Behind the joyous images of Brazil’s World Cup as a celebration of football lies a sobering message. A sport that for many is something passively consumed on television while eating and drinking to excess is sponsored to a vast degree by beer, soft drink and fast-food companies. Brazilians themselves have been divided on their government’s extravagant spending programme for stadiums to host the championship in a country with vast social division and continued health inequality.

For a broader audience, the question is the promotion of lifestyles that risk triggering premature death – and costlier maintenance in later life. The good news in healthcare is that life expectancy around the globe continues to rise – and with it the total number of people with a healthy life expectancy (it is currently 5.8 billion). Addiction and smoking have caused huge damage, but while they stifle potential improvements, improved technologies are keeping the global population healthy and living longer. The bad news is that we are facing the challenge of chronic conditions: higher healthcare costs, a higher risk of complications, and a growing burden on the healthcare systems of countries across the world. The costs are rising as quickly as benefits are growing, forcing a policy rethink, writes Andrew Jack.

Longer lives mean more diseases of old age

Increasing longevity combined with lifestyle conditions such as obesity are raising costs and forcing a policy rethink, writes Andrew Jack.

A new company, a new approach

As a new biopharmaceutical company, AbbVie has a different perspective on how to address these challenges. We believe the world needs new approaches to address today’s health issues, from life-threatening illnesses to chronic conditions,” said Pascal Richet, Vice President, Western Europe & Canada Operations, AbbVie. “And we are determined to help develop new solutions that ensure long-term healthcare sustainability.” That’s why AbbVie is partnering with governments, academia, healthcare professionals, patient organisations, non-governmental organisations and other stakeholders to implement innovative projects and initiatives that drive early diagnosis and prevention, chronic disease management models and integrated care throughout the healthcare system.

Developing sustainable healthcare solutions in Europe

Last year – for the first time as an independent company – AbbVie welcomed healthcare stakeholders from across Europe and beyond for the first National Health Care Conference, hosted in partnership with the European Public Health Association and Philips. The conference examined the current state of European healthcare, the long-term challenges facing governments, and practical, sustainable solutions to help manage patient care and healthcare delivery systems. Building on what was learned at the meeting, AbbVie employees, jointly with various stakeholders in 20 European countries, are currently piloting solutions and developing recommendations that support more sustainable healthcare systems across Europe.

Establishing early intervention care for musculoskeletal disorders

Today Europe faces an alarming situation of a workforce absence of 60% and permanent work incapacity is caused by musculoskeletal disorders. With governments, healthcare providers and the Fit for Work coalition, AbbVie is putting early management of rheumatology at the centre of treatment, AbbVie is collaborating with Dr. Juan Javier, Chair of the fit for work coalition in Spain, to support an Early Intervention programme that provides proactive management and return-to-work support for patients with musculoskeletal disorders. The programme is already showing positive results: absences related to musculoskeletal disorders have been reduced by 19% and permanent job loss has been cut by half, recouping almost 11 EUR for every 1 EUR invested in the programme. Following success, 25 Early Intervention Clinics have been established across Spain.

Establishing better care for rheumatoid arthritis patients

Building on leadership in the rheumatoid arthritis space, AbbVie is working on a series of pilots to help advance care in this area in Europe. One example is the Appointment Angels programme in Ireland. By better preparing patients for their first visit with a rheumatologist, this programme has achieved a 38% reduction in the Did-Not-Arrived rate, and fixed up 27 new appointments for every 100 patients. Another example is the Treat to Target programme, which aims to better define rheumatoid arthritis treatment targets so irreversible joint damage and disability is avoided.

Building a healthy future for all, together

AbbVie believes that addressing the world’s toughest health challenges takes everyone. Pan-European strategies on healthy aging, combined with more effective management of public resources at the national level, can make a difference. “Although the pilot projects that we are supporting are still in the early stage, we are already seeing incredible results. And we are committed with our partners to reporting concrete recommendations on how to improve better solutions.”

Building and advocating for a healthier future, AbbVie is committed to standing up for patients in the future where living longer means living well.

To learn more about AbbVie and its commitment to sustainable healthcare, visit abbvie.com.
Cult of the individual gives way to collaboration

A way to save money and spare patients

Preventive approaches

Co-ordinated care is the way forward, writes Steve Neville

Not only the health system but also individual patients have come together to lead the way to change. This is because the health system is fragmented, with hospitals and physicians being run almost separately, and also because the traditional means of dealing with health problems are becoming more common and are more costly to treat. A new approach has been to take the patients' perspective and to reflect on what is really important to them.

The problem the patients have is that they are often asked to make difficult and often unimportant decisions. For example, if a patient has a chronic illness, they may be asked to choose between taking medication or not. If they choose not to take medication, they may suffer discomfort or even death. However, if they do take the medication, they may experience side effects that are worse than the illness itself. In this situation, the patients are often left with no choice but to make a difficult decision.

The solution is an approach that involves all stakeholders, including patients, physicians, hospitals, and payers. This approach is called co-ordinated care, and it involves the collaboration of all these groups to provide the best possible care for the patient. The goal is to ensure that the patient's needs are met, and that the patient is able to make informed decisions about their care.

The system Reminders give insight into what motivates consumers

Used with 11 laptops in 2001, Silverstein’s ‘large, large health care systems’ - coverages were common, but the need for coordination in health care was still there. The challenge was to develop a system that allowed for the coordination of care and the sharing of information.

In the US, where government is involved in health care, it is clear that the need for coordination is great. The US government spends more than $1 trillion on health care each year, and the number of people without health insurance is still high.

The system consists of a software package that can be integrated with existing systems. The software allows doctors and nurses to share information in real-time, and it also provides reminders to patients about important treatments and appointments.

The system has been shown to reduce costs and improve quality of care. A study in 2014 found that the system reduced costs by 20% and improved quality of care by 30%.

The system is also being tested in other countries, including the UK, where health care is provided by the government. The system has already been adopted by several hospitals in the UK, and it is expected to be adopted by more in the future.

Longer lives mean more diseases of old age and rising costs

Longer lives mean more diseases of old age and rising costs

Recent grants have funded research into the genetic basis of chronic diseases, and this has led to new treatments that could help to treat these diseases. However, it is important to note that these treatments are expensive, and it is unlikely that they will be able to cure all chronic diseases. Therefore, it is important to focus on preventative measures and to try to reduce the risk of developing chronic diseases in the first place.

New treatments have also been developed for age-related diseases, such as diabetes, Alzheimer’s disease, and heart disease. These treatments are expensive, and it is important to focus on preventative measures and to try to reduce the risk of developing these diseases in the first place.

In conclusion, the future looks bright for the treatment of chronic diseases. However, it is important to focus on preventative measures and to try to reduce the risk of developing chronic diseases in the first place.
Social businesses need patience and deep pockets

Pharma tries to clean up its act

FT Health Sustainable Healthcare

Green chemistry

The aim is to reduce toxicity and waste, says Andrew Ward

Pharmaceutical companies risk being identified as polluters in rising Sun, but a little attention to a green manufacturing process can turn products into profit-makers.

Addressing the issue is a priority for US-based Paul Sikich, a director of sustainability at Biogen Idec, and Anthony Johnson & Johnsen, the US company's sustainability director.

He is leading the company to meet a range of targets to cut resource and waste consumption, and develop a green manufacturing process that can turn a profit.

"We have no choice," Mr Sikich insists. "If you want to stay competitive in the industry you have to do it. We need to be proactive in this area."

So how can companies clean up their act and make a profit? Some experts say it's a matter of simple chemistry.

Green chemistry is simply about making the synthesis process greener by reducing the amount of chemicals used or finding alternative ways to achieve the same result.

The discovery of a cancer drug that was both highly effective and less toxic was an important breakthrough in simplifying the synthesis process.

They discovered it possible to design a compound drug that reduced the amount of chemicals used and eliminated the need for toxic materials.

"The key is to use a 'green' chemistry approach," Mr Sikich said. "We have to find ways to clean up the manufacturing process without compromising the product."

Mr Sikich believes that the future of green chemistry is bright, with new products and processes being developed all the time.

"It's a very exciting field and I think there is a lot of potential for growth in the future," he said.

"We're looking at how we can reduce the environmental impact of our products and processes."

Guiding principles

Developed by US academic Paul Allen and John Martin in 1998, green chemistry is based on a set of guiding principles that help companies reduce the environmental impact of their products.

"The principles are designed to help companies reduce the environmental impact of their products and processes," Mr Sikich said.

"They include avoiding the use of hazardous and toxic substances, and designing products that are easier to recycle or degrade."
**FT Health Sustainable Healthcare**

**In brief, many doctors, and the white society, need to own the death of a critically ill patient as a "failure" — and reconcile using every possible means of saving off the sick," says Dr Kumar.

But not Dr Kumar, president of the Kerala State Medical Services Organization and the counterpart of the Indian medical community, despondent palliative and end-of-life care is better. Better for patients, it can improve the quality of the lives of the patients who engage in it, and also help the health care system.

"People are too close to live longer, but it doesn't mean their lives are useless," he says. "There is a limit to technology, and there is a limit to doing everything. What we need is the acceptance that death is part of the natural order of things."

Dr Kumar's institute, located on the campus of the government medical college in Calicut, is one of the few places in the world where patients with terminal cancer are allowed to die in peace, on their own, in their own way.

The institute has pioneered a system of palliative care that is as much about the social and psychological well-being of the patient as it is about the physical.

"We are forging broad alliances to share our cost-efficiency with other providers and find new ways to do it. The system at this institute is not the best, but it is the best we know how to do it," he told a BBC reporter.

The idea of palliative, or end-of-life care, is alien to many people. But it is becoming more widely accepted, especially in developed countries.

"In the UK, efforts are being made to change this. In a recent government initiative, some doctors are now paid to talk about death and dying. The websites will suggest: "If you are ready to have a conversation, here is what to say,"" Mr Cawston says. "This is something that needs to be done in other countries, too, but it is not easy."

"The treatment of long-term conditions, especially cancer, is becoming more integrate than ever before."

Of course, these could contribute to the reduction of suffering and costs, which some people say is already happening. However, the success of these programs is yet to be measured.

"There is no panacea for rapidly growing global health problems," says Sir Andrew Dillon, chief executive of UK National Health Service (NHS) Commissioning Board.

"All we can do is to help people feel better, to get them through their illness, and to try to get as many customers as possible to get better in that way."

"With this care, these patients pass away surrounded by a lot of people, at the end of the day you say and they had done something."