

Health 2.0: Lead the health revolution — or watch it happen elsewhere

Remarks by Ruud Dobber at Politico Healthcare Summit, Brussels, 19 November.

Good morning, it's great to be back at the Politico Healthcare summit.

Two years ago, I stood here and said Europe was at a crossroads. We were emerging from the pandemic and looking ahead to a new political term, with a shared drive to rebuild resilience, reimagine care, and recognise that health is not only a public good but an economic necessity.

Today, we are at another crossroads of a different kind.

We are living through one of the most exciting periods in medical science, with innovative medicines keeping people healthier and new modalities poised to transform or even cure once fatal diseases. Antibody Drug Conjugates have the potential to replace traditional chemotherapies. Cell Therapy could deliver life-changing treatments to patients suffering from immune-mediated diseases. These are just two of many examples. But, for the potential of new medicines to be realised, they must get to the patients who need them and, in Europe, falling investment in health and life sciences is threatening to undermine progress.

The time is now to redress the balance.

The global centre for medical innovation is shifting. Policy changes in the United States – from drug pricing reforms to tariffs – are challenging long-standing assumptions about where R&D is funded. And the US is incentivising investment over Europe. At the same time, Global competition is accelerating and Europe is losing its competitive power. Europe's share of Global Pharma R&D has dropped 25% in the past twenty years, while between 2010 and 2022, China's R&D growth was five times that of the EU.

And it is not just a growing imbalance of investment in innovation, but one of access. Barriers to diagnosis, fragmented systems, and outdated access models mean innovation often stops short of the people who need it most. The US has long spent at least double the share of GDP on innovative medicines compared to Europe, now it is calling on other major economies to contribute more fairly. Only 40% of new medicines reach Europe versus 85% in the US; European patients wait two years longer for new cancer medicines – a stark access gap.

Governments across Europe must recognise that health is a priority and a responsibility which we cannot afford to lose.

At the same time, we know that delivering better healthcare pays dividends to patients, health systems, societies and economies.

Across developed countries, studies show new medicines have driven over 70% of gains in life expectancy. In 2022, 1.1 million deaths in the EU could have been prevented through better access to effective interventions, including medicines.

If we treat medical innovation as an investment, not a cost, the returns are extraordinary. Every euro invested in health can deliver €2.50 in economic benefit – potentially €2.4 trillion across Europe by 2040.

And science has never been stronger: when patients receive the care that experts recommend, outcomes can be transformative. By simply following the clinical guidelines, we can prevent and reduce acute events – heart attacks, kidney failure, strokes, lung exacerbations. And this will result in fewer hospitalisations; longer, healthier lives; and less strain on our over-stretched healthcare systems. Study after study also shows that across different diseases, delivering expert-recommended care and treating diseases more effectively even reduces overall costs.

I want to recognise that there are examples of European countries working to address these challenges. Recently, Germany introduced policies which incentivised clinical trial recruitment in return for lower profit clawbacks on the medicine when ultimately approved. This enables German patients to get earlier access to innovative medicines, makes Germany a more competitive and attractive place to develop medicines, and ultimately supports greater adoption of pharmaceutical innovation. But these policies are inconsistently applied across Europe and as a European, I believe we need to change this mindset.

So why do we believe access to innovation medicines should be a political priority?

The rising burden of disease – cancer, cardiovascular, renal, metabolic, and respiratory conditions – is placing increasing pressure on health systems and economies. As populations age, this challenge will intensify: the number of people over 60 is projected to double by 2050.

Many European governments are proposing to raise the retirement age to manage state pension spending, but it is the very people who are being asked to work for longer, who are at increased risk of these diseases.

Two years ago, our task was to rebuild after the Covid crisis. Now, it is to adopt a mindset shift to address the challenges we face. With the growing burden of chronic diseases and a rapidly aging population, Europe must act now to step up funding for innovative medicines – protecting the health of its citizens, ensuring patient access, and securing economic gains.

Our great continent has the tools, the science and the knowledge. What we need now is coordinated action to ensure Europe is where the next generation of medical breakthroughs begins – and delivers – for all.