





Heart failure: an ohlistic approach can shape the future of public health in the aging western societies



Galway 19-21 JUN. 17 Int.HF meeting , Drs Marino, Mr Quaranta members of AISC

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an ohlistic approach can shape the future of public health in the aging western societies SUMMARY:

- 1. EU: Building and strengthening strategic alliances on hearth failure prevention and care;
- 2. Leveraging social media to increase organisational reach and effectiveness;
- 3. Exploring how to meet the needs of carers;
- 4. Putting heart failure on the health policy agenda
- 5. What is AISC doing?

Conclusions in brief...

Building and strengthening strategic alliances on hearth failure prevention and care

Public and Private health care organizations must develop <u>close ties</u> to build-up a system of systems that can be effective and sustainable in-time:

✓ Insurances, professionals and public health care systems including family doctors, must share open data (i.e.: statistics...) and "privacy sensitive" (PS) data in the appropriate channels to enhance prevention and treatments cost-effectiveness ratio;

✓ Such data can be shared on a case-basis principle and additional restrictions for PS data, with pharmacy industries which conduct researches on hearth failure specifically;

✓ Such organizations/actors (Ministry of Health, local authorities, insurances, professionals, family doctors, physicians) should be acting in a cross - compensation configuration either in prevention,

✓ <u>Volunteers organizations as the AISC can play a key role</u> in between public and private resources



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➤ common rules development/refinement: EU gives a strong background not only by directives but by regulations and recommendations too..Let's not forget that health is a core recognized right for every citizen and is a part of the s.c. "acquis" in the Union: Art. 114 and 168 FEU Treaty;

>Information Technology (IT) is the keystone by which data sharing and coordinated actions take place in reality;

Information and formation (IF) at all levels: prevention and care <u>are a cultural challenge</u> <u>first</u>;

<u>Cross linking among volunteers organizations in EU</u> to explore common strengths and weaknesses;



Social Media play a double role that can effectively increase organisational reach in heart failure prevention and treatment:

- patient's seclusion sets a negative environment that potentially can have fatal effects: social media fostered and implemented by volunteers organizations can be part of the remedy...;
- 2. Social media enhanced/integrated by specific apps can be effective in prevention and treatment:
 - Carers can easily and timely reach and be reached by patients;
 - Knowledge/awareness can be <u>easily shared among carers and among patients</u> <u>even in different social groups</u>;
 - Specific apps, shared by "socials" can be a great help in organizing visits, therapy plans and in emergency management too.



Putting heart failure on the health policy agenda

Heart failure is statistically a typical disease in the s.c. "aging societies":



- Western EU societies are facing from the 80s' a process of "pyramid inversion" in population composition by age: such process may imply the cohabitation with long term, but controlled disease as heart failure in bigger numbers;
 - By this preamble heart failure <u>prevention</u> must have "the podium" on EU countries health policy agenda in order to limit the costs of a massive care hardly sustainable in-time due to the progressive decrease of active working population;
- patients by their side, must be given <u>an acceptable life level</u> either from the purely health point of view or from their social interactions chances.

Putting heart failure on the health policy agenda

Carers and physicians play the hardest role...:

Carers and phisicians may feel "left alone" facing the challenges of prevention and care with scarce resources and bureaucracy obstacles what to do then...:

- ✓ public powers must affirm <u>phisician's exclusive right to scientific validation both in</u> <u>prevention knowledge and in therapy strategies:</u> social media diffused access has a "black counterpart:" many not qualified and improvised subjects may express <u>convincing opinions</u> with absolutely NON scientific basis causing great damages in prevention and care policies;
- Media/institutions may strenghten their (both...carers and phisicians) social role;
- Media/institutions should support the interactions with volunteers organization and pharmacy industry expecially in prevention and research phases;
- <u>carers should be involved at the best practice</u> in the Information/Formation processes not only from the medical point of view but from the psychiological, social, juridic and IT too;
- At all levels <u>bureaucracy impact</u> for carers and phisicians _on daily activity and on side duties should be <u>strongly</u> reduced;





What is AISC doing?

Associazione Italiana Scompensati Cardiaci

- ✓ INCREASING THE AWARENESS
- Organization of prevention campaigns on the territory (mobile clinic);
- Web site with professional advicing available, social media (FB);
- Meetings with public authorities (may 2017 ministry of Health);

✓ SUPPORTING EDUCATION AND PATIENT'S CARE

- patients training to recognize the Heart failure and achieve better self care;
- Involvement of National hospital structures to create centers for Heart failure (33 centers as of today)

LINKING WITH OTHER PATIENT'S ORGANIZATIONS



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What is AISC doing?

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Putting heart failure on the health policy agenda <u>Conclusions</u>

Heart failure is challenge to be won by a global approach:

- Ensuring the same (high!) care and prevention <u>standards</u> across EU countries under their proper responsibility as of art. 114 FEU;
- Looking at the <u>patient</u> as a <u>social subject</u> who plays an active role in prevention, knowledge sharing and self caring;
- ✓ Involving all the subjects/resources: hospitals, professionals, insurances, volunteers organizations, IT resources and firms in the <u>building of a net</u> capable to enable the carers and protect the patients so letting them be <u>social subjects and not social "weights."</u>

This holistic approach is a task for politicians, real economy subjects and social relevant organization even more than for the physicians who always play the "core game"..."If politics is the noble art to be human together I know no human without a heart"...and a healty heart is the key to a life worth to be living...let's not lose the chance!