Neurological diseases on the rise: European collaboration in research essential

EU resources are the top source of funding for cross-border collaboration in neurological research. Prof Günther Deuschl, President of the European Academy of Neurology (EAN) expressed concern about tendencies toward Europe skepticism: “It is only together that we can handle the growing challenges in research.” More than 220 million people in Europe suffer from neurological diseases such as Alzheimer’s, dementia or headaches, and that number is growing all the time.

Amsterdam, 24 June 2017 – The European Academy of Neurology (EAN) voiced a strong commitment to Europe today in Amsterdam, where it is holding its 3rd Congress from 24 to 27 June. “I am concerned about tendencies toward Europe skepticism and a short-sighted restriction to national interests, including research projects. Like climate change, the global increase in neurological diseases is a challenge that no one country can meet alone,” said EAN President Prof Dr Günther Deuschl (University Hospital Schleswig-Holstein, Kiel). “Research per se succeeds and fails on the basis of international collaboration. This is especially true of the research-intensive field of neurology. It is only through cross-border efforts that we can better understand diseases such as strokes, dementia or Parkinson’s and find new preventive, diagnostic, therapeutic and rehabilitative answers to them.”

Neurological diseases in Europe: more than 220 million people affected

In fact, there is hardly another discipline that is developing as rapidly as neurology. That fast pace is also urgently required given the growing disease burden. Data from the European Brain Council indicates that a total of 220.7 million people in Europe suffer1 from at least one neurological disease – that is more than the populations of Germany, France and Great Britain combined. Headaches (152.8 million affected) top the list of the most common neurological disorders, followed by sleep disorders (44.9 million), strokes (8.2 million) and dementia (6.3 million). Many neurological diseases such as strokes, dementia or Parkinson’s have an age component in that the incidence of them increases with age. According to Eurostat, the number of people in the EU over age 65 will double by the year 2060 to 52 per cent.

Neurological diseases cost EUR 336 billion a year

That creates an enormous burden on those affected and their social environment, on society and on health care systems. Many neurological diseases lead to great human suffering and restrict the independence of those suffering from these diseases, not least as a result of disability and the need for care. Neurological diseases can therefore also be extremely expensive. The direct and indirect costs of neurological diseases top EUR 336 billion a year2, a figure greater than the total budget of the German federal government. The three most expensive diseases are dementia (EUR 105 billion), followed by strokes (EUR 64 billion) and headaches (EUR 43 billion). Treatment and direct non-medical costs account for EUR 122 billion while indirect costs arising from sick leaves and early retirements, for example, total
EUR 93 billion. Neurological disease is also a substantial factor as measured in DALYs\(^3\), a metric for the number of years of life lost due to disease and premature mortality. Dementia disorders cause 2.2 million DALYs in the EU\(^4\) while strokes account for 1.6 million, Parkinson’s disease for 640,000 and epilepsy for 260,000.

**EU resources fund 90 per cent of cross-border research**

“Neurology and health care policy have a common interest in this realm. Europe should do much more for the research of neurological diseases in order to spare patients suffering and save costs for the social services systems”, Prof. Deuschl said. Yet a recent study (Bouillon et al. Lancet, 2015; Deloitte report) shows that health care research accounts for only four per cent of the EUR 1.4 trillion spent on health care in the 28 EU member states. And a mere two per cent of research spending comes from EU funds. The lion’s share of these EU resources is invested in transnational research, which is extremely valuable for neurological research. “90 per cent of cross-border collaboration in research is financed by the EU. Unfortunately, only a handful of public funding providers are willing to allocate money to transnational projects. That is very regrettable,” EAN President Deuschl noted. After all, many scientists confirm receiving essential fresh impetus from cross-border collaboration in research and benefiting from the approaches and experiences of others. The usefulness of multi-centre studies has already been objectively ascertained for cardiology: They have twice the impact as single-centre studies. There are also scientific reasons that speak in favour of multinational research networks: Multi-centre studies can be implemented more effectively and deliver substantial findings about actual clinical practice. EAN President Deuschl: “I therefore call for an adequate level of research funding that not only allows thinking outside national boxes but actively calls on people to do so.” The importance of a common European approach has also been confirmed in the “The Value of Treatment” report published some days ago by the European Brain Council, Prof Deuschl emphasizes: “This document is a clear plea for European networks and common research platforms to share data and results, for strengthening the collaboration with European Reference Networks for Rare Diseases and for the development of Joint Actions and other EU initiatives.”

\[^1\] Calculation includes EU-27 plus Switzerland, Norway and Iceland
\[^2\] Calculation includes EU-27 plus Switzerland, Norway and Iceland
\[^3\] Disability-Adjusted Life Years: The sum of the Years of Life Lost (YLL) due to premature mortality and the Years Lost due to Disability (YLD).
\[^4\] This encompasses the EU-27.


EBC Research Project - The Value of Treatment for brain disorders: Policy White Paper Towards Optimizing Research and Care For Brain Disorders

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