Statement of the World Stroke Organization (WSO)

at the WHO Regional Committee for Europe, 69th session, Copenhagen, September 2019 related to agenda item 5(j), the

Roadmap to implement the 2030 Agenda for Sustainable Development, building on Health 2020, the European policy for health and well-being: lessons learned from Health 2020

Recent studies have convincingly shown that non-communicable diseases (NCDs) in general - and stroke and heart disease in particular - are gaining ground in several European countries. Stroke and heart disease share many risk factors, but the long-term personal and socioeconomic impact of stroke requires specific action and policy. Projections for the next decades tell that the number of persons in Europe who have had a stroke will increase strongly.

These three stroke and NCD-related issues need urgent attention in Europe:
- 90% of strokes and most NCDs are linked to 10 modifiable risk factors including hypertension, smoking, alcohol use, physical inactivity, and unhealthy diet. Implementation of health policies and prevention to reduce these risks is still too slow in Europe.
- Stroke care requires dedicated service on all levels of care built around “stroke units”. Stroke units deliver immediate treatments, manage early complications and apply effective secondary prevention. Access to stroke unit care is highly unequal in Europe: treatment in a stroke unit is currently offered to less than half of all stroke patients.
- The multifaceted face of stroke requires comprehensive stroke action plans. Professional and patient organisations have established these in the form of the “Action Plan for Stroke in Europe 2018–2030” (ESO and the Stroke Alliance for Europe) and the “Global Stroke Guidelines and Action Plan Roadmap for Quality Stroke Care” (WSO). These plans have the potential to increase stroke awareness, access to quality stroke treatment, primary and secondary prevention, and long-term care if supported by UN member states.

Hence, the WSO calls upon WHO Europe and the European UN member states to increase their efforts against stroke in three domains:

1) Better implement of population-wide prevention strategies for stroke and NCDs, such as detecting and treating hypertension, combating traditional and new forms of tobacco use (SDG target 3.a), reducing the harmful use of alcohol
(SDG target 3.5), and encouraging physical activity and a healthy diet;

2) Enhance services for stroke patients, including establishing and use of stroke units, essential medicines, and medical devices such as endovascular treatment and rehabilitation, all accessible through universal health coverage to reduce inequalities;

3) Use existing comprehensive stroke action plans from European and global stroke experts and patient groups to guide policy decisions on all aspects of stroke, including its prevention, detection, treatment, and long-term care.

In summary, WSO strongly support WHO Europe’s efforts to upscale actions in reducing the burden of stroke and other NCDs and ask that the specific actions highlighted in this statement should be especially considered.

Michael Brainin, MD, PhD
President, World Stroke Organization (WSO)

Bo Norrving, MD, PhD
Member Global Policy Group, WSO

Patrik Michel, MD
Member Global Policy Group, WSO

Hanne Christensen, MD, PhD, DMScI *
Fellow, WSO

* WSO/ESO representative at the WHO-EURO Regional Committee for Europe, 69th session: Prof Hanne Christensen, MD, PhD, DMScI