

# ERS submission to the European Commission's consultation on Global Healthnew EU strategy

The European Respiratory Society appreciates the opportunity to provide input to the consultation on Global Health - new EU strategy. Considering the significant changes in global health and geopolitics since the last communication of 2010, we believe in the crucial need for a new strategy that better reflects the challenges and the gaps in global health architecture.

The COVID-19 pandemic presented unprecedented healthcare challenges and demonstrated how interdependent the resilience of our health systems is. Globally, people suffering from lung diseases and those working in respiratory medicine were particularly affected by the pandemic outbreak. The EU's solidarity by donating vaccines to low and middle-income countries has been a good example of the EU's global leadership potential in health. However, more efforts are needed to consolidate this position. We believe that these efforts must translate into concrete actions that take into account the increasing challenges of respiratory health worldwide.

# 1. Further awareness of respiratory health as a major component of global health

The new EU global health strategy should pay particular attention to respiratory diseases which represent a major health burden globally. Tuberculosis (TB) - the most fatal infectious disease - is responsible for 1.4 million deaths worldwide; pneumonia has been a major cause of death for decades and overall, the lower respiratory tract infections have been among the top three causes of death and disability among children and adults. Asthma is the most common chronic disease of childhood, affecting 14 % of children and Chronic Obstructive Pulmonary Disease (COPD) is the third leading cause of death worldwide<sup>1</sup>.

The outbreaks of viral pandemics affect the lungs first. COVID-19 increased pressure on respiratory services, whilst limiting access to routine care and essential health services. Therefore, any future measures on emergency preparedness should have a particular focus on respiratory health in order to strengthen the resilience of health systems globally. The global response should translate into: developing well-informed national strategies based on best practices; providing adequate training for respiratory health professionals worldwide and increasing investment in respiratory research to prevent and treat respiratory diseases<sup>2</sup>.

<sup>&</sup>lt;sup>1</sup> FIRS partners call for action on global impact of respiratory diseases - ERS - European Respiratory Society (ersnet.org)

<sup>&</sup>lt;sup>2</sup> Global coalition of respiratory health organisations issues recommendations to improve lung health - ERS - European Respiratory Society (ersnet.org)

### 2. Climate Change and global health

ERS recognises the scale of the climate change impact on the planet and human health that is now irreversible, calling for urgent action and full support to climate change and air pollution reduction policies in the global health strategy.

The World Health Organization (WHO) has warned that climate change is the biggest global threat to humanity in the 21st century. By 2050 climate change is expected to cause 250,000 deaths every year due to climate-sensitive diseases. Climate change is not just a threat to future generations, but it is already an unfolding major health crisis. During the last decades, and with accelerating speed in the last few years, humanity has already experienced the catastrophic impacts of global warming. Respiratory patients are one of the groups most affected by this impact. Individuals with already impaired respiratory function (e.g. asthmatic or chronic obstructive pulmonary diseases (COPD) patients) are particularly sensitive to climate changes.

There is a growing interest today in redesigning healthcare services by focusing on planetary health because of its strong link with the community. Planetary health refers to the interlinkages between human-induced deleterious changes in the environment - incl. climate change - and its impact on human health to develop strategies that will help create an equitable, sustainable and healthy world. The Commission should consider including planetary health aspects beyond the one health approach already referred to in the global health strategy.

# 3. Greater emphasis on Non-Communicable Diseases (NCDs)

We fully agree with the statement that more efforts need to be invested in meeting the UN Sustainable Development Goals (SDGs) targets on health, in particular UN SDGs target 3.4: 'reduce by one third premature mortality from NCDs through prevention and treatment by 2030'. Whilst the fight against communicable diseases is paramount, we should not overlook the increasing burden of NCDs and their dramatic impact on the resilience of health systems globally. The COVID-19 pandemic has cast a spotlight on how NCDs and communicable diseases interact and should be addressed concurrently. Chronic respiratory diseases are among the most common NCDs worldwide, due to the ubiquity of harmful environmental, occupational and behavioral inhalational exposures<sup>3</sup>. Some good examples are: 1) asthma, affecting 43.5m people (in the WHO European region in 2019); Chronic Obstructive Pulmonary Disease (COPD) affecting 41.3m people (in 2019 in the WHO European region); 3) Lung Cancer, affecting 726000 people (in 2019 in WHO European Region)<sup>4</sup>. Nearly 550 million people globally live with chronic respiratory diseases, resulting in around 4 million premature deaths<sup>5</sup>.

The EU should make the early diagnosis and treatment of NCDs, including chronic respiratory diseases, a priority as part of its new global health strategy. The objective of meeting the UN SDGs by 2030 will not succeed without more attention to the global burden of chronic lung disease.

#### 4. Increased funding for the fight against major infectious diseases

Sustainable EU funding to fight the most lethal infectious diseases worldwide should be at the core of the new EU global health strategy. Whilst TB incidence had been slowly creeping down

<sup>&</sup>lt;sup>3</sup> The Lancet Respiratory Medicine, Chronic Respiratory Diseases: a global view, 2020

<sup>&</sup>lt;sup>4</sup> <u>Diseases - International Respiratory Coalition (IRC) (international-respiratory-coalition.org)</u>

<sup>5</sup> International Respiratory Coalition - ERS - European Respiratory Society (ersnet.org)

over the past 20 years, the COVID-19 pandemic reversed this positive trend: cases notifications have plummeted and for the first in more than a decade, tuberculosis mortality has increased<sup>6</sup>.

There is an urgent need to support access to essential TB services but also for greater investments in TB research and innovation. Before COVID-19, TB was the leading infectious killer worldwide, yet, the drug regimen for TB remains complicated, diagnostic tools to identify particular TB strains are not optimal and the TB vaccine is only effective in preventing the disease in infants<sup>7</sup>. The increasing prevalence of drug-resistant TB, which now accounts for one-third of the world's deaths from antimicrobial resistance<sup>8</sup>, poses another challenge to the global fight against TB.

If we want to meet the SDGs 3.3 'by 2030, end the epidemics of AIDS, Tuberculosis and Malaria and neglected tropical diseases and combat hepatitis, water-borne diseases and other communicable diseases', the EU must demonstrate strong commitment to increased TB funding, for example through its 2023-2025 contribution to the Global Fund to fight AIDS, Tuberculosis and Malaria, as well as targeted investment through its development and aid programmes.

### 5. Stronger WHO leadership on the global health scene

The COVID-19 pandemic demonstrated the need for a more efficient global health architecture, with WHO at its core. As the 5<sup>th</sup> contributor to WHO budget, the EU must support stronger WHO leadership in its normative functions.

A successful example of legally binding public health instrument negotiated under the auspices of WHO is the Framework Convention on Tobacco Control (FCTC). The WHO FCTC made a major contribution to improving respiratory health globally by supporting 182 parties (more than 90% of the world's population<sup>9</sup>) to initiate and/or advance their tobacco control efforts. Undoubtfully, tobacco control is not the only issue that knows no borders and the success of the WHO FCTC could pave the way for deeper international collaboration in global health.

The EU should be the driving force in pushing forward future WHO legally binding treaties, for example in the field of Non-Communicable Diseases (NCDs) or other global health challenges such as Antimicrobial resistance. The current support of the EU for a Framework Convention on Pandemic Preparedness and Response is a step in the right direction and we hope it will lead the way for similar binding instruments in the future.

<sup>&</sup>lt;sup>6</sup> The New England Journal of Medicine, Covid-19's devastating effect on tuberculosis care – A path to recovery, 2022

<sup>&</sup>lt;sup>7</sup> Harvard T.H. Chan School of public health, 'the infectious disease that nobody thinks about', 2022

<sup>&</sup>lt;sup>8</sup> The Global Fund, Why drug-resistant tuberculosis poses a major risk to global health security, 2020

<sup>&</sup>lt;sup>9</sup> World Health Organization, Tobacco, 2022