

Dear Colleagues

Ladies and Gentlemen,

Allow me to start by congratulating the promoters of this event, focusing on such an important issue as: "Can EU citizens afford their medicines? The economic crisis and access to medicines in Europe".

Unfortunately we know that the European population is becoming increasingly old, and poorer, needing more drugs, more clinical care and having more difficulties to pay for them. This is a problem that, a decade ago, was mainly a third world problem, a problem of the developing countries. Today it became our problem, a huge problem to Europe, a dramatic problem to our citizens, especially to the most vulnerable population, such as elderly, children, handicapped. Therefore the issue of this panel is of a major importance in the light of the current situation of crisis that Europeans, in general, are living through.

Nevertheless, today, here, I am supposed to consider the *Health sector* in the light of the current negotiations concerning Horizon 2020, the issue that was addressed to my colleague Graça Carvalho, rapporteur of the European Parliament for Horizon 2020. Following her information and suggestions and adding my thoughts, I would like to give an overview of H2020, stressing its key principles and structure, and presenting the way it can still be improved and therefore enhance its previewed positively impact on this sector.

Horizon 2020 presented by the Commission, the Parliament and the Council approved their own report and, at this stage, the trilogues are running, that is, the negotiation and conciliation process involving the Parliament, the Council, and the Commission. The trilogues are running for the six Horizon 2020 reports.

General Principles

In what concerns the general principles of the Horizon 2020, the report involves 3 key ideas:

- *Firstly*, the programme involves a trust based funding system. This entails a simpler FP with fewer instruments alongside a radical overhaul of the administration of the FP. Over the years, the framework programmes have grown in scope both in terms of their applications and the size of their budgets. The swelling number of applications for funding has been met with a parallel growth in control mechanisms in an attempt to ensure the proper use of EU funds.

The unfortunate result is that it is increasingly difficult – for the different entities that might contribute to the programmes – to find their way through a labyrinth of rules, procedures and ramifying red tape. It is for this reason that European Institutions have made efforts to replace the current system with one that places greater trust in the applicants as this entails much simpler financial and administrative rules.

- *Secondly*, one of the most important features of the new programme is that it aims couple research to innovation and hence to move from initial research to the market or

"from research to retail" in a committed manner. Significantly, this is the first framework programme to seek to supervise and fund the whole innovation cycle.

- Thirdly, the European Commission and European Parliament have proposed a substantial increase of budget for research and innovation. The European Commission has advanced a figure of €80 billion as part of the post-2013 7-year budget package. The next step will involve tough negotiations among the three main European Institutions: Parliament, Council and the Commission. While a number of European countries support a figure at the higher end of this spectrum, it is to be hoped that other governments will follow this lead especially those countries with a reputation for academic excellence.

Structure

As for the structure of the new programme, this is certainly much improved by comparison with FP7 and involves a satisfactory balance between the three pillars:

- Excellence in science
- Industrial leadership and
- Societal challenges

The third pillar covers cooperative research projects addressing seven major societal challenges. The first societal challenge is devoted to “***Health, demographic changes and well-being***”.

The activities foreseen under this topic include:

1.1. Understanding the determinants of health, improving health promotion and disease prevention (I underlined the fact that it starts by prevention)

1.2. Developing effective screening programmes and improving the assessment of disease susceptibility

1.3. Improving surveillance and preparedness

1.4. Understanding disease

1.5. Developing better preventive vaccines

1.6. Improving diagnosis

1.7. Using in-silico medicine for improving disease management and prediction

1.8. Treating disease (an investment in the former points improves the treatment of disease)

1.9. Transferring knowledge to clinical practice and scalable innovation actions

1.10. Better use of health data

1.11. Improving scientific tools and methods to support policy making and regulatory needs

1.12. Active ageing, independent and assisted living (it becomes more and more important within the current demographic situation in Europe)

1.13. Individual empowerment for self-management of health (it should refer not only to autonomy but also to responsibility)

1.14. Promoting integrated care (it becomes more efficient and less expensive)

1.15. Optimising the efficiency and effectiveness of healthcare systems and reducing inequalities through evidence based decision making and dissemination of best practice, and innovative technologies and approaches.

This is recognised as one of the most important societal challenges with, consequently, the single largest budget in this pillar. This currently amounts in the Commission proposal to a *little over €9 billion*. However, Horizon 2020 should be more than a simple funding programme. It should lead, by its very nature, to improving the planning and delivery of the solutions that we propose. In this respect, in the different reports that have so far been submitted, the European Parliament have sought to actively encourage the implementation of scientific lead coordination in the health sector. The main objectives are to:

- Improve the exchange of information and promote interaction and synergies on a larger scale,
- Foster greater economic efficiency in terms of the reduced duplication of efforts.

- And finally, ensure quick and simple processes that will foster rapid innovation in such a way that end users benefit as rapidly as possible.

Conclusions

Ladies and Gentlemen,

By way of conclusion, let me say a few words about the impact of H2020 on *the health sector*. In the first place, budgetary concerns inevitably remain of prime importance, particularly in the context of the present economic difficulties that Europe is experiencing. It is to be hoped that the fact that health concerns have been granted the largest share of the budget devoted to societal challenges will translate into continued, sustainable funding for promoting excellence in R&D with particular reference to Health.

In the second place, it is with satisfaction that I note that H2020 has been considerably strengthened by comparison with previous initiatives. In particular, it can be observed that the programme covers the whole cycle of innovation; and that

a central place has been given to scientific lead approaches. And finally, that a real effort has been made to simplify access to funding.

In this respect, simplification is particularly pertinent in a context in which it is necessary to bring together funding from a number of different budgets to deal with challenges that are often costly.

Against this background it only remains for me (and Graça Carvalho) to express my sincere hope that the crucial work carried out by the researchers in the health sector will continue in the future with even more resources, vigour and purpose.

Thank you very much