

Brussels, 30 November 2006

**TAKING ON EUROPE'S
THIRD LEADING CAUSE OF DEATH:**

**Agreement to include research funding for chronic lung diseases
is hailed by the leading scientific society in respiratory medicine**

The European Respiratory Society (ERS), the leading international medical and scientific society in the field of respiratory medicine, today hailed new support for lung research. The European Parliament vote on FP7 (the Seventh Framework Programme of the European Community for Research, Technological Development and Demonstration Activities 2007-13) has secured vital funding for research into chronic lung diseases. According to Professor William MacNee, President of the ERS, this represents “an important step forward, as the FP7 will offer valuable opportunities to consolidate Europe-wide expertise using multidisciplinary approaches to tackle chronic respiratory diseases”.

“Despite the fact that chronic respiratory diseases are the third biggest killer in Europe,” Professor MacNee continued, “we were initially disappointed to see that research for this major public health issue went unrecognised in the original proposal for FP7 that was published in April 2005. But after two years of campaigning by the ERS, we are now very pleased that Europe’s governments and policy makers have appreciated the extent of the problem, especially the increasing prevalence and associated rising costs”.

Respiratory diseases place an immense socioeconomic burden on Europe, totalling some €100 billion annually in terms of medication costs, hospital admissions and lost working days. Since the burden of chronic respiratory diseases will remain and even increase in the years to come, translational research (bench to bedside) must become a pan-European priority.

Crucial translational research in this field, conducted on a pan-European basis, will benefit the millions of Europeans who suffer from the hidden yet ubiquitous chronic obstructive pulmonary disease (COPD) and asthma.

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NOTES FOR EDITORS:**Chronic respiratory diseases**

In 2005, chronic respiratory diseases alone accounted for 7% of annual deaths world-wide, ranking third among chronic noncommunicable diseases.

Chronic Obstructive Pulmonary Disease

COPD is a condition which causes gradual restriction of airflow and consequent difficulty in breathing. Because of this, shortness of breath, cough and sputum production are common symptoms. COPD is currently the fourth biggest killer in the EU and is predicted to become the third biggest killer worldwide by 2020. Approximately 200,000-300,000 people die each year in Europe because of COPD. Among respiratory diseases, COPD is the leading cause of lost work days, and it is estimated that in Europe productivity losses due to COPD amount to a total of €28.5 billion annually.

Asthma

Asthma is a common life-long chronic disease characterised by inflammation and narrowing of the airways. The narrowing does not occur all the time in mild asthma, but it happens more often as asthma gets more severe. It may also vary over short periods of time by itself or as a result of treatment. Asthma affects children and adults, and may develop at any age. It is the most common chronic disease in childhood. Worldwide, it is estimated that 180,000 people die from asthma every year. The total annual costs of asthma care in Europe amount to approximately €17.7 billion.

More information on COPD and asthma can be found at:

<http://www.european-lung-foundation.org>

The European Respiratory Society (ERS)

The ERS is a not-for-profit, international medical organisation with over 8,000 members from 100 countries and was founded in 1990. It is the largest society in Europe in its field. The main objective of the society is to promote respiratory health in Europe in order to alleviate suffering from respiratory disease. This is accomplished by promoting basic epidemiological and clinical respiratory research, collecting and disseminating scientific information, organising congresses and conferences, producing scientific publications, supporting training and continuous education in respiratory medicine and collaborating with organisations representing patients.

Other information on the work of the ERS can be found on the ERS website: www.ersnet.org