). Both types of RMDs can have debilitating physical, psychological, and social impacts on the individual, their quality of life, well-being, and career prospects.

<sup>1</sup> Carmona L, Ballina J, Gabriel R on behalf of the EPISER Study Group, et al The burden of musculoskeletal diseases in the general population of Spain: results from a national survey *Annals of the Rheumatic Diseases* 2001;60:1040-1045

<sup>2</sup> Simões D, et al. The population impact of rheumatic and musculoskeletal diseases in relation to other non-communicable disorders: comparing two estimation approaches. *Rheumatol Int.* 2018 May;38(5):905-15

<sup>3</sup> <https://www.eular.org/eular-advocacy-activities-and-materials>

<sup>4</sup> According to the WHO Rehabilitation Need Estimator available at <https://vizhub.healthdata.org/rehabilitation/> fixed at European region and All conditions categories. Accessed April 4<sup>th</sup>, 2022.

<sup>5</sup> Walker-Bone K, Black C. The importance of work participation as an outcome in rheumatology. *Rheumatology (Oxford)* 2016; 55(8):1345-1347.

<sup>6</sup> Woolf, Anthony. "Working with rheumatic and musculoskeletal disease (RMDs)." Accessed July 9, 2020. [https://oshwiki.eu/wiki/Working\\_with\\_rheumatic\\_and\\_musculoskeletal\\_diseases\\_\(RMDs\)](https://oshwiki.eu/wiki/Working_with_rheumatic_and_musculoskeletal_diseases_(RMDs))

## EULAR calls for comprehensive European and national RMD strategies.

Global and European health policy has begun to recognise the growing threat that chronic non-communicable diseases (NCDs) pose. EULAR, the European Alliance of Associations for Rheumatology, recognises the United Nations' (UN) efforts to galvanise a health response to NCDs through the UN Sustainable Development Goals and applauds the EU's ambitious health agenda, including its focus on building resilience in European healthcare systems and treating NCDs through the EU's 'Healthier Together' NCD Initiative and the EU4Health programme.

However, European health, social care, and employment policies do not currently recognise the severe burden of RMDs. Instead, policymakers inadvertently minimise the human experience of living with an RMD, and their significant contribution to disability, the development of high-mortality NCDs, early mortality, and early retirement.

EULAR calls upon the European Union and national governments to develop RMD strategies (and legislative and non-legislative measures that are actively implemented with support from rheumatologists, healthcare professionals active in rheumatology, and patients). that address the following points:

### **Quality of care: improving RMD prevention, early diagnosis, treatment, and rehabilitation interventions.**

1. Prioritise RMDs within the EU's 'Healthier Together – NCD Initiative' and national NCD plans. Where no national NCD plans exist, develop them to include RMDs.
2. Address the lack of timely access to care and specialists caused by Europe's chronic shortage of rheumatologists and rheumatology healthcare professionals, such as physical therapists, nurses, occupational therapists, and psychologists.
3. Improve early RMD diagnosis to reduce disability, comorbidity, premature mortality, and social impacts.
4. Promote cost-effective, flexible, multi-disciplinary, patient-centric RMD treatment and chronic care models.
5. Improve RMD prevention by tackling lifestyle determinants, promoting active ageing, and developing RMD education and communication programmes.
6. Support the development and use of advanced medicines and digital technologies for remote care, including for childhood and rare diseases.

### **Social Policy: mitigating the burden of RMDs on health-related quality of life, education, and employment.**

7. Recognise RMDs as a leading cause of disability and highlight the need for proper provision of social care and mental health services.
8. Introduce legislative and non-legislative measures, including targets and timelines, to create inclusive and flexible education and workplaces, ensuring people with chronic NCDs (including RMDs) can access, maintain, and return to education and work.
9. Increase funding and take measures to improve mobility, access to buildings, and packaged pharmaceutical and household goods.

### **Research and innovation: developing better RMD prevention and treatment strategies.**

10. Establish an ambitious and long-term research and innovation agenda that targets the causes of RMDs and their comorbidities, treatment and multidisciplinary care models, and the impact of health and social determinants on patient outcomes.
11. Launch an 'Inflammation, non-communicable diseases, and comorbidities' European Partnership' under Horizon Europe and increase support for RMD-related European Reference Networks (ERNs).
12. Work with medical societies and patient associations to strengthen the evidence base for EU and member state policymaking through systematic independent research and monitoring.
13. Encourage and support the involvement of patients in research and the evaluation of health technologies.