

For the attention of:

Ms Sabine Stordeur,
Director-General, DG Health Care,
Federal Public Service for Public Health, Food
Chain Safety and Environment

Mr Kris Boers, Health and Pharma Attache,
Permanent Representation of Belgium to the EU

31st May, 2024.

Measures to address chronic shortage of rheumatology healthcare professionals and broader healthcare workforce shortages

Dear Ms Stordeur,
Dear Mr Boers,

We are writing to you as European and Belgian organisations representing the 120 million Europeans with a Rheumatic and Musculoskeletal Disease (RMD) alongside clinicians and healthcare professionals.

In the context of the Belgian Presidency's commitment to prepare the ground for an EU strategy on healthcare workforce challenges, and the EU's broader agenda on healthy ageing, we are calling for measures to: ensure university curricula are revised to better reflect healthcare needs; promote education and training in under-presented disciplines (including rheumatology); and introduce legislation to reduce the direct impact of RMDs on Europe's health workforce.

RMDs are amongst Europe's most burdensome and costly diseases. They are long-term chronic conditions that can occur at any age, but disproportionately affect women and older people. They constitute up to 20% of primary care practice and are the largest cause of physical disability in Europe. RMDs are also linked (through inflammation and comorbidity) to high-mortality NCDs such as cancer or cardiovascular disease, as well as to detriments in mental health.

Thanks to a combination of demographic and lifestyle trends – including an ageing population – the increasing prevalence of RMDs may overwhelm Europe's ability to respond to the needs of people with RMDs and threaten the sustainability of Europe's healthcare systems.

However, 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 – including in the EU's Healthier Together initiative which prioritises high-mortality diseases.

As a result, there is now a chronic shortage of rheumatologists and specialist rheumatology nurses in the EU, putting at risk Europe's innovative and cost-effective multidisciplinary outpatient treatment model.

EULAR estimates that an absolute minimum of one full-time rheumatologist is needed per 50,000 European citizens. A EULAR survey in 2022¹ showed that many countries do not meet this minimum threshold. Romania, for example, has one rheumatologist per 60,000 citizens; Germany one for every 121,000; and, according to more recent data, Belgium one for every 67,615. An ageing rheumatology workforce means that Europe is now at the precipice. In Germany, for example, 65% of outpatient rheumatologists are over 50 years of age.²

The fundamental problem is a lack of rheumatology education in European medical and training universities. In Denmark, which does not have a shortage of rheumatologists, every university medical faculty has a rheumatology department, and four of its five universities have a Chair of Rheumatology. By contrast, in many other European countries, there are no rheumatology departments or Chairs of Rheumatology.

A major and related issue is that rheumatology is not properly recognised in current university curricula, and this is why we fully support the World Health Organisation's call for EU Member States to *"Review and update health and care education curricula so they reflect population needs and service requirements."*³ We believe this is very relevant to other disease groups and is an area where the EU can play an active and supportive role.

An additional issue is that even when rheumatology education and training is available it is not taken up by enough students. To respond to the growing burden of RMD and meet the pressing shortages of rheumatologists, changes to university curricula should be strongly supported by measures to promote rheumatology in training hospitals and medical universities. This should include the provision of sufficient funding for the wages of the required number of residents in training to cover our future health care needs, and for sufficient staff to train these future rheumatologists.

We also believe that the Strategy should recognise and address the direct impact of RMDs on health workforce shortages through legislation.

RMDs are Europe's most prevalent occupational disease, representing 38% of all occupational diseases and accounting for about 60% of all workplace health problems.⁴ Importantly, RMDs are a major cause of work-related illness among healthcare workers and serve to compound the shortage of healthcare workers through sickness, absenteeism and people leaving the profession.

To address this issue the European Parliament has consistently called for a comprehensive Directive on preventing and managing work-related RMDs for all workers. We believe this should also be addressed in the Strategy and could be extended to include other chronic NCDs.

The attached [Manifesto](#) provides more background on RMDs and additional information can be provided on request. We would welcome the opportunity to meet and support you and your colleagues to help address this vital issue.

¹ Prof. Angela Zink, *EULAR Congress 2022*.

² [Memorandum_DGRh2017.pdf](#)

³ [EUR/RC73/8: Framework for action on the health and care workforce in the WHO European Region 2023–2030](#)

⁴ Walker-Bone K, Black C. The importance of work participation as an outcome in rheumatology. *Rheumatology (Oxford)* 2016; 55(8):1345-1347.

Best regards,

Loreto Carmona
Advocacy Chair, European Alliance of Associations for Rheumatology (EULAR)

Dr Jan Lenaerts
President, Royal Belgian Society of Rheumatology (KBVR-SRBR)

Kris Fierens
President, ReumaNet vzw

Thanny Bries
President, Belgian Health Professionals in Rheumatology

Alexandre Eeckhout
Vice-President, Contre les Affections Inflammatoires Rhumatismales (CLAIR)