

Conclusions and recommendations

Death rates from CVD have fallen steadily over the past half century. This has been due to successful interventions, including population-based prevention and improved treatment options. Nonetheless, CVD remains the most common cause of death in the EU, claiming more than 1.8 million lives each year. Recent data estimate that more than 60 million people in the EU live with CVD.

Recent trends show a slowdown in the rate of decline in CVD death rates – a trend which is more pronounced in younger age groups. These trends are alarming and suggest that if the status quo prevails, there could be an increase in deaths from CVD over and above what would be expected from a growing and ageing population. Moreover, there is evidence from EU countries for an increase in the determinants of CVD, including diabetes and obesity. Should this trend continue, then the latent effects would set the scene for a tremendous setback in CVD morbidity and mortality.

We must not be complacent: fighting CVD is far from over, and action at EU level is urgently needed. This CVD Action Plan provides a blueprint for the 2019–24 EU mandate.

OVERALL AIM

Reduce premature disease and death from CVD and inequalities in cardiovascular death rates in the EU

OVERARCHING RECOMMENDATION

Ensure that TFEU Article 168 is properly operationalised, by establishing a world-class health impact assessment methodology that considers potential impact on CVD as well as differential impact in regions (East/West) of the EU by 2024

Specific priority recommendations to be achieved by 2024

- Set **nutrient profiles** to underpin nutrition and health claims as required by the EC regulation on nutrition and health claims (EC) No 1924/2006
- Adopt rules on simplified **front-of-pack nutritional labelling**
- Adopt regulations restricting all **marketing to children**, including digital, of food and drinks high in fat, salt and sugar
- Raise **minimum tobacco excise duties** to the highest possible level
- Bring **excise duties** on “**roll your own**” tobacco up to the same level as manufactured cigarettes
- Strengthen regulation on **e-cigarettes**
- Encourage the development and approval of EU funded projects (in particular projects supported by EU Structural Funds) that have a **positive impact on active living**
- Raise minimum **excise duties on alcoholic beverages** to the highest possible level
- Introduce mandatory, front-of-pack **energy labelling on alcohol**
- Introduce **mandatory ingredients list on alcoholic beverages**
- Revise the **ambient air quality directive** adopting the WHO Air Quality Guideline values as limit values
- Recognise **key areas of CVD research** as priorities in the Horizon Europe programme

- Promote and support the development of harmonised and comprehensive continuous **patient registries in CVD**, as well as the digital capability to enable the evidence generated within health systems to improve the speed and efficiency of **randomised controlled trials**
- Establish a **structured collaboration** between academic clinical trialists, patients, regulators and industry to modernise the International Council of Harmonisation (ICH) Good Clinical Practice (GCP) standards and make them fit for the digital era
- Support **research and deployment of digital health technologies** in cardiovascular disease prevention and management
- Include a focus on **cancer and CVD co-morbidities** and research on the short-term and long-term cardiovascular effects of cancer treatment in the new Europe's Beating Cancer Plan and Cancer Mission within Horizon Europe
- Establish a joint action/network of Member States, supported by experts, to identify the most effective policies and measures for reaching out to and **managing individuals at high risk of developing CVD**
- Ensure the necessary human and financial resources are available to the European Commission services responsible for the **implementation of the Medical Devices Regulation**
- Secure a positive outcome for the EU legislative proposal on **Health Technology Assessment**, covering the assessment of both medicines and medical devices
- Adopt a **European definition** of cardiac and stroke rehabilitation
- Establish a joint action/network of Member States to identify barriers to uptake of **cardiac and stroke rehabilitation** and **secondary prevention programmes**, and how to address them