

























Uniting Patient leveraging the Patient Associations

ONCA CONFERENCE 2024

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Sergio Settanni – Marek Lichota









Sergio Settanni

Father of a 15 years old Daughter Affected by CIF and with total PN for 17 h/day 7 day/week

Member of the Association Un Filo per la Vita Onlus







Marek Lichota

Crohn's Patient, SBS-IF, HPN dependend since 2008.

Dietitian, HAN patient advocate, Founder & Chairman of the Association 'APPETITE FOR LIFE'





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About Un filo per la vita Onlus

The Association Un Filo per la Vita Onlus represents and protects at national level every people with CIF (Chronic Intestinal Failure) a rare disease that doesn't give the right intenstinal functionality. The patiens affected have to resort to the artificial nutrition or at the transplantation of bowel to survive

> The Association was to inded in 2005 by parents of children on Home Amficial Nutrition

la Vita Un Filo

to improve the quality of life of patients











APPETITE FOR LIFE ASSOCIATION...



EMPOWER, EDUCATE,
SUPPORT AND UNITE

IF & HAN PATIENTS
AND THOSE WHO
SUFFER FROM IBD.



WE STRIVE FOR IMPROVEMENT
OF STANDARDS OF IF CARE FOR THOSE
WHO CANNOT EAT OR DRINK NORMALLY
DUE TO MEDICAL REASONS













Parental Nutrition as a life saver treatment in the Intestinal Failure patients

To achieve the objective of an Optimal Nutritional Care for All it is fundamental that:

- All disease requiring Parental Nutrition to support the patient life needs to be diagnosed and recognized in due course and dealt with a proper protocol to ensure:
 - The achievement of a minimum Standard of Care for the treatment of the specific disease of each patient
 - A common approach to the support of the patient independently from the place where the patient is leaving or requiring support.

Ideally this should be available:

In each Health System of any given Region, Nation part of the European Community









Intestinal Failure as a rare Disease. Status as of today in Europe

The intestinal Failure has been inserted in the Europen list of rare disease under the Orphanet code 294422.

Despite this acknowledgment at European level, several of the Member States (including Italy) have not recognized the IF in their list of Rare diseases with same exception for some pathology which have been included or for some region or provinces.

With the above situation, patients can be properly treated and supported only based on where they live, or if they can support long travels for being followed by a centre that recognize their pathology and has a proper protocol.

So we are still far from having a standardized treatment for all.









The role of the IF Patient Associations

Because of the scattered recognition of the disease, IF parent association were initially born with the intention to:

- Support new patients affected by IF but leaving in a Country/Region/Province with poor support.
- Share best practices with the other patients to improve quality of life.
- Network with each other just for the need of being connected.
- Interface with the Health system to create proper representativeness and interest where missing.

But then the role of the Patient association evolved to support the recognition of the IF as a a rare disease in the National Health system but also trying to support it in the wider European area.









The importance to interface with different Stakeholders

For the IF patient associations is important to interface not only with Patients and their families, but to achieve the objective to have IF recognized as a chronic disease it is important to start a dialogue with:

- The Medical and Scientific society
- **The Local and national Health System**
- The Local Politic including the technical team supporting the Ministry.
- **Network with other associations to increase the representativeness and the impact** when dealing with the Authorities

Multi Stakeholder network which requires time and dedication.









Leveraging the Associations to develop and share Best practices

It is of paramount importance that Best Practice sharing done at local level is extended at Euopean level to speed up the implementation of proper protocols everywhere.

How to Identify a best practice:

- Positive Impact on the Patient, their family and care giver
- Positive Impact on the work of the Doctors
- Reduction of the overall cost of treatment thanks to a proper diagnose and timely application of the proper protocol.

Let's start to include in the return of investment calculations, the positive effect of a well and timely managed situation, the improvement of the quality of life for patients and their family, the reduction of the total cost for the society to support the patient.







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Italian Best Practices

Creation of a Manifest to support the proper information and alignment of athorities and medical community, while working to improve the support of the CIF patients

Recognition of CIF as a rare disease for all regions

Standardization of treatment for all patients

Definition of Centers of Excellence with an Hub & Spoke multidisciplinary approach

Timeliness in the diagnosis and eventual hospitalization of affected patients

Improved specific Training for Healthcare professionals

Caregivers

Greater support to

Improve the process to recognize the disability

Promote research and development



Omogeneità e appropriatezza degl standard di cura delle persone

della NPD, anche attraverso linee guida o atti

la patología e, in particolare, per medici di medicina nerale (MMG) e i pediatri di libera scelta (PLS). daliera e svolgere un'efficace "azione ponte

o stato attuale, infatti, l'integrazione fra le cure

caregiver. È inoltre auspicabile, vista la complessit ronicità dell'IICB, offrire percorsi di educazion

stività nella diagnos





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Italian Best Practices

Together with other 9 National association supporting patient affected by disease to the Gastrointestinal system requiring Enteral or Parental Nutrition a document has been discussed agreed and presented to INPS (Social Security System in Italy) to:



Support the commission that evaluate the Patient to provide the status of Rare disease with experts Doctors that are working in the Centers of Excellence even remotely to avoid un needed additional costs for further visit following an improper evaluation of the condition.







Remove the need to revise the condition of the patient in case of presence of inadequacy of organ since the pathology cannot have any significant improvement in time, saving time and money to the patient but also o the health system.















Create a workstream with the Scientific Community, the Commission and the Patient Association to uniform the evaluation of the cases and support a standardization of treatment for the patients.







International Conference Turin 6 & 7 June 2024





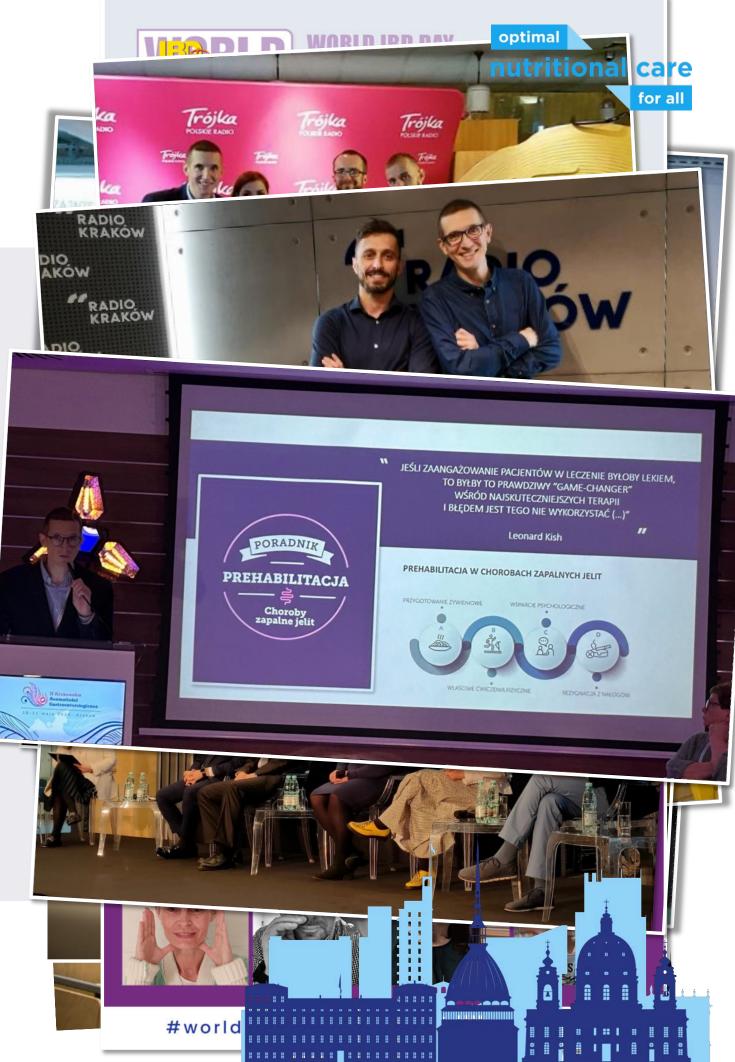


- ✓ ORGANIZATION OF EDUCATIONAL CONFERENCES AND WORKSHOPS FOR PATIENTS AND THEIR FAMILIES
- ✓ SHARING PATIENS PERSPECTIVE
 AT CONGRESSES FOR HCP & PAGs
- ✓ LAUNCHING IF, HAN & IBD CAMPAIGNS
 AND MEDIA ACTIVITY









PATIENT ADVOCACY & POLICY ENGAGEMENT









✓ PATIENT ADVOCACY AT POLISH & EU PARLIAMENT





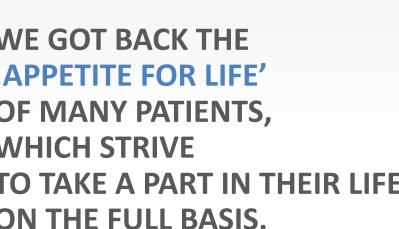


PATIENT EMPOWERMENT & SUPPORT





WE GOT BACK THE ,APPETITE FOR LIFE' OF MANY PATIENTS, **WHICH STRIVE** TO TAKE A PART IN THEIR LIFE ON THE FULL BASIS.









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SUPPORT FOR THE UKRAINIAN PATIENTS













UNITING IF PATIENTS' VOICES ARE WE READY TO ACCEPT THE CHALLENGE?





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Leveraging the network

IF Patient associations are generally locally based and mostly support by patients, or patient's parents.

The complexity of Stakeholders to be involved in the process to recognize the rare desease is such that it is of paramount importance that we could leverage the Scientific Community, the Political connection that other Association either Europen or local might have to support each other to acheive the common goal

OPTIMAL NUTRITION CARE for ALL

THANK YOU





