Dear Commissioner Dalli,

The European Chronic Disease Alliance (ECDA) has analysed the 23 June Zero Draft. We welcome the draft, which reflects a broad array of issues directly related to non-communicable diseases (NCDs).

The ECDA would like to underline a couple of aspects. We think it is important that the final outcomes document is relevant in a global context; it should not be a document that is particularly focusing on the developing countries.

We believe that a strong emphasis on primary population-based prevention must be integral to the document.

“What gets measured gets done”

As WHO Director General, Dr Margaret Chan, stated at the First Global Ministerial Conference on NCDs and Healthy Lifestyles in Moscow in April 2011, “Without global goals or targets, this is not going to fly – what gets measured gets done”. The HIV/AIDS UNGASS in 2001 and consequent review meetings have demonstrated this. Along with specific language, the ECDA is calling for the inclusion of time-bound targets in the Outcomes Document. This omission is a critical weakness of the Zero Draft, and one that civil society is united around and will support Member States to rectify. Specific and measurable targets and timetables are integral to creating a shared vision between Member States and civil society, driving international and national follow-up action, and catalysing more effective use and coordination of resources.
We believe it is important to pay heed to conflict of interests, particular in the case of tobacco industry, but also more generally. Industry should be included at the implementation stage – but the policies needed should be agreed by governments to achieve public health goals.

A final comment is that the zero draft has made a glaring mistake in not considering saturated fat and its important role in particular in the development of heart disease.

The document we submit to you in attachment sets out the ECDA’s proposed amendments that we hope the European Commission together with the EU Member States will consider for inclusion in the final Outcomes Document.

We believe that our suggestions are self-explanatory but are, naturally, happy to discuss them with you and your services.

Yours sincerely,

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European Society of Cardiology

Hans Stam
President
European Heart Network

David Kerr
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Mark Thursz
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