

# preventing a crisis in medical emergency research

“We expect HESCULAEP to have profound impacts, making a real difference to citizens' daily lives.”

Europe deals with 100 million medical emergencies each year, ranging from heart attacks to natural disasters. The infrastructure to respond to these events varies considerably between countries, but particular concerns about bio-terrorism and new diseases show that Europe must prepare for these threats at a transnational level. The HESCULAEP coordination action has been created to overcome the drawbacks of research fragmentation and provide the infrastructure to generate long-term co-operation in the organisation of research. Through a process of comparing and benchmarking national programmes, the partners will identify future areas for collaborative research and possible joint programmes. Greater co-operation will help to ensure that citizens get the same level of medical emergency response wherever they are in Europe.

Terrorist atrocities and the outbreak of SARS have one thing in common – medical emergency services are usually among the first on the scene, ready to make quick decisions and save lives. Fortunately, catastrophes like these are rare, but medical emergencies are not. The EU deals with 100 million cases each year, ranging from cardiac arrests (300,000) and traffic accidents (40,000) to natural disasters like floods and earthquakes.

A heart attack is the same in Iceland as it is in Italy. But although most emergencies are the same wherever they occur, the infrastructure for dealing with them differs widely between European countries. Moreover, at present there is hardly any sharing of experience. In 2002, for example, Germany experienced terrible floods, while the following year in France 15,000 died of heatstroke. It is vital that the important lessons learned from such emergencies are communicated to other countries. To date, the only concrete coordination between EU Member States has been the implementation of the standard '112' toll-free number for calling the emergency services. Lack of collaboration appears endemic. Even the systems for conducting research aimed at improving medical emergency responses vary dramatically between European countries. Much work is duplicated, and once again results are not always communicated between Member States.

## Rescuing research

The HESCULAEP coordination action has been created to overcome this fragmentation and provide the infrastructure to generate sustainable, long-term co-operation in the organisation of medical emergency research programmes. Concerns about bio-terrorism, new diseases and the international impact of natural disasters have demonstrated that Europe must conduct research into these high-risk threats at a transnational level, and develop pan-European mechanisms to prepare for them. The ERA-NET brings national programme managers together and establishes formal avenues for collaboration and information exchange. Together, the participants can improve countries' responses to medical emergencies and prepare for the new threats that affect the continent as a whole. The consortium consists of 13 members, including health ministries and agencies, emergency service operators and hospitals. International organisations with responsibility for medical emergencies, such as the WHO and the Red Cross, are also contributing their expertise to the ERA-NET and supporting programme managers in their work. The participation of a range of actors involved in the planning and execution of medical emergency services should help HESCULAEP to ensure that research programmes are relevant to all members, and that research findings can be integrated into the diverse health care and emergency infrastructures found in each Member State.



## Coordination Action

**Full title:**

Health emergency national regional programmes for an improved coordination in pre-hospital setting

**Research field:**

Pre-hospital medical emergencies

**Coordinator:**

France: Samu 92 (Assistance Publique Hôpitaux de Paris)

**Partners:**

- Czech Republic: Zdravotnická Zachranná Služba Hlavního Města Prahy – Územní Středisko Zachranné Služby
- France: ARH D'Île de France
- Iceland: Emergency Services of Landspítali University Hospital
- Italy: Regione Liguria; Azienda Ospedale San Martino and Cliniche Universitarie Convenzionate
- Slovenia: Ministry of Health of the Republic of Slovenia
- Spain: Agencia De Evaluación De Tecnologías Sanitarias De Andalucía; Empresa Pública De Emergencias Sanitarias
- Sweden: Centre of Emergency Medicine, Uppsala; County Council in Uppsala
- UK: Lancashire Ambulance Service NHS Trust
- International: World Health Organisation

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**Duration:**

4 years

**EC funding:**

€2.30 million

**Project reference:**

CA-510232-HESCULAEP

“ *The ERA-NET will make long-term co-operation possible for the first time in a research field that has been very fragmented.* ”

### Raising standards

The primary objective of HESCULAEP is to improve the overall management of medical emergencies in the EU-25 Member States by developing coherent and structured coordination of national research programmes. The participants are reviewing all their existing research in order to assess how programmes are structured, proposals evaluated and projects implemented. Through a combination of discussion workshops and short-term exchanges between programme managers, HESCULAEP will benchmark the state-of-the-art in programme management.

From this initial mapping exercise, partners will identify areas of similarity and difference between the programmes, revealing those where joint coordination will be possible and addressing the legal, ethical and administrative barriers that could hinder the mutually beneficial opening of national research programmes to other Member States. The aim is to design common programme management systems that will ensure a consistent and coherent approach to research projects by all the consortium's members.

Once HESCULAEP has established the overall picture of medical emergency research programmes across Europe it will begin to implement joint activities. Full integration and pooled funding is not the intention at this stage. Instead, the joint activities will act as feasibility studies and provide experience for participants before they formalise a coherent European management framework for future research.

Four pilot transnational research programmes are envisaged. These could cover different types of medical emergency such as mass casualties and disasters, or daily routine emergencies.

The long-term vision of HESCULAEP is to establish coordinated transnational activities and research programmes. With these in place, citizens of Europe can be confident that, no matter where they are, when lives are under threat they will receive a rapid and effective response based on solid scientific investigation.