





1st European Congress on Adherence to Therapy



Giovanni La Via President of the Congress Chair of the Committee on the Environment, Public Health and Food Safety - European Parliament

Gianni Pittella **Honorary President of the Congress** President of the Group of the Progressive Alliance of Socialists & Democrats in the European Parliament

Scientific Partners

































Scientific Committee

Giuseppe Pozzi

SIHA - Senior International Health Association

Alberico Catapano

European Atherosclerosis Society

Enrico Agabiti Rosei

European Society of Hypertension

Silvana Galderisi

European Psychiatric Association

Francesco Blasi

European Respiratory Society

Vincenzo Mirone

Italian Society of Urology European Association of Urology



Welcome Message

I feel honoured to be the President of the first European Congress organised by Senior International Health Association on the adherence to therapy.

From a European perspective, we have looked at the national health systems and at the deep demographic, economic, and social changes of our time, and have discovered a common finding: the increase in chronic diseases is a direct consequence of the progressively ageing population.

Adherence to therapy, in this context, is imperative for two main reasons. First, to improve the life of patients with chronic diseases, including people over 65 who are the main consumers of medicines and second, for assuring an efficient use of the resources in the medical field, further allowing potential financial savings.

As Chair of the Committee on Environment, Public Health and Food Safety (ENVI) of the European Parliament, I believe it is essential for the institutions to be in direct contact with the scientific communities and with the patients, which will both guarantee an essential contribution to the designation of strategies aimed at the enhancement of the health systems in Europe.

The European Congress for the adherence to therapy provides the opportunity to doctors, patients associations and representatives of national and European institutions, to work together to identify the main changes necessary for the improvement of the adherence to therapy.

This can only be done by including all the relevant actors and by defining the core actions and priorities needed to reach the common goal.

Achieving these objectives will have two main positive impacts, which are improving the living standard of the European senior population, and reducing the waste of resources caused by the lack of adherence to therapy.

Finally, the European Charter for Adherence to Therapy, which will be drafted during the Congress and will contain the main strategies, can be considered a useful and valuable document to the European Parliament and other institutions, as it will also guide Member States towards the best direction to take on such fundamental topic, related to the health of the European population.

Giovanni La Via

President of the Congress Chair ENVI, Committee on the Environment, Public Health and Food Safety - European Parliament

Welcome Message

When I was invited, by Senior International Health Association's, to take the honorary presidency of the European Congress on adherence to therapy I accepted with great interest and conviction. I did it to express my support to ageing policies and to gather inputs from patients and the medical and scientific world in relation to seniors' health. Moreover I wished to express a commitment because, at European and national level, there is a clear need to develop interventions to increase adherence to medical treatments, to improve health outcomes and to lower costs for health care, involving all relevant actors and above all citizens/patients.

We know that a lack of adherence to medical prescriptions means worsening the health conditions of chronically ill patients and consequently leads to an increase in the costs that the health services have to support to deal with relapses and consequent hospitalizations of patients who do not follow care prescriptions adequately. We are speaking specifically about the elderly. We know that, in Europe, one out of two patients does not follow his treatment correctly and that the costs for governments, caused by poor adherence, are estimated at 125 billion and contribute to the premature death of about 200,000 people each year.

This is why the European Institutions should support an initiative, such as the European Congress for adherence to therapy, which sees patients assuming full awareness of the problem and recalling the European medical and scientific community and the institutions to stimulate a dialogue and a debate on this issue.

The goal of the congress, that I fully support, is to increase patients awareness and involve them, along with physicians, to outline strategies and proposals that can be useful to the same institutions that govern health in Europe.

In this sense we are ready to listen to the suggestions that will arise from the Congress and that will be included in a European Manifesto for adherence to therapy. This chart, that we will evaluate carefully, may involve all Member States in the framework of a common work shared by the scientific community, citizens and institutions.

Gianni Pittella

Honorary President of the Congress President of the Group of the Progressive Alliance of Socialists & Democrats in the European Parliament



Assumption

According to Eurostat data, in early 2013 the population of the EU-28 was estimated at 505.7 million inhabitants, with a share of 18.2% represented by people aged over 65 years. Almost everywhere in the EU there has been an increase in the share of the older population, as a result of the increase in life expectancy, which in the last 50 years increased in the EU by an average of about 10 years, due to improved socio-economic and environmental conditions, health care and medical treatment. By 2025 over 20% of the Europeans will be 65 or older and the number of octogenarians will rapidly increase.

The increased life expectancy represents obviously a positive effect of the progress in prevention and care, but also implies a challenge for Health Services, due to the high level of complexity of the health needs of the elderly, making among others care and, in particular, the use of drugs a challenging task. We know by now that the fundamental conditions for active and healthy aging include not only prevention and adoption of healthy lifestyles, but also adherence to therapy. Typically, the elderly reveal the co-existence of more chronic diseases and clinical conditions that can't be ascribed to a specific disease and frequently have multiple causes. Drug treatment of a complex patient is a challenging task for everyone involved in the care of the patient, considering that 50% of people over 65 years suffer from multimorbidity and that 40% of those over sixty-five consumes between 5 and 9 drugs.

It is estimated that each year the poor adherence to medical treatments in Europe causes about 200,000 deaths and burdens on health expenditure up to 80 billion euro a year (AIFA source).

Adherence to treatment by patients suffering of chronic pain reaches across Europe, with different values depending from the chronic diseases, approximately 50%. We know by now that the fundamental conditions for active and healthy aging include not only prevention and adoption of healthy lifestyles, but also adherence to therapy. We also know that non-adherence to treatment involves the risk of recurrence and adverse events, and that this, in addition to health risks, results in additional health care costs, which can be reduced. In the United States it was measured that non-adherence to treatment determines 100 billion euro of avoidable hospitalizations.

Europe and the Member States have a duty to attempt any possible solution to increase the level of adherence to treatment, in order to achieve important savings and improve the quality of life of citizens.

Issues

Epidemiology, adherence data, comparing experiences, adherence problems, possible actions. What can be done by the European scientific societies, GPs, nurses, patients, pharmacists, institutions, industry.

Friday, November 18



15:30-16:30

Opening Address

Elio D'Orazio

President of Senior International Health Association

Giovanni La Via

President of the Congress and Chair ENVI Committee on the Environment, Public Health and Food Safety - European Parliament

Marianne Takki

Acting deputy Head of unit, Health Threats Unit, DG Sanco - European Commission

Georges Dassis EESC President

Lectio Magistralis

Francesco Scaglione

Associate Professor and Coordinator of Medical Pharmacology course, University of Milan

Adherence to inhalation therapies: a multifactorial effect Richard Dekhuijzen, The Netherlands Welcome Address

Guidelines and Aims of the 5 Areas:

Dyslipidemia Area, Hypertension Area, Psychiatric Area, Respiratory Area,

Urologic Area

Giuseppe Pozzi

Scientific Committee SIHA

Alberico Catapano

European Atherosclerosis Society

Enrico Agabiti Rosei

European Society of Hypertension

Silvana Galderisi

European Psychiatric Association

Francesco Blasi

European Respiratory Society

Vincenzo Mirone

Italian Society of Urology

European Association of Urology

Roberto Messina

Senior International Health Association

16:30-19:30 Parallel Scientific Session

19:30 Closing

Issues

Epidemiology, adherence data, comparing experiences, adherence problems, possible actions. What can be done by the European scientific societies, GPs, nurses, patients, pharmacists, institutions, industry.

Saturday, November 19

Parallel Hall

09:00-13:30 Parallel Scientific Session and Preparation of the final report

13:30-14:30 Lunch



14:30-15:30 Rapporteurs of the 5 Areas

15:30-16:30 Institutional Session

Giovanni La Via

President of the Congress and Chair ENVI Committee on the Environment, Public Health and Food Safety - European Parliament Guido Rasi

EMA Executive Director

Gianni Pittella

Honorary President of the Congress and President of S&D Group - European Parliament

Walter Gualtiero Ricciardi

Presidente ISS

Sergio Liberatore

General Manager IMS Health

MEPs

Mercedes Bresso, S&D Italy Santiago Fisas Ayxela, PPE Spain Elisabetta Gardini, PPE Italy Pier Antonio Panzeri, S&D Italy Aldo Patriciello, PPE Italy Remo Sernagiotto, ECR Italy

Conclusions

Elio D'Orazio

President of Senior International Health Association

Roberto Messina

Senior International Health Association

16:30 Closing

Dyslipidemia Area (Sala del Parco 1)

Friday, N	November 18	Saturda	y, November 19
16:30-18:30	Session I Chairman Alberico L. Catapano, Italy	09.00-11.30	Session II Chairman Alberico L. Catapano, Italy
16:30-16:50	Introduction to the topic Alberico L. Catapano, Italy	09:00-09:15	Introduction to the topic Alberico L. Catapano, Italy
16:50-17:15	Control of plasma lipids: where we stand? From Euroaspire to local surveys Lale Tokgozoglu, Turkey	09:15-10:00	Adherence to lipid lowering therapy the AIFA view Luca Pani, Italy
17:15-17:40	Is adherence to hypolipidaemic therapy a clinically relevant issue? <i>Alberico L. Catapano,</i> Italy		Adherence to lipid lowering therapy: is cost an issue? Luca Degli Esposti, Italy
17:40-18:05	Adherence to lipid lowering drugs and CV events: the Italian experience	10:45-11:30	Early vs late treatment any possible impact on adherence? <i>Chris Packard,</i> United Kingdom
	Giovanni Corrao, Italy	11.30-12.00	Interactive Discussion
18:05-18:30	How to improve adherence to lipid lowering therapy: what the guidelines say?	12.00-13.30	Preparation of the report from the Dyslipidemia Area
	Catriona Jennings, United Kingdom	13:30-14:30	Lunch
18.30-19.30	Interactive Discussion	14.30-15.30	Plenary Session Rapporteurs of the 5 Areas

Hypertension Area (Sala della Marina 1)

Friday, N	November 18	Saturda	y, November 19
16:30-18:30	Session I Chairman <i>Enrico Agabiti Rosei,</i> Italy	09.00-11.30	Session II Chairman <i>Enrico Agabiti Rosei,</i> Italy
16:30-16:45	Introduction to the topic Enrico Agabiti Rosei, Italy	09:00-09:25	Introduction to the topic Enrico Agabiti Rosei, Italy
16:45-17:20	Awareness, treatment and BP control in Europe Josep Redon, Spain	09:25-09:50	Adherence to antihypertensive treatment in: Eastern Europe Bojan Jelakovic, Croatia
17:20-17:55	Adherence to antihypertensive drugs and CV events Giuseppe Mancia, Italy		Western Europe Thomas Kahan, Sweden Countries facing economical
17:55-18:30	How to improve adherence to antihypertensive drugs <i>Michel Burnier,</i> Switzerland	10:40-11:05	problems Konstantinos Tsioufis, Greece High risk patient with previous
18.30-19.30	Interactive Discussion		vascular event Diederick E. Grobbee, The Netherlands
		11:05-11:30	Adherence in women Renata Cifkova, Czech Republic
		11.30-12.00	Interactive Discussion
		12.00-13.30	Preparation of the report from the Hypertension Area
		13:30-14:30	Lunch
		14.30-15.30	Plenary Session Rapporteurs of the 5 Areas

Psychiatric Area (Sala della Vecchia Pescheria)

Friday, November 18		Saturday, November 19	
16:30-18:30	Session I Chairperson Silvana Galderisi, Italy	09.00-11.30	Session II Chairperson Silvana Galderisi, Italy
16:30-16:45	Introduction to the topic Silvana Galderisi, Italy	09:00-09:15	Introduction to the topic Silvana Galderisi, Italy
16:45-17:20	Adherence to treatment in Psychiatry: an introduction Silvana Galderisi, Italy	09:15-10:00	Adherence to treatment in people with Bipolar Disorders Andreas Erfurth, Austria
17:20-17:55	Adherence to treatment in people with Schizophrenia Istvan Bitter, Hungary	10:00-10:45	Adherence to treatment in people with Anxiety Disorders Stefano Pallanti, Italy
17:55-18:30	Adherence to treatment in people with Eating Disorders Palmiero Monteleone, Italy	10:45-11:30	Adherence to treatment in people with Depression <i>Marie Tournier,</i> France
18.30-19.30	Interactive Discussion	11.30-12.00	Interactive Discussion
		12.00-13.30	Preparation of the report from the Psychiatric Area
		13:30-14:30	Lunch
		14.30-15.30	Plenary Session Rapporteurs of the 5 Areas

Respiratory Area (Sala della Marina 2)

Friday, N	November 18	Saturda	y, November 19
16:30-18:30	Session I Chairman <i>Francesco Blasi,</i> Italy	09.00-11.30	Session II Chairman Francesco Blasi, Italy
16:30-16:45	Introduction to the topic Francesco Blasi, Italy	09:00-09:10	Introduction to the topic Francesco Blasi, Italy
16:45-17:20	COPD and Asthma epidemiology in Europe Giovanni Viegi, Italy		Patients' unmet needs Dan Smyth, United Kingdom
17:20-17:55	Awareness and adherence in COPD and Asthma Federico Lavorini, Italy	09:35-11:05	Different health systems' approaches Stefano Nardini, Italy Stephen Turner, United Kingdom Anna Doboszynska, Poland François-Xavier Blanc, France
and costs	adherance-related burden		Luis Puente Maestu, Spain Andrea Koch, Germany Antonio Foresi, Italy
	The Netherlands	11:05-11:30	Real-life adherence in asthma and COPD: various solution
18.30-19.30	Interactive Discussion		David Price, United Kingdom
		11.30-12.00	Interactive Discussion
		12.00-13.30	Preparation of the report from the Respiratory Area
		13:30-14:30	Lunch
		14.30-15.30	Plenary Session Rapporteurs of the 5 Areas

Urologic Area (Sala del Faro)

Friday, November 18

17:55-18:30 BPH and Urinary Incontinence:

Walter Artibani, Italy

and costs

18.30-19.30 Interactive Discussion

Adherence-related burden

Technical Commissions Halls

16:30-18:30	Session I Chairmen Walter Artibani, Italy Vincenzo Mirone, Italy Christopher Chapple, United Kingdom	09.00-11.30	Session II Chairmen Giuseppe Carrieri, Italy Vincenzo Mirone, Italy Christopher Chapple, United Kingdom
16:30-16:45	Introduction to the topic Walter Artibani, Italy Vincenzo Mirone, Italy Christopher Chapple, United Kingdom	09:00-09:20	Introduction to the topic Giuseppe Carrieri, Italy Vincenzo Mirone, Italy Christopher Chapple, United Kingdom
16:45-17:20	BPH and Urinary Incontinence, epidemiology in Europe Walter Artibani, Italy Vincenzo Mirone, Italy	09:20-09:50	Patients' unmet needs Christopher Chapple, United Kingdom
17:20-17:55	Awareness and Adherence Therapy in BPH and Urinary Incontinence Christopher Chapple, United Kingdom	09:50-11:30	Different health systems' approaches Giuseppe Carrieri, Italy Mark J. Speakman, United Kingdom Piotr Chlosta, Poland Bertrand Lukacs, France Carlos Llorente, Spain Oliver W. Hakenberg, Germany

13:30-14:30 Lunch

14.30-15.30 Plenary Session
Rapporteurs of the 5 Areas

11.30-12.00 Interactive Discussion

12.00-13.30 Preparation of the report

from the Urologic Area

Saturday, November 19

Faculty

Surname	Name	Country
Agabiti Rosei	Enrico	ITALY
Artibani	Walter	ITALY
Bitter	Istvan	HUNGARY
Blanc	Francois-Xavier	FRANCE
Blasi	Francesco	ITALY
Bresso	Mercedes	ITALY
Burnier	Michel	SWITZERLAND
Carrieri	Giuseppe	ITALY
Catapano	Alberico L.	ITALY
Chapple	Christopher R.	UNITED KINGDOM
Chlosta	Piotr Ludwik	POLAND
Cifková	Renata	CZECH REPUBLIC
Corrao	Giovanni	ITALY
Degli Esposti	Luca	ITALY
Dekhuijzen	Pieter Nicolaas Richard	THE NETHERLANDS
Doboszynska	Anna	POLAND
D'Orazio	Elio	ITALY
Erfurth	Andreas	AUSTRIA
Fisas Ayxela	Santiago	SPAIN
Foresi	Antonio	ITALY
Galderisi	Silvana	ITALY
Gardini	Elisabetta	ITALY
Grobbee	Diederick Egbertus	THE NETHERLANDS
Hakenberg	Oliver	GERMANY
Jelakovic	Bojan	CROATIA
Jennings	Catriona Sian	UNITED KINGDOM
Kahan	Thomas	SWEDEN
Koch	Andrea	GERMANY
La Via	Giovanni	ITALY

Faculty

Surname	Name	Country
Lavorini	Federico	ITALY
Llorente Abarca	Carlos	SPAIN
Lukacs	Bertrand	FRANCE
Mancia	Giuseppe	ITALY
Messina	Roberto	ITALY
Mirone	Vincenzo	ITALY
Monteleone	Palmiero	ITALY
Nardini	Stefano	ITALY
Packard	Christopher John Dillon	UNITED KINGDOM
Pallanti	Stefano	ITALY
Pani	Luca	ITALY
Panzeri	Pier Antonio	ITALY
Patriciello	Aldo	ITALY
Pittella	Gianni	ITALY
Pozzi	Giuseppe	ITALY
Price	David	UNITED KINGDOM
Puente Maestu	Luis	SPAIN
Rasi	Guido	UNITED KINGDOM
Redon	Josep	SPAIN
Scaglione	Francesco	ITALY
Sernagiotto	Remo	ITALY
Smyth	Dan	UNITED KINGDOM
Speakman	Mark	UNITED KINGDOM
Takki	Marianne	BELGIUM
Tokgözo ğ lu	Lale	TURKEY
Tournier	Marie	FRANCE
Tsioufis	Costas	GREECE
Turner	Stephan	UNITED KINGDOM
Van Boven	Job Frank Martien	THE NETHERLANDS
Viegi	Giovanni	ITALY

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Organizing Secretariat



AIM Group International
Via Flaminia, 1068 - 00189 Roma
Tel. +39 0633053.1 - Fax +39 0633053249
siha2016@aimgroup.eu
www.aimgroupinternational.com



Avenue de Tervuren 67 - 1040 Bruxelles Tel. +32 27437010 / +39 0412794810 - Fax +32 27437019 info@sihassociation.org www.seniorinternationalhealthassociation.org