

Speech
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Ministerial Conference: “Combating Alzheimer’s and
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Fellow ministers,
Commissioner,
Administrative managers,
Voluntary sector managers,
Ladies and gentlemen,
Friends,

In 2050, close to one third of the population of the EU will be over 65.

Europe is ageing.
It has the will, the capacity and the duty to **age healthily**.

In choosing to make the challenge of ageing a priority over 18 months, the EU demonstrates its will to anticipate the combined health, economic and social impacts of a spectacular, unprecedented demographic change.

To this end, the French, Czech then Swedish Presidencies are committed to **securing acceptance of a common strategy** so that a more effective response can be brought to bear on shared concerns.

This model initiative clearly contradicts the presumption that health is not a community issue, in view of the weakness of our common legal corpus in this sphere.

Moreover, those that subscribe to this received and already dated idea all too often reduce Europe to a pure legal construct, aimed exclusively at offering conditions for free trade.

Our initiative, in contrast, aims to build the tangible Europe which citizens of the Union are calling for: an inclusive Europe, combining its strengths to fully embrace a shared future.

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There is no doubt that our national health systems are far from identical. And yet each of us faces more or less the same issues.

These shared issues should lead us to **develop convergent policies**. Indeed, for the countries of the European Union, the ageing of the population is **a common trend, resulting in the prevalence of the same forms of pathology**.

The sharing of experiences would without a doubt be beneficial to all.

The implementation of a European strategy is absolutely essential if, by uniting our efforts, we wish to be **able to combine our strengths**.

It is in this spirit that the French Presidency was keen to address the issue of ageing from the perspective of Alzheimer's disease, making the fight against this and other related diseases **a community priority**.

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In each country, the same questions are posed.

How can we improve disease prevention and patient care and treatment? How can we favour the emergence of new specialisms? How can we support carers?

Close cooperation between Member States is our only means of rising to what is a threefold challenge: a scientific challenge, a medical challenge and a social challenge.

By taking an overarching, pragmatic approach based on the sharing of experiences, our European strategy could thus contribute to:

- *drawing up common principles on the quality of support provided for patients and their carers*
- *developing specific competencies and adapting specialisms*
- *coordinating our research programmes*

This common strategy, whose essential goal is to **improve care for elderly people suffering from neurodegenerative diseases**, should have **a knock-on effect** that is liable to stimulate research and will involve an overall improvement to health, social and medical care.

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Although there is at present no known cure, existing treatments **slow down** the loss of cognitive functions and increase the chances of elderly people continuing to live in their own homes.

The possibilities opened up by research are today clearly marked out. We know that **early diagnosis methods** allow patients to be set on an appropriate course of care and treatment. By pushing back the onset of the disease by five years, it is possible to reduce the number of patients affected by 50%.

We therefore need to convince European citizens that **cooperation in research and improvements to care**, together with **a shared concern for setting out the major ethical principles to ensure quality of treatment**, will allow day-to-day solutions to be produced.

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Member States and the Commission need not only to take into account the foreseeable consequences of the increase in these diseases on the sustainable funding of health and social security systems, but also, should they wish, **to reflect together on drawing up quality criteria for support to patients and carers.**

France ought, more specifically, to invite the Commission to propose, by 2010, that a **European strategy** is drawn up to combat these diseases, set around three main axes: **research, all-encompassing care and respect for patients' rights and the ethical principles** that should govern these practices.

This issue will be on the agenda of the Council of Ministers of 16 December, as was the desire expressed **with one voice** by Presidents Barroso and Sarkozy on 1 July.

I would like to end by **praising the valuable work carried out by patient support organisations** which have made a substantial contribution to **drawing up** suitable measures for combating

Alzheimer's and related diseases, and which in my view should effectively participate in **their implementation**, at both national and European level.

Thank you.