

**Project Title:** Harmonization of Cardiovascular Diseases Management from Prevention to Heart Transplantation in the Cross-Border Area (SIPHEALTH)

**Subsidy contract from IPA:** 129440/25.06.2024,

**JEMS Project code:** RORS00008

Institute of Cardiovascular Diseases Timisoara is a lead medical institution in dealing with cardiovascular diseases in Romania. It was founded in 1993 by Romania's Health Ministry is a public health unit that provides complete cardiology medical care: clinical cardiology, interventional cardiology and cardiac catheterization, monitoring and treatment of critical cardiac patients, cardiovascular surgery, intensive care anesthesia, cardiovascular recovery and prevention, electrophysiological functional explorations cardiovascular, implant cardiac stimulators and defibrillators, non-invasive explorations and specialized outpatients, serving both the inter-county area and patients from other areas of the country and abroad; having attributions in higher medical education and sanitary environment, medical scientific research and specialized methodological guidance.

Being cataloged as an Institute, IBCVT also carries out educational and scientific - medical research, guidance and methodological coordination in its fields of activity, as well as continuing medical education, based in the Timisoara University Center.

IBCVT received the status of regional emergency hospital grade IIB, according to Romania's legislation.

The Institute of Cardiovascular Diseases Timisoara, in the exercise of its functions, collaborates with the central and local bodies of power and state administration and other organizations interested in protecting the health of the population.

Therefore, IBCVT has an important role in reduction and prevention of cardiovascular diseases which are the most frequent causes of death in Romania, raising the consciousness of population about the importance of prevention of cardiovascular diseases.

Project overall objective

Ensuring equal access to health care and fostering resilience of health systems, including primary care, and promoting the transition from institutional to family and community based care.

Improving the management, quality of life and life expectancy of patients with ischaemic and nonischaemic heart failure with impaired systolic function, including end - stage heart failure and patients with acute coronary syndromes from Timis, Podunavski and Južnobanatski areas.

Types of actions:

- digitalization in healthcare and health mobile assets
- endowment of healthcare facilities
- improving healthcare for the elderly
- equal access
- collaboration protocol
- know-how exchange visits.

The territorial analysis of the programme area revealed some common territorial challenges regarding health sector:

- aging of the population leads to the need to invest in dedicated caring facilities and into health

programmes that tackle their age-related health issues (like cardiovascular diseases);

- outdated medical infrastructure and medical equipment leads to the need to invest in the healthcare system;
- digitalisation of health services.

The main cause of mortality in the cross-border area, with a huge impact on elderly population, is cardiovascular diseases.

Cardiovascular diseases and especially coronary artery diseases are responsible for more than half of the deaths in Europe, determining over 4,35 millions of deaths/year. They represent a major cause of disability, reducing life expectancy and quality of life and involve high costs.

While mortality and incidence of cardiovascular diseases is decreasing in countries from Western Europe, in Eastern Europe these indicators are still increasing. In both countries, Romania and Serbia,

the life expectancy and mortality in patients with cardiovascular diseases is similar.

According to the statistics of World Health Organization Noncommunicable Diseases (NCD) Country Profiles 2016, mortality determined by cardiovascular diseases in Romania was about 58% (of which coronary artery disease 54.5%, stroke 45.4% and heart failure 18.8%) and in Serbia 54%. Premature cardiovascular morbidity and mortality in women is increased and still growing, according to the South-east European Health Network.

1. A common challenge health institutions from the cross border area face is to provide accurate, fast and minimum invasive diagnosis and treatment to the patients suffering from cardiovascular diseases.
2. Although health institutions from Romania and Serbia have a long experience in diagnosing and treating cardiovascular disease, the quality and quantity of their work depends directly on the equipment they use.

Most of the hospitals in the cross border area lack important medical equipment and the one they have is old, outdated and invasive.

There is also a big need for IT equipment and health-care digitalisation in general.

3. Also, there is a need for improved collaboration between health institutions and family doctors in order:

- to inform the patients about the risk of cardiovascular diseases,
- to raise awareness about their impact in people's life,
- to inform the patients about prevention activities that the patient can take in order to lower the risk of suffering from these diseases, and
- to inform the disadvantaged groups, providing them equal access to health care services.

4. Because the cross-border challenges are common but the partners' experience in tackling them is different, there is a need of collaboration between health institutions from the cross-border area in order to learn from each other and find together better and faster solutions to improve the health care services they provide to their patients and to strengthen the resilience of the health-care systems they belong to.

5. The project addresses the need for developing high quality health-care services within the crossborder area which can be accessed by a large no of people.

The Institute of Cardiovascular Diseases Timisoara serves 312,113 inhb with residence in Timisoara, 365,545 inhb. of the metropolitan area (data reported by the National Institute of Statistics – 2009

the last communication ), 655,844 inhabitants from Timis County, and a report on the West Development Region shows a population served of 1.921.700 inhabitants. In 2017, the Institute treated 7,716 patients, out of which 3,077 coming from Timis and 4,639 from other counties, mainly from the Banat area, which includes Caras Severin and Mehedinti counties. IBCVT is the most important medical institution with attributions in the field of cardiovascular diseases in the region.

The project tackles identified common challenges by:

- purchasing new equipment needed in diagnosing and treating cardiovascular disease, which will improve the quality of health care services and the life quality of patients suffering of these diseases. The equipment will consist of endowment of healthcare facilities (medical equipment) and digital equipment and health mobile assets (IT equipment and transportation vehicle)
- informing the disadvantaged groups, providing equal access to health care and promoting the transition from institutional to family base care - in order to do so, the partners will run a media campaign, will organize 20 Info days and 20 Educational Days in rural areas, will carry on screening activities and will organize 2 Workshops with family doctors in Romania and Serbia
- organizing 3 know-how exchange visits between the project partners in order to improve the institutional response to health-care problems and to strengthen the collaboration between the three partners in addressing common challenges

- concluding a Collaboration protocol between the project partners that will insure further collaboration even after the project implementation period ends. The Collaboration protocol will include joint working procedures and joint strategies for tackling cross-border medical threats. The main role of the partners in the project is to improve the preventive and curative cardiovascular health-care services across Timis, Caras Severin, Mehedinti and South Banat and Podunavski. The partnership will allow the partners to exchange their knowledge, procedures, to learn from one another and to find new approaches in diagnosing and treating their patients, which will make the cross border health systems more resilient and better equipped to tackle future common challenges. The specific objective of the project and the expected change the project will make to the current situation is ensuring equal access to health care for patients with cardiovascular diseases from Timis, Podunavski and Južnobanatski areas, fostering resilience of the area's health systems and promoting the transition from institutional to family based care in the area.

The purchased equipment will be used to improve the populations' health in the Romanian-Serbian cross-border region, the one which suffers of cardiovascular diseases, a population with similar lifestyle habits and incidence of cardiovascular pathology (heart failure, myocardial infarction, sudden cardiac death).

Also, the partners will use the purchased medical equipment in the know-how exchange meetings, in order to share with its project partners its knowledge in detecting, diagnosing and treating patients suffering of cardiovascular disease.

The project overcomes existing practice in a way of modernization of equipment, new knowledge and skills of experts working in participatory institutions and by concluding a collaboration protocol which will further enable the 3 partners to collaborate and jointly find solutions to common challenges in the cross-border area.

**Who will benefit from your project outputs?**

#### General public

Having new and performing medical equipment will improve the health care services offered to the population (out of which a large part are elderly people) and would lead to prevention, when it comes to health challenges, to a time effective care and prevention of early mortality.

The Media Campaign, the Workshops with family doctors, the Info Days and Educational Days, the screening activities will promote prevention activities, will inform the disadvantaged groups and provide equal access to health care and will inform and promote the transition from institutional to family base care.

#### Hospitals and medical centres

Having new and performing medical equipment will help the medical staff to perform their activity better.

The Collaboration protocol will enable the 3 project partners to tackle together cross-border medical threats.

The know-how exchange visits will increase the knowledge of the participating medical staff, will improve institutional response to health-care problems and will strengthen the collaboration between the 3 partners in addressing common challenges.

The partnership is formed by 3 members:

- Institute of Cardiovascular Diseases Timisoara (IBCVT), acting as Lead Partner
- General Hospital "SVETI LUKA" Smederevo (GHSLS)
- "Đorđe Joanović" Zrenjanin General Hospital