



**COUNCIL OF
THE EUROPEAN UNION**

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NOTE

from: General Secretariat of the Council
to: Permanent Representatives Committee (Part 1)/Council
Subject: EMPLOYMENT, SOCIAL POLICY, HEALTH AND CONSUMER AFFAIRS
COUNCIL MEETING ON 1 AND 2 DECEMBER 2011

Draft Council conclusions on “Prevention, early diagnosis and treatment of chronic respiratory diseases in children”
- *Adoption of Council conclusions*
(Public debate in accordance with Article 8(2) of the Council's Rules of Procedure [proposed by the Presidency])

1. The Working Party on Public Health discussed and agreed on the draft Council conclusions as set out in the Annex.
2. COREPER is invited to confirm the Working Party's agreement and submit the draft conclusions for adoption by the Council (EPSCO) at its meeting on 2 December 2011.
3. The Council is invited to adopt the draft conclusions and forward them for publication in the Official Journal of the European Union.

**Draft Council conclusions on
Prevention, early diagnosis and treatment of chronic respiratory diseases in children**

THE COUNCIL OF THE EUROPEAN UNION,

1. RECALLS that under Article 168 of the Treaty on the Functioning of the European Union, a high level of human health protection shall be ensured in the definition and implementation of all Union policies and activities. Union action, which shall complement national policies, shall be directed towards improving public health, preventing physical and mental illness and diseases and obviating sources of danger to physical and mental health;
2. RECALLS the Council conclusions of 7 December 2010 on 'Innovative approaches for chronic diseases in public health and healthcare systems'¹;
3. RECALLS the Council conclusions of 2 June 2004 on childhood asthma²;
4. RECALLS the Political declaration of the High-level Meeting of the General Assembly on the Prevention and Control of Non-communicable Diseases adopted by the United Nations General Assembly on 19 September 2011³;
5. RECALLS WHO Framework Convention on Tobacco Control;

¹ OJ C 74, 8.3.2011, p.4.

² 9507/04 (Press 163).

³ United Nations A/RES/66/2 (A/66/L.1)

6. RECALLS the Council Recommendation 2009/C 296/02 of 30 November 2009 on smoke-free environments⁴;
7. WELCOMES existing networks and alliances, such as the Global Allergy and Asthma European Network (GA²LEN) and Global Alliance against Respiratory Diseases (GARD), created in 2004 and 2006 respectively to investigate and reduce the burden and improve early detection and proper treatment of chronic respiratory diseases in the EU;
8. WELCOMES the results of the following conferences:
 - The WHO pan-European Environment and Health process committed to ensuring safer environments for children and the 5th Ministerial Conference on environment and health held on 10-12 March 2010 in Parma (Italy),
 - The experts' conference on the "prevention and control of childhood asthma and allergy in EU from public health point of view: urgent need to fill the gaps" held on 21-22 September 2011 in Warsaw - Ossa (Poland), which pointed out that there is an urgent need to improve the prevention, early detection and treatment of chronic respiratory diseases in children by addressing them in health policy at local, regional, national and EU levels. In this regard, cooperation between the Member States and relevant stakeholders in improving and supporting the network of national centres should be developed;
9. STRESSES that chronic respiratory diseases are the most common non-communicable diseases in children;

⁴ OJ C 296, 5.12.2009, p.4

10. STRESSES that asthma and allergic rhinitis are the most common chronic respiratory diseases in children and that asthma is the most common reason for emergency room visits and hospital admissions among children;
11. STRESSES that the prevalence of respiratory diseases in children in the European Union has been rising in recent decades, but EU-wide monitoring of prevalence, severity, disease types and changes in allergen and irritant exposure is insufficient;
12. STRESSES that failure to diagnose and treat chronic respiratory diseases in children leads to an economic and social burden, which can be limited by prevention, early diagnosis and treatment;
13. NOTES the existence of inequalities in access to the prevention, early diagnosis and treatment of chronic respiratory diseases in children between, as well as within, EU Member States;
14. EMPHASISES that the biggest risk factors for the development of chronic respiratory diseases are a combination of genetic predisposition with environmental exposure to inhaled substances and particles, such as environmental tobacco smoke, poor indoor air quality and outdoor air pollution;
15. EMPHASISES that conditions before birth and in early childhood influence health in adult life; therefore it is important to protect pregnant women and children against negative influences of environmental factors, including exposure to tobacco smoke;

16. RECOGNISES that continuous health education of children, parents, teachers and training of health professionals play a key role in the prevention and treatment of chronic respiratory diseases in children. It fosters awareness and pro-health attitudes among individuals and facilitates the monitoring of chronic diseases by health professionals;
17. RECOGNIZES that an important element of the prevention and treatment of chronic respiratory diseases in children is self management and children's participation in health care decisions affecting them, taking into account their age and maturity, as well as the active involvement of the parents and family;
18. RECOGNISES that the prevention, early diagnosis and treatment of chronic respiratory diseases have a positive impact on child development, quality of life and contribute to an active and healthy childhood and healthy ageing. Therefore it is important to develop new tools to improve the prevention, early diagnosis and treatment of chronic respiratory diseases in children by using "child – friendly health care" and "health in all policies" approaches, especially across health, education, environment, research, employment and social policies;
19. INVITES the Member States to:
 - give appropriate consideration to the prevention, early diagnosis and treatment of chronic respiratory diseases in children in national and/or regional and/or local health programmes,

- increase public awareness of chronic respiratory diseases in children and improve the knowledge and education of children, families, teachers and training of health professionals with regard to their role in prevention, early diagnosis, treatment and monitoring of chronic respiratory diseases in children,
- continue, and where appropriate strengthen, smoking prevention and cessation programmes for pregnant women and parents as well as measures to prevent pregnant women and children being exposed to tobacco smoke, in particular at home and in closed spaces,
- follow the Council recommendation on smoke-free environments⁵,
- strengthen cooperation with relevant stakeholders, especially patients' and health professionals' organisations at all levels of care, including primary and secondary prevention and health care,
- exchange best practices in relation to the prevention, early diagnosis and treatment of chronic respiratory diseases, as well as data on their prevalence, incidence and outcomes,
- strengthen the cooperation of national centres and reinforce existing international research networks in the field of chronic respiratory diseases;

⁵ OJ C 296, 5.12.2009, p.4

20. INVITES the Member States and the Commission to:

- strengthen efforts to reduce the disability and premature death related to asthma by fostering best practices at international level,
- support national centres and existing international research networks to find cost-effective procedures by using health technology assessment to improve health care systems standards regarding to chronic respiratory diseases,
- develop work aimed at better understanding the reasons for the increase in the prevalence of chronic respiratory diseases in children,
- improve information and knowledge on the disparities between regions and throughout Europe in relation to chronic respiratory diseases in children, in close cooperation with relevant stakeholders,
- improve knowledge and information addressed to the relevant stakeholders on the effects of air pollution and other environmental factors on chronic respiratory diseases, and their co-morbidities,
- continue and strengthen programmes and policies to improve indoor and outdoor air quality,
- promote effective tobacco control at national, EU and international levels in accordance with relevant EU legislation and the WHO Framework Convention on Tobacco Control and its guidelines, and consider its strengthening,

- improve the quality of indoor and outdoor environment in which children live and encourage them to be physically active,
- consider the use of e-Health tools and innovative technologies for prevention, early diagnosis and treatment of chronic respiratory diseases,
- encourage and support research on the causative genetic and environmental factors of chronic respiratory diseases to contribute to the development of evidence-based policy approaches and balance research funding in the light of their prevalence and the burden they impose,
- promote a multisectoral approach across the social, environment, research, education and employment sectors, to improve the impact of policy on respiratory health,
- engage health professionals' and patients' organisations to work towards more patient empowerment in the process of prevention, early diagnosis and treatment of chronic respiratory diseases;

21. INVITES the European Commission to:

- continue including chronic respiratory diseases in research and health-related programmes and activities,

- support Member States in:
 - developing and implementing effective policies on the prevention of chronic respiratory diseases in children through support for the development, evaluation and exchange of good practice,
 - improving networking among institutions responsible for the implementation of national and/or regional and/or local programmes and for the exchanging of experience and good practice,
 - strengthening cooperation of national centres and reinforcing existing international research networks in the field of chronic respiratory diseases.
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