



eular

**EP Interest Group on Rheumatic and Musculoskeletal Diseases**  
**Meeting IG-9-26/06/2012**  
**RMDs and Pain: Facts and Findings**  
**MINUTES**

**Mr Jim Higgins (MEP from Ireland, Vice Chair of the Interest Group):** *“Welcome and Introduction”*

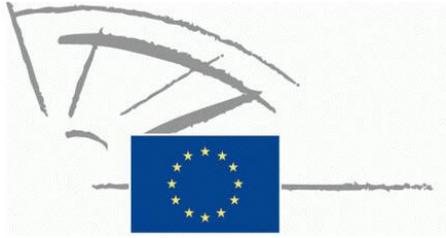
Mr Higgins thanked the speakers and other participants for attending the meeting. He stressed the importance of the Interest Group for providing MEPs with relevant information on the individual, social and economic consequences of rheumatic and musculoskeletal diseases as well as for promoting the debate between MEPs, other EU institutions and stakeholders on how the EU institutions can better contribute to address these issues. Pain should be taken very seriously since it is not only the most obvious symptom of RMDs but also because around 60% of pain is caused by RMDs with back pain being the most prevalent one.

**Prof Giustino Varrassi (Former president of EFIC):** *“Links and commonalities between RMDs and pain”*

Prof Varrassi started by mentioning a survey conducted among 500,000 Europeans which showed that there is a high percentage in the EU population suffering from chronic pain (19%). The most common pain is low back pain. It is the number one reason why people contact their General Practitioner. In most cases low back pain is caused by our sedentary work life and therefore mainly affects people in the productive age. Consequently, this kind of pain has a highly negative influence on the workforce of the EU Member States. The societal impact of chronic pain should not be underestimated since it results in many absences during the year and high drug consumption. Prof Varrassi underlined the importance of prevention, especially regarding costs since disease treatments are more cost-intensive than preventive measures.

**Mr Joop van Griensven (President of Pain Alliance Europe, PAE):** *“The pain community’s perspective: The Road Map to Action”*

Mr van Griensven talked about the “Road Map to Action” which has its origins in May 2011 at the Societal impact on Pain (SIP) Symposium. The map aims to raise awareness of the impact of pain on society, healthcare and economic systems. The Road Map for Action includes seven priorities to tackle the problem, such as a better access to pain management, the implementation of prevention and education programmes and the monitoring of the outcomes in pain care. For this reason the Pain Alliance Europe recommends firstly, to raise awareness of pain and its consequences in all parts of life by creating public campaigns, and secondly, to focus on a horizontal approach when dealing with RMDs and other chronic diseases. Finally, according to PAE, the EU Member States should exchange



# eular

best practices and develop guidelines in order to ensure an EU wide effective approach and cooperation.

**Mr Neil Betteridge (Vice President of EULAR, representing People with Arthritis/Rheumatism in Europe, PARE):** *“The RMD community’s perspective on pain”*

Mr Betteridge made the connection between chronic pain and EULAR. Chronic pain is basically part of every musculoskeletal disease and therefore of high interest for EULAR’ activities. It is of concern for the Member States as well, regarding their economy (mainly the costs it causes), the labour market (absences of the workforce), the increasing demands for health care services, and the people whose everyday life is disturbed and who feel devastated experiencing continuous pain every day. Prevention and research are the most effective measures to reduce the impact on EU Member States and also reduce the pain for numerous EU citizens.

He also provided examples of concrete initiatives addressing pain from the Member States. For example in the UK organisations as Arthritis Care or the Chronic Pain Policy Coalition issued specific recommendations to politicians such as agreed standards of care in pain or awareness campaigns to educate the public and health professionals on chronic pain.

**Mr Jim Higgins (MEP from Ireland, Vice Chair of the Interest Group):** *“Discussion with participants”*

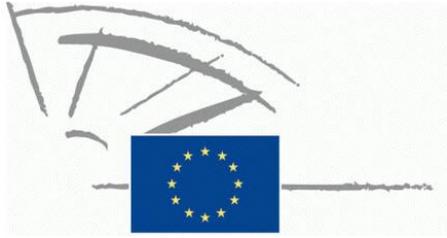
Participants started discussing about different aspects of pain and pain management. For example, Mr Balvinder Bains from Unite the Nation mentioned that drugs alone do not cure chronic pain but only reduce the symptoms. Mr Betteridge added that pharmacists often do not know themselves what might be the best medication for the patient. In this regard Mr van Griensven emphasised the importance of a treatment at an early stage of the disease.

Another topic discussed was the idea of strengthening partnerships with other health related organisations as brought up by Mr Betteridge. Here Ms Flannery from EUREGHA (European Regional and Local Health Authorities) mentioned that they have a region-wide network which is in continuous exchange to promote best practice examples.

In the end Mr Grigorij Kogan from the European Commission stressed that RMDs do play an important role on the Commission’s agenda which could be seen in the Seventh Research Framework Programme where 200 million Euros were accorded to them.

**Mr Jim Higgins (MEP from Ireland, Vice Chair of the Interest Group):** *“Closing Remarks”*

Mr Higgins thanked everyone for the participation in the meeting and the discussion. He concluded that there is a strong link between pain and RMDs, given that pain of the musculoskeletal system is the most common type of pain. In this sense, it is necessary to further promote synergies and collaboration between those mainly working from the “pain perspective” and those working from



# eular

the “disease perspective” in order to get better results and avoid redundancy. For him the 9<sup>th</sup> IG Meeting was a next step in this direction.

**About rheumatic and musculoskeletal diseases:**

Chronic rheumatic and musculoskeletal diseases affect almost one-quarter of all Europeans (more than 120 million). These people have impaired quality of life, various degrees of disability and often premature death. Rheumatic diseases elicit the highest costs to health care and social systems. In Europe alone, due to health care costs, work-disability, sick leave and premature retirement, rheumatic diseases impose an economic burden of more than € 240 billion per year on state budgets. The impact of these diseases is expected to grow immensely due to demographic and lifestyle changes.

**About EULAR:**

The European League against Rheumatism (EULAR) is the European umbrella organisation in the area of rheumatic and musculoskeletal diseases. EULAR represents scientific societies, health professionals associations and organisations of people with arthritis/rheumatism throughout Europe. The aims of EULAR are to reduce the burden of rheumatic diseases on the individual and society and to improve the treatment, prevention and rehabilitation of musculoskeletal diseases. More information at [www.EULAR.org](http://www.EULAR.org).

**Contact:**

EULAR EU Office, Avenue des Arts 39, 1040 Brussels, Tel. +32 2 513 77 02, Fax +32 2 502 77 03, [brussels@EULAR.eu](mailto:brussels@EULAR.eu)