

Addressing the unmet needs of patients and their families

Yann Le Cam

Chief Executive Officer - EURORDIS-Rare Diseases Europe

Session 1:
Rare diseases: organisational models and good practices in health and social care

Conference on Rare diseases and European Reference Networks.
How to guarantee solidarity for patients?

Bilbao, 11 October 2023

A European Action Plan for Rare Diseases

#EUAction4Rare

Progress has been made thanks to...

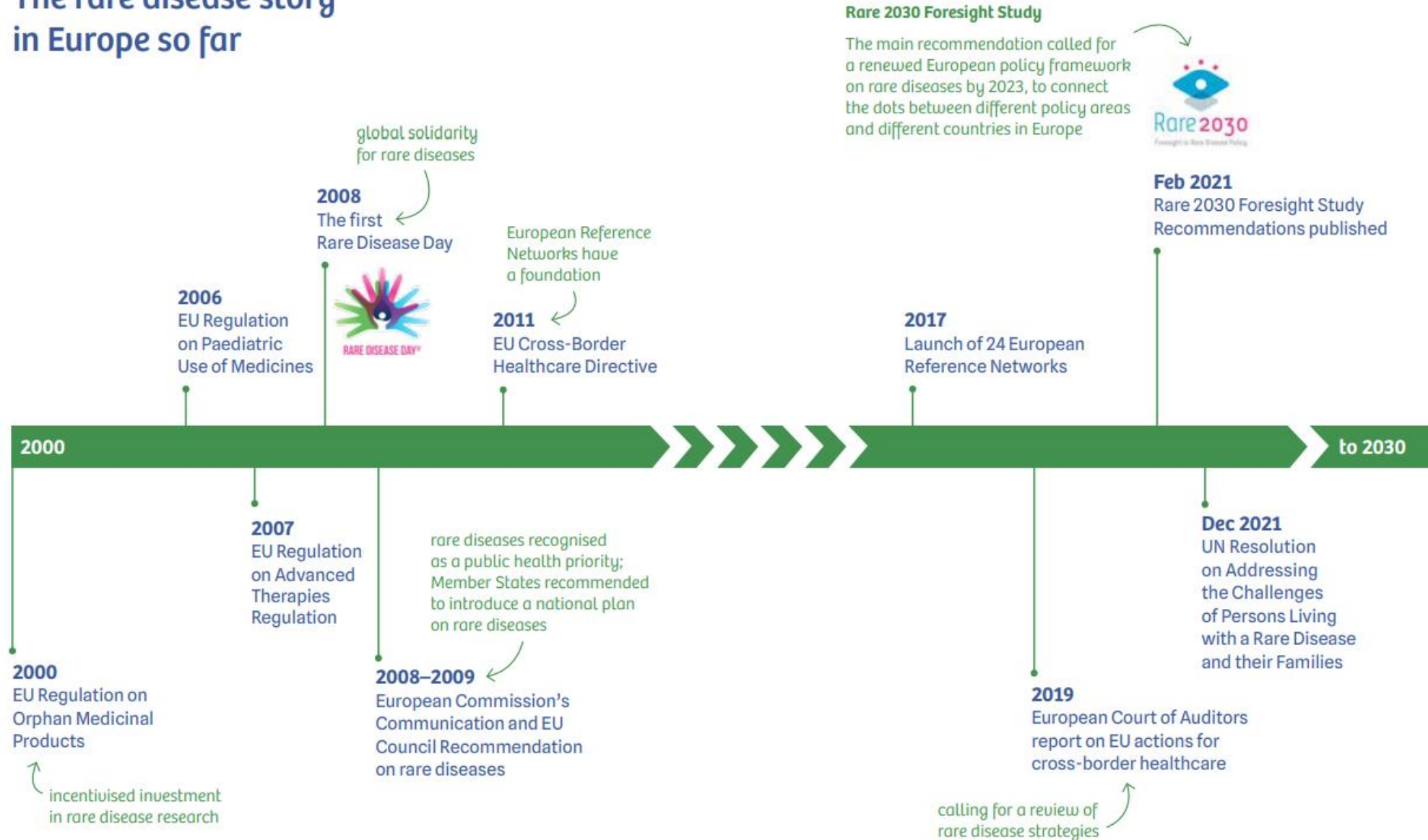
- Empowered patient communities and their national or European networking
- Legislation to incentivise investment in rare disease research / orphan medicinal products and national companion measures
- National Plans and Strategies setting national priorities and European collaboration between Member States
- National Centres of Expertise and European Reference Networks
- Disease registries, good practice guidelines
- National and European research programmes

2000 OMP Regulation
2006 Paediatric Use Regulation
2007 Advanced Therapies
Regulation

2008 Council Recommendation
2009 Commission Communication

2011 Cross border healthcare
Directive

The rare disease story in Europe so far



The Rare Disease Population in Europe

an estimated

30 Million

people are living with
a rare disease in

48 countries

in Europe.

countries



there are over

6000

distinct rare diseases.



Each rare disease
affects fewer than

1 in 2000

people.



Rare diseases
affect about

4%

of the population
during their lifetime

with estimates ranging from
from 3.5% to 5.9%.

%



Has vast unmet medical needs

70%
of people with rare
diseases

wait more than 1 year to get a
confirmed diagnosis after coming
coming to medical attention.



It takes on average

5 years

for rare disease patients
to get a diagnosis.



There are over

230

orphan medicines

authorised in the EU. The goal is to support
support the development of

1,000

new therapies

for rare diseases by 2030.



And cumulate vulnerabilities

Rare diseases seriously impact everyday life

7 in 10 patients & carers

reduced or stopped professional activity due to their or their family member's rare disease.



8 in 10 patients & carers

have difficulties completing daily tasks (household chores, preparing meals, shopping etc.)



2/3 of carers

spend more than 2 hours a day on disease-related tasks.



3 times more people

living with a rare disease and carers report being unhappy and depressed than the general population*



* Rare Barometer Voices sample compared to International Social Survey Programme, 2011

New challenges... and new opportunities

- Knowledge & Science & Technologies
- Diagnostic tools
- Disease transformative therapies
- Data & Digital transformation
- Social and Economic impact



Rare 2030 Foresight Study (2019-2021): A roadmap for rare disease policy to 2030

- Recommendation n°1: **a new European Policy Framework driven by the needs of people living with a rare disease, to guide the implementation of consistent national plans and strategies**



A goal-based strategy

8 Rare 2030 Recommendations

1. European/national plans and strategies
2. Diagnosis
3. Access to care
4. Person-centred care
5. Patient Partnerships
6. Research
7. Data
8. Treatment

Europe's Action Plan

GOAL 1: Ensuring healthy lives and promoting well-being

GOAL 2: Reducing inequalities

GOAL 3: Building resilient infrastructure, promoting inclusive and sustainable industry and fostering innovation

4 SDGs



SDG3: Ensure healthy lives and promote well-being for all at all ages



SDG 9: Build resilient infrastructure, promote inclusive and sustainable industrialisation and foster innovation



SDG10: Reduce inequalities within/among countries



SDG17: Revitalise the global partnership for sustainable development

Why a renewed European policy framework on rare diseases?

The **Rare 2030 Foresight Study** - initiated by the European Parliament and co-funded by the European Commission - concludes that renewed European action on rare diseases is required now to:

Address the remaining unmet needs and inequities all along the patient journey in accessing a diagnosis, treatments and care, leaving people living with a rare disease marginalised in society;

Keep pace with new technologies, new values and new expectations of Europe's citizens and give a new focus to national rare disease plans and strategies

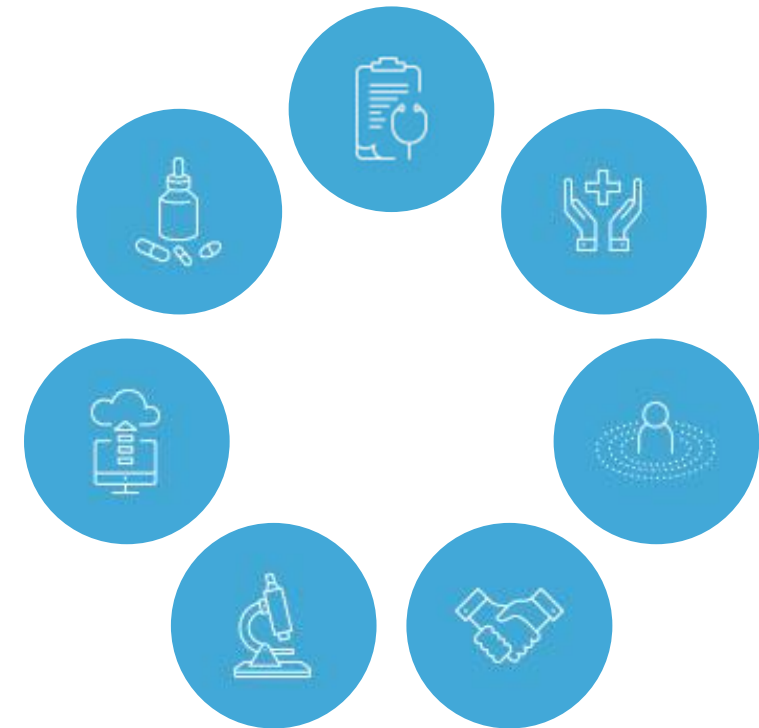
Sustain the European Commission's strategic approach in addressing a **distinctive domain of high European added-value**

Bring together existing and upcoming actions:

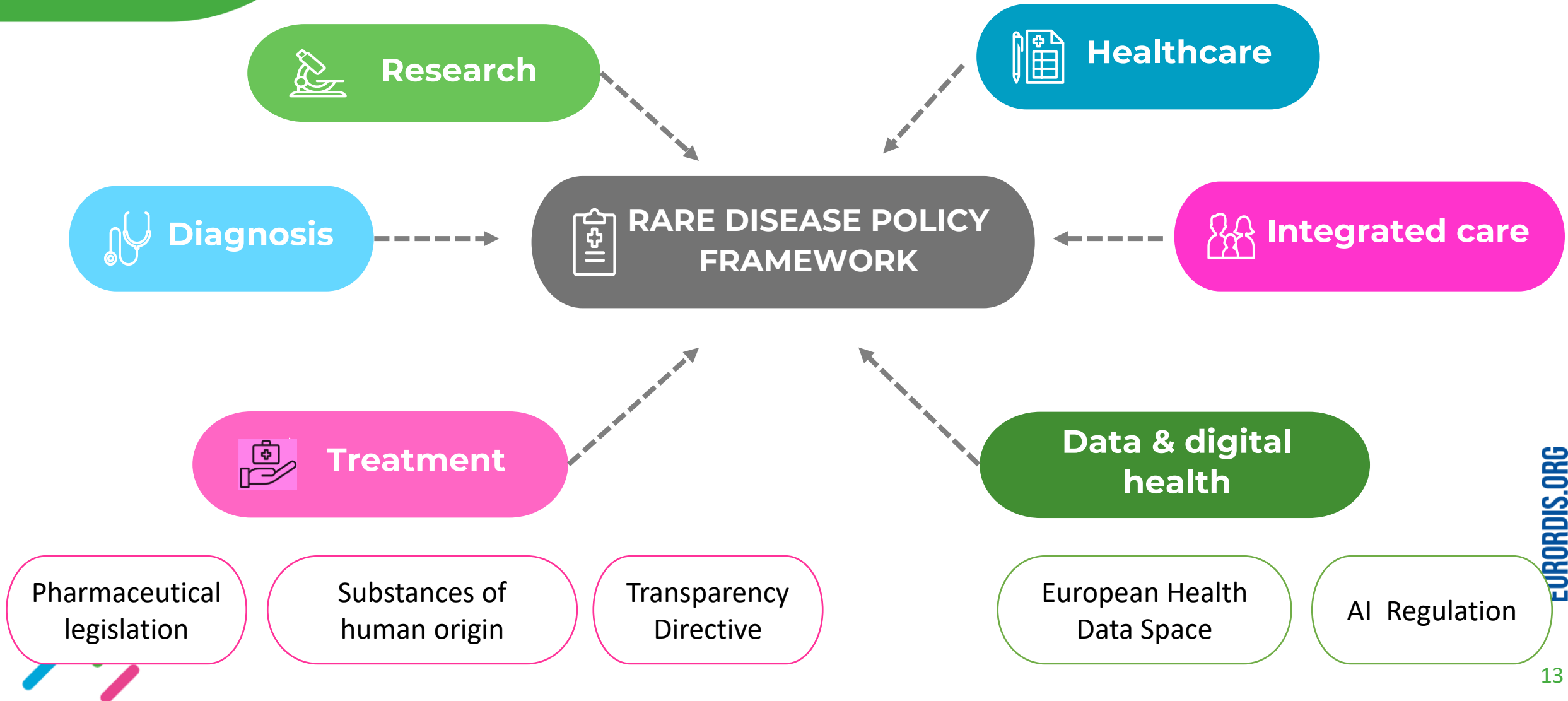
- **across countries**
- **across sectors and policy areas**
- **across the rare disease pathway** where the EU can add the most value under **one interconnected framework**.
- **within international perspective**

A comprehensive, integrated, goals based European policy framework

- **Common objectives and measurable goals to set a common direction**
- The person's journey: **A holistic and life-long view**
- **Bridging the gaps between national and EU initiatives**
- **Bridging the gaps between different legislative pieces** on data, research, treatment, healthcare, social care



Our challenge in Europe: achieving a truly integrated ecosystem



#30millionreasons for European
action on rare diseases

Over 2000 stories from across Europe



Call to Action

from the Expert Conference on Rare Diseases

Towards a new European policy framework on rare diseases:

"Building the future together for rare diseases"

On 25 and 26 October 2022, in Prague



A call for a European Action Plan for Rare Diseases from across the community

- **2019 European Court of Auditors' Report**
- All stakeholders: patients & families, clinicians (eg ERNs), researchers, pharma & biotech, national policy makers : **Foresight Rare 2030 Recommendation n°1**
- The 2000 rare diseases patient organisations across Europe, all national alliances, all European federations: **#30 Millionreasons, a call for the families and persons living with a rare disease**
- **European Parliament** debate, 45 MEPs call upon the Commissioner for Health, mention in resolutions on building back better
- **Member States** support through the Slovenian, French and Czech EU Council Presidencies July 2022 - 50+ partners of the **European Conference on Rare Diseases** (ECRD)
- **European Economic and Social Committee** opinion on rare diseases
- **22 Member States endorsed** the **Call to Action of the Czech EU Council Presidencies**
- Rare Diseases Day 2023 - **50 Members of the European Parliament** call on the President of the Commission Ursula von der Leyen and the Health Commissioner Kyriakides



The voice of the EESC - European Economic and Social Committee

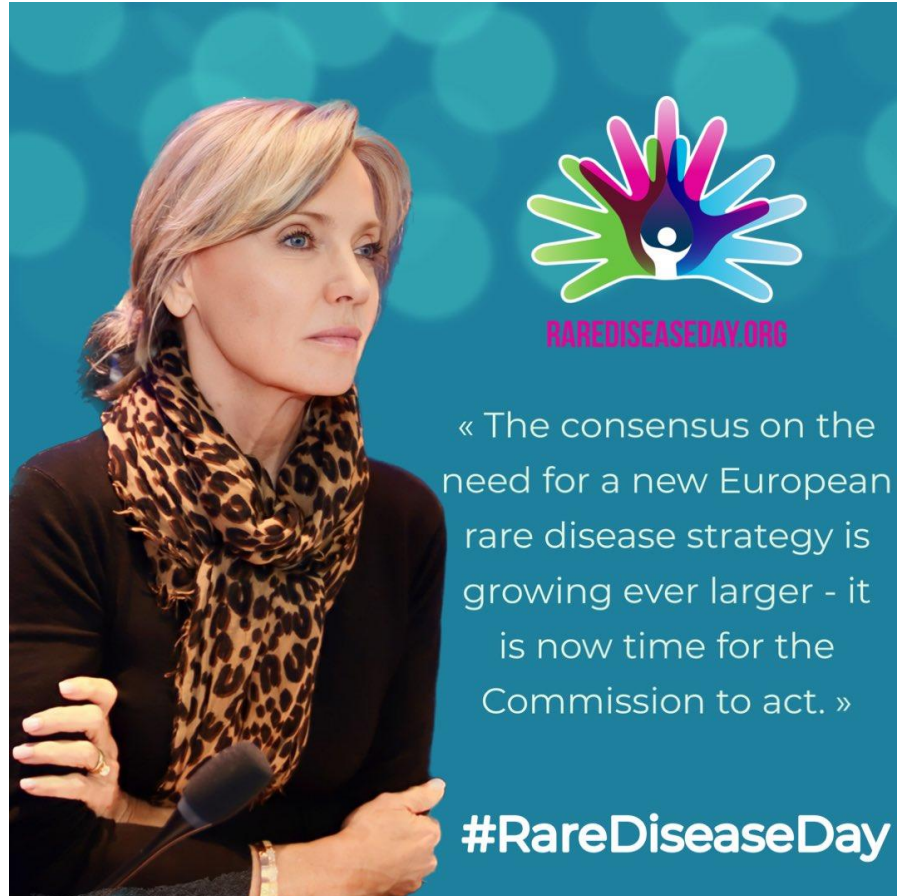
“Having heard evidence from people right across the patient community and civil society, we learned that there is huge, unrealised potential for EU policy to make sure scientific, technological, clinical and social advances reach every European citizen living with a rare disease”
Alain Coheur, EESC
Rapporteur.



What the EESC called for:

- A European Action for RDs based on measurable goals
- Optimising the use of health data
- Speeding up diagnoses
- Support for – and beyond – the European Reference Networks
- Improving access to orphan drugs
- Greater support for informal carers

The voice of the European Parliament: 50 MEPs signed a letter to the President of the European Commission on Rare Disease Day



To:
Ms. Ursula von der Leyen
President of the European Commission
Rue de la Loi 200
1049 Brussels

Copy to :
Ms Stella Kyriakides
Commissioner for Health and Food Safety

Mr. Nicolas Schmit
Commissioner for Jobs and Social Rights

Brussels, 28th February 2023

Rare Disease Day call for a European strategy on rare diseases

Dear Madam President,

28 February 2023 marks the 16th Rare Disease Day, a global awareness day celebrated in over 100 countries around the world. This year, Rare Disease Day puts the focus on equity.

As Members of the European Parliament and on behalf of the Network of Parliamentary Advocates for Rare Diseases, we have the honour to once again call on you to introduce a comprehensive European strategy on rare diseases to better meet the needs of the 30 million European citizens living with a rare disease.



Feb 2021

Rare 2030
Reco n°1

May 2021

Launch of
#30million
reasons
campaign

Nov 2021

European
Parliament
Debate

June 2022

ECRD 2022



Feb 2022

French Ministerial
conference



March 2022

EPSCO
Council



Czech
Presidency
Expert
Conference

Oct 2022

EESC Opinion
on Solidarity in
RDs

Oct 2022

Czech Call to
Action + EPSCO



MEP letter to
EC President

Feb 2023

TODAY'S
CONFERENCE

Oct 2023

What's next?



**A EU “whole system” that
“leaves no one behind”
living with rare and complex
conditions**

An EU whole system for rare diseases

RARE 2030 GOAL

3



All citizens can exercise their right to access a timely diagnosis, high quality essential healthcare, and safe, effective and affordable medicines and treatment, as close to home as possible or else have easy access to physical or remote cross-border healthcare, without unnecessary delay, under an EU "whole-system" approach for rare diseases.

In **Rare 2030** this community recommended a multilevel support (European, national and local) to create

"a mature highly specialised healthcare ecosystem that leaves no person living with a rare disease behind"

a "strategy of **future ERNs targeted towards all rare disease patients** in Europe, and not only those attending ERN HCPs or 'affiliated' centres: ERN operations should always target this wider population, wherever possible"

Where are we today with this ambition?

- With the **ERNs and their integration in national healthcare systems we are leading the way** to reduce the time to early, better and more accurate diagnosis for all people living with rare and complex conditions in Europe, to secure high quality healthcare delivery
- Yet we need **continued commitment & an upgrade of the system for real impact on lives of people with RDs**
- Progressively we must will cover **all RD, in all countries in Europe**, eventually **measure health and social outcomes**.



An Open Letter from the RD community

The rare disease community comes together in calling on the EU institutions and our national governments to stand by the European Reference Networks.

Dear Mrs von der Leyen,
President of the European Commission,

Dear Mrs Metsola,
President of the European Parliament,

Dear Heads of Governments of EU Member States,

We, the undersigned, representing the European Reference Networks (ERNs) and people living with a rare disease across Europe, **call on the EU institutions and EU Member States' governments to stand by the European Reference Networks** and to uphold their commitment to enable long-lasting impact in people's lives and, fundamentally, give all people living with a rare or complex condition in Europe the same opportunities to access timely and adequate specialised healthcare.

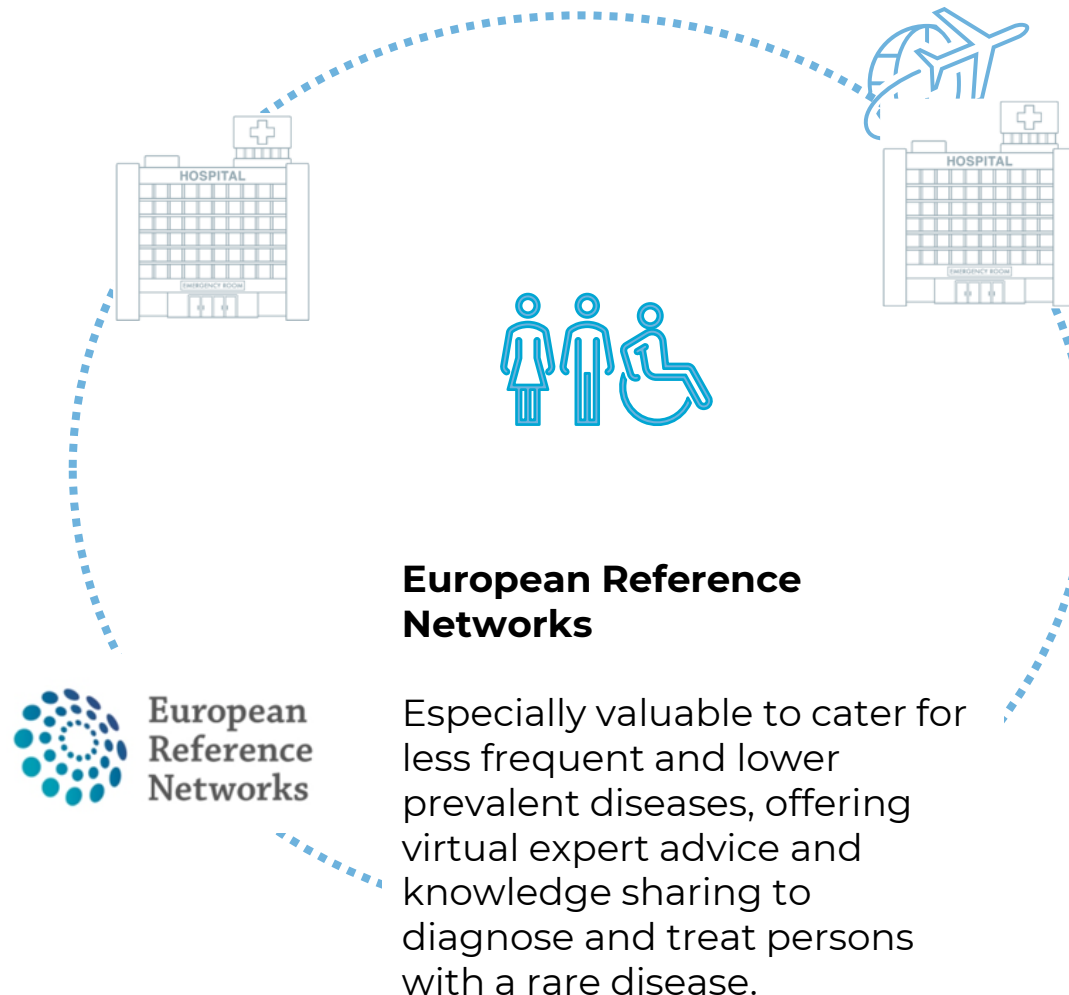
ERNs and their integration in national healthcare systems & into the EU cross-border healthcare system

- The ambition is to have national health systems and ERNs **operating together as elements of ONE integrated European system** under a “**whole system**” approach and **European care pathways, that connect seamlessly regional, national and cross-border healthcare services and infrastructures.**
- If they are not well connected with the existing healthcare infrastructures in each country, people with rare and complex conditions will never be able to fully benefit from this infrastructure.

One fully integrated system with connected, infrastructures to ensure timely access to specialised healthcare

National Health Systems

In the majority of countries, Expert Centres may provide adequate healthcare to the patient population affected by the more prevalent rare diseases, either at regional or national level (<390 rare diseases, affecting 98% of the RD population).



European Reference Networks

Especially valuable to cater for less frequent and lower prevalent diseases, offering virtual expert advice and knowledge sharing to diagnose and treat persons with a rare disease.

In person CBCH where needed

When a patient needs to travel to another country.

RD patients report delays in access, mostly due to financial, language, mobility barriers and difficulties to secure prior authorization given the lack of expertise in a country. Ref: EC evaluation CBHC Directive, staff working document

Leaving no one behind: what's missing?

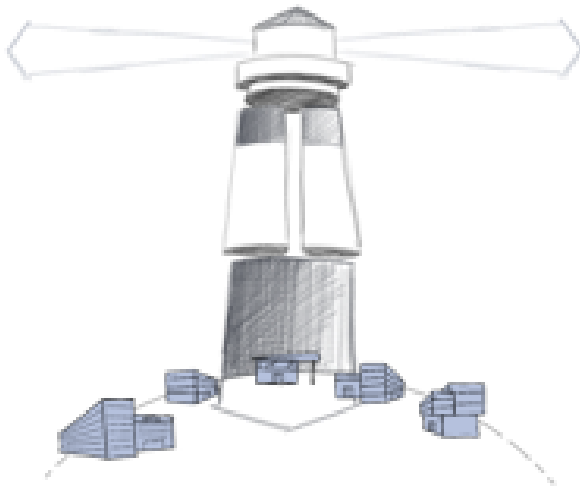
Difficulties to access highly specialised CBHC are further exacerbated when one or more of the following factors emerge - the 3 are usually interlinked:

1. **Very small numbers of patients** and/or low incidence across the EU.
2. **Safety & clinical viability are compromised** because there are very few expert teams across the EU with the clinical competency required to secure sufficient experience to provide a safe and sustainable highly specialised healthcare service or centres qualified to administer an innovative therapy.
3. **Limited financial capacity of individual MS:** Individual MS lack the financial and innovation capacities required to provide and maintain high-cost, highly specialised and innovative healthcare services, including workforce training & adequate replacement rates.

Keeping in mind the fundamentals of healthcare services planning and the aspiration of Universal Health Coverage

Healthcare services are best organised as close to the population as possible, where decision makers are best positioned to understand and meet local population needs ...

... this principle is also true for rare diseases, but healthcare planning is more efficiently organised at **national or supra-national** level where there is a sufficient number of cases to understand the needs of this patient population.



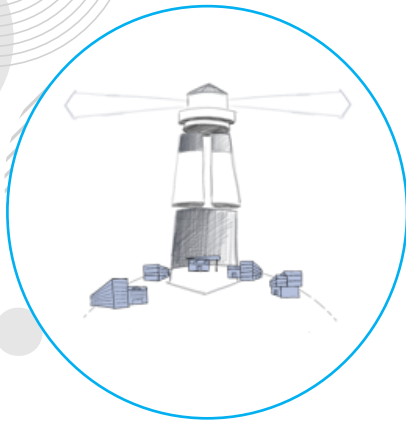
Different approaches, infrastructures and organisational arrangements are required to address rare disease healthcare needs, depending on **3 factors**:

1. Prevalence and incidence rate of a given disease or a given intervention
2. Number of expert teams available to provide the service
3. Financial implications for countries to arrange services at a national or sub-national level and the innovative capacity of individual health systems

Closing the gap: European commissioning of highly specialised healthcare services for very rare & complex

By establishing an **EU system to plan, including work force planning, fund, commission and contract highly specialised healthcare services** from leading expert centres recognised as “European Rare Disease Lighthouses”, connected to national, ERNs, and International networks to deliver highly specialised interventions for:

- people living with a disease that **affects fewer than** 500 people across the EU
- people that require **complex interventions** where the number of procedures performed each year at EU level is below the above threshold
- people that require **innovative treatments** that are/will be typically delivered in a few centres across the EU.



Only through greater solidarity and enhanced cooperation in this area, EU countries will be able to organise and manage certain highly specialised healthcare services on an optimal population size, to ensure timely, safe, affordable, accessible and sustainable high-quality care for all.

How to close the gap?

Eligibility criteria



People living with a disease that affects <500 people across the EU

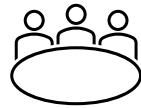


People that require complex interventions <500 procedures/year performed in the EU level



People that require innovative treatments that are/will be typically delivered in a few centres across the EU.

European planning, funding and commissioning



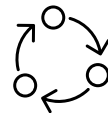
Joint service planning



European fund for highly specialised healthcare services

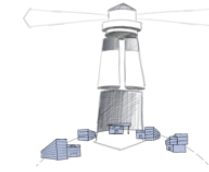


European procurement to contract healthcare services from European Lighthouses

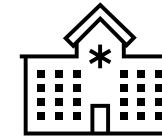


Coordinated evaluation and monitoring system

Service delivery



European Expert Centres/Lighthouses

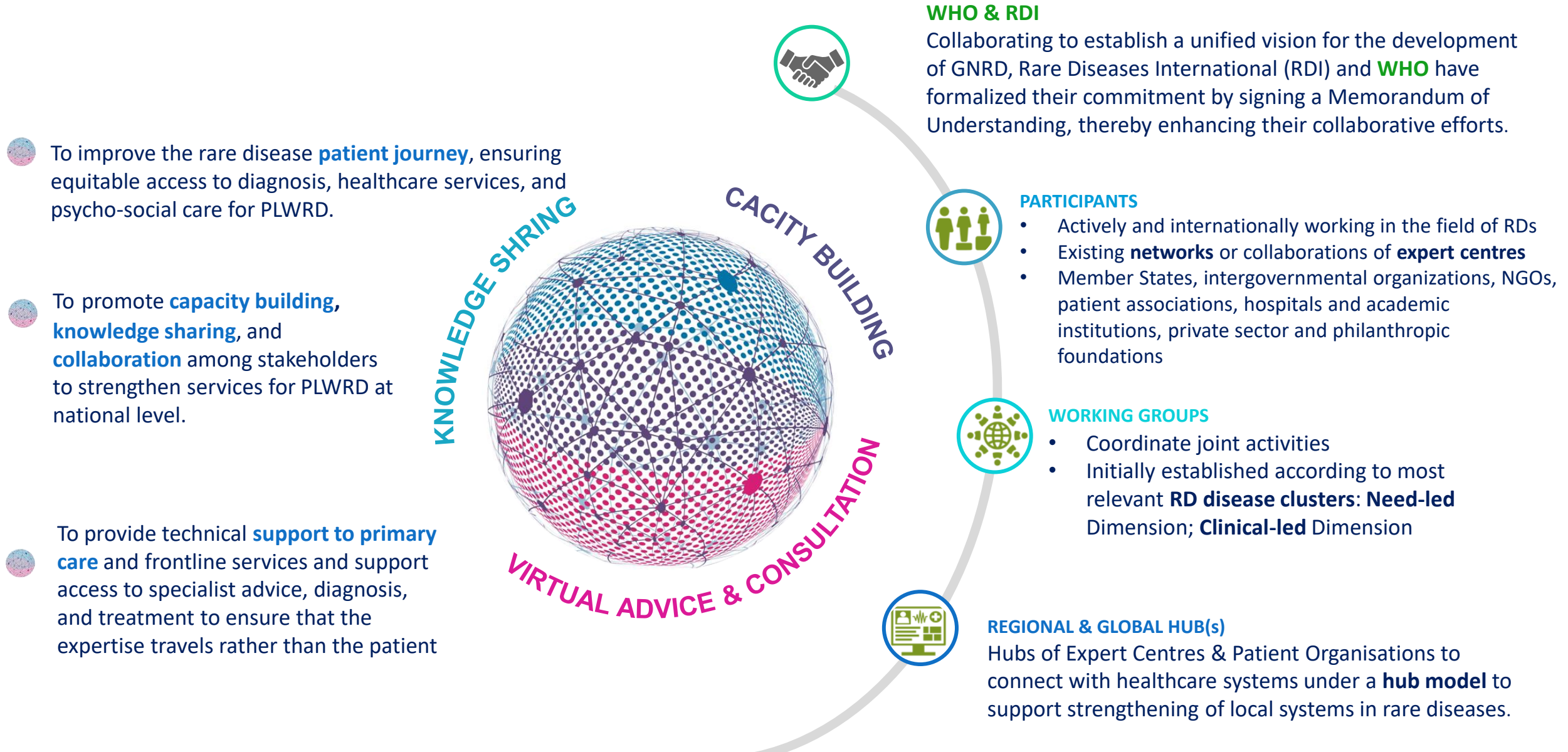


Shared agreements with national HCPs for follow-up



Treatment eligibility panels

WHO-hosted Global Network for Rare Diseases (GNRD)



Thank you!