



European Thrombosis & Haemostasis Alliance Consensus Statement

Using the upcoming Framework Programme 9 to make Europe a world leader in thrombosis and haemostasis research for the benefit of patients in Europe and beyond.

The European Thrombosis and Haemostasis Alliance ([ETHA](#)) calls on the European Commission, the European Parliament and the Council of the European Union to adopt an ambitious Framework Programme 9 that emphasizes and supports funding for medical research, to advance the understanding, prevention, diagnosis and treatment of bleeding and clotting disorders. As an alliance representing 21 European Member State Thrombosis and Haemostasis scientific associations, we firmly believe that Europe can continue and even strengthen its role as a global leader in the field of science and medical R&D. It is vital that Europe continues its investment in health research by formulating a forward-looking research agenda in the Framework Programme 9 that addresses the challenges and effects of chronic disease and an ageing European population.

One in four people worldwide dies of conditions caused by blood clots, also known by the clinical term “thrombosis”. Thrombosis is the underlying cause of many cardiovascular disorders including heart attack, thromboembolic stroke and venous thromboembolism (VTE). In Europe, there are approximately 544,000 VTE-related deaths every year. VTE is estimated to cost EU health systems €1.5-2.2 billion each year in direct costs, however, when accounting for indirect costs such as disability and productive life years lost, it has been estimated that the total costs of VTE are as high as €13.2 billion each year.

As the leading cause of death and disability, the sheer scale of the problem caused by thrombosis presents a serious and multifaceted challenge. Increased research in thrombosis and haemostasis, that aims to improve our understanding of normal and abnormal blood clotting, and accelerate the development of more advanced and efficacious diagnosis, prevention and treatment can help to address the half a million deaths in Europe every year due to VTE, 60 percent of which are the result of an undiagnosed blood clot. In the Global Burden of Disease Study 2010, VTE associated with hospitalisation was the leading cause of disability-adjusted life years (DALYs) lost in low-income and middle-income countries and the second most common cause in high-income countries. It has been estimated that 55 to 60 percent of all VTE cases are a consequence of hospital admission, which makes VTE the leading cause of preventable hospital death. VTE also contributes to chronic disability and loss of working days for people who have non-fatal clots, including chronic pain and swelling in the leg from post-thrombotic syndrome, or chronic pulmonary hypertension from blood clots in the lung.

Unfortunately, public awareness of VTE is low with a recent survey finding that only about 50 percent of the general public have even heard of thrombosis. This leads to a lack of understanding and awareness of symptoms, risk factors and causes of thrombosis and thus a lack of notice by policy-makers. The World Health Assembly wants to reduce premature deaths from non-communicable diseases by 25 percent by 2025. Given that thrombosis is such a significant cause of premature death for people of all ages, races and ethnicities, in both men and women, this target will be impossible to meet unless the EU urgently addresses thrombosis.

As the risk of VTE increases with age and considering the current demographic trends in Europe, further research in thrombosis and haemostasis is vital to prepare Member States for the challenge of ageing populations; the increased demand for healthcare services; and the associated costs that come with effectively meeting this demand.



We, the undersigned national members of the ETHA call upon the EU institutions to formulate an ambitious health research agenda in the Framework Programme 9, which addresses the significant burden of thrombosis and allows for greater understanding of haemostasis. The EU has the potential to be a world leader in driving a positive change in patient safety and non-communicable disease by investing in thrombosis and haemostasis research and sharing best practices amongst member states. Against the increasing burden of chronic diseases and ageing populations, stronger EU cooperation is required, as the fight against blood clots is vital to for the health and economic progress of the EU.

Belgian Society of Thrombosis and Haemostasis
British Society of Haemostasis and Thrombosis
Czech Society of Thrombosis and Haemostasis
Danish Society of Thrombosis and Haemostasis
Danubian League against Thrombosis and Haemorrhagic Disorders
Dutch Society for Thrombosis and Haemostasis
French Group for Studies on Thrombosis and Haemostasis
French Society of Angiology
Group of Haemostasis of the Polish Society of Haematology and Transfusion Medicine
Hungarian Society of Thrombosis and Haemostasis
Institute for the Study and Education in Thrombosis and Antithrombotic Therapy (Greece)
International Society on Thrombosis and Haemostasis
Irish Centre for Vascular Biology
Italian Society for the study of Haemostasis and Thrombosis
Norwegian Society of Thrombosis and Haemostasis
Russian National Association on Thrombosis and Haemostasis
Serbian Society on Thrombosis and Haemostasis
Slovakian Society of Haemostasis and Thrombosis
Society for Thrombosis and Haemostasis Research (Austria, Germany, Switzerland)
Spanish Society of Thrombosis and Haemostasis
Swedish Society on Thrombosis and Haemostasis