

## Joint Statement on the Fourteenth WHO General Programme of Work, 2025–2028 (agenda item 11)

73<sup>rd</sup> meeting of the WHO Regional Committee for Europe 24-26 October 2023, Astana, Kazakhstan

## Respiratory diseases: Action now, not tomorrow

Seven years left to reach attainable Sustainable Development Goals (SDGs) to reduce burden of chronic and infectious respiratory disease and strengthen resilience to the permacrisis.

The respiratory system is a vulnerable part of our health. While people have minimal control over the quality of air they breathe, they must only keep breathing to be alive. Diseases of the lung and the respiratory system can be highly debilitating, affecting life as a whole and leading to co-morbidities such as cardiovascular disease and obesity.

Yet lung and respiratory diseases (chronic, rare, and infectious) remain Europe's Achilles' heel. Current measures to increase awareness and prevent risks show limitations, as countries have been unable to contain disease progress. In the WHO European Region today, 87.5 million people live with a lung disease, leading to over 1.1 million deaths annually<sup>1</sup>. With the unfolding permacrisis, the disease burden is likely to increase.

Meanwhile, respiratory infections pose a recurrent threat in the region. The SARS-CoV-2 pandemic unveiled the limits of healthcare systems and Europe's lack of lung health awareness and preparedness against a crisis that spread via aerosols. Moreover, Europe sees an increasing incidence in other respiratory infections such as respiratory syncytial virus (RSV).

With little time left to reach the SDG targets linked to NCDs, we need **prevention-oriented interventions** that can bring rapid results in the fight against respiratory diseases. **Climate change-related hazards** such as increased temperature, ambient air pollution, heatwaves, storms, pollen, floods, and wildfires must be tackled, as they have dramatic effects in lung health. Equally, **improvements in indoor air quality** through addressing pollution sources, such as cookstoves, but also better ventilation and building renovation are also key.

**Tobacco control and smoke-free policies** stemming from the Framework Convention on Tobacco Control (FCTC) also face challenges across Europe, yet are crucial in achieving SDG 3.4, with tobacco a leading cause of diseases such as chronic obstructive pulmonary disease (COPD) and lung cancer. We welcome measures like those in the United Kingdom phasing out cigarettes sales (including vaping restrictions for the youth), and urge other countries to adopt similar initiatives.

These aspects must be also addressed more systematically in the ongoing WHO/Europe Action Plan on NCDs, running until 2025<sup>2</sup>. Let's not forget that respiratory NCDs range from prevalent and difficult to manage diseases such as asthma and COPD; to lung cancer, one of the most diagnosed cancer types globally.

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<sup>&</sup>lt;sup>1</sup> International Respiratory Coalition, Lung Facts 2019, <a href="https://international-respiratory-coalition.org/lung-facts/">https://international-respiratory-coalition.org/lung-facts/</a>

<sup>&</sup>lt;sup>2</sup> WHO Regional Committee for Europe, Action plan for the prevention and control of noncommunicable diseases in the WHO European Region 2016–2025, <a href="https://www.who.int/europe/publications/i/item/WHO-EURO-2016-2582-42338-58618">https://www.who.int/europe/publications/i/item/WHO-EURO-2016-2582-42338-58618</a>



Moreover, there is an urgent need for a comprehensive approach to lung health rooted on the concept of health equity, based on **national lung health plans** that:

- Standardise key diagnostics e.g. screening and lung health test programmes, enabling early disease detection
- Spell out personalised information on the prevention of risk factors
- Invest on respiratory disease self-management, integrating digital technology
- Promote lung health awareness, reinforce healthy ageing and reduce stigmatisation

The Regional Committee's role is crucial in addressing lung health holistically, based on its **know-how proposing, monitoring and evaluating evidence-based policy pathways**. We believe that its capacity to work horizontally, facilitating engagement at the national level is vital. We, therefore, applaud the emphasis on engaging at this level, together with all relevant national actors. We also welcome the recent and first-ever WHO/Europe Indoor Air Quality conference and are hopeful that further action will be taken on this matter.

Finally, work to prevent lung diseases and adopt national lung health plans is closely linked with other WHO/Europe initiatives, such as strengthening and digitalising health systems, tackling climate change and ensuring crisis preparedness, thus offering hope for multiple co-benefits.

## **Submitting organisation:**



European Federation of Allergy and Airways Diseases Patients' Associations (EFA)

## **Co-signatory organisations:**



