



Luxembourg Declaration

Cardiovascular disease is the biggest cause of death of men and women in the European Union. More women die of cardiovascular disease than of all cancers combined. In addition there are significant differences and inequalities in cardiovascular health within and between Member States. Some EU countries are experiencing declining rates of mortality from cardiovascular disease, but increasing numbers of men and women are living with cardiovascular disease, the majority of which is preventable.

Today, 29 June 2005, we (representatives of the Ministries of Health of the Member States of the European Union, the European Society of Cardiology, National Cardiac Societies, the European Heart Network, National Heart Foundations and the UEMS Cardiology section), participants of the Heart Health Conference) agree that:

1. We reiterate the importance of the Council Conclusions on Heart Health¹ and the necessity to put them into action
2. Necessary measures, giving priority to lifestyle oriented interventions, should be considered by each Member State to reduce the burden of cardiovascular disease. We agree to work towards the following, realising that these measures will also favourably impact other non-communicable diseases like chronic lung disease, diabetes, osteoporosis and cancer:
 - a. raising awareness among European population of those characteristics associated with cardiovascular health:
 - ◆ Avoidance of tobacco consumption (0)
 - ◆ Adequate physical activity (at least 30 minutes per day)
 - ◆ Healthy food choices
 - ◆ Avoiding overweight
 - ◆ Blood pressure (below 140/90)
 - ◆ Blood cholesterol (below 5 mmol/L)²

These characteristics can be summarised as the European Heart Health Number: 0-30-5-140-90.

- b. implementing strategies to help individual Europeans to achieve these characteristics.
 - c. acknowledging the importance of starting early in life.

¹ 2586th Council Meeting Employment, Social Policy, Health and Consumer Affairs, 1-2 June 2004

² 5 mmol/l is approx 200mg/dl



- d. using the above mentioned characteristics (tobacco, blood pressure, etc) as indicators of successful national programmes aiming for improved prevention and care
3. As of today, we have identified that the following factors are essential to ensure an efficient implementation process. These factors have been agreed upon based on past experiences that we have shared and debated today:
 - a. the need for a combined, strong and devoted partnership between health care professionals, non-governmental organisations, governments and public health authorities.
 - b. the need to involve and mobilize all stakeholders, including:
 - ◆ the World Health Organisation
 - ◆ partner medical organisations with shared objectives
 - ◆ policy makers for agriculture, transport, environment, social policy, education, etc
 - ◆ patients' organisations, organisations involved in raising awareness among the general population, relevant foundations such as the European Heart Network
 - ◆ the media
 - ◆ the relevant industries (agro-food, pharmaceuticals, etc)
 - ◆ universities
 - ◆ local authorities
 - c. further development of evidence based tools to reduce the cardiovascular risk factor burden in individuals and populations, adapted to individual countries' conditions
4. We agree that we want to see cardiovascular prevention and care improved across Europe and therefore we consider this conference as another important step to ensure a comprehensive action plan in each individual country. The contacts that were made today should facilitate the creation of national taskforces to ensure, or further develop such a plan.
5. We reiterate the need for continued European Commission, European Parliament and Council endorsed activities within the general framework of a heart healthy Europe.
6. We intend to share progress in 2006 and to work towards a European Charter on Heart Health.