

Global actions on epilepsy and other neurological disorders

The Seventy-third World Health Assembly,

Having considered the consolidated report by the Director-General;¹

Recognizing that epilepsy and other neurological disorders are the leading cause of disability-adjusted life years and the second leading cause of death worldwide, and that epilepsy and other neurological disorders have a disproportionate impact on people living in low- and middle-income countries;²

Noting that neurological disorders are conditions of the central and peripheral nervous system that include epilepsy, headache disorders, neurodegenerative disorders, cerebrovascular diseases including stroke, neuroinfectious/neuroimmunological disorders, neurodevelopmental disorders and traumatic brain and spinal cord injuries;¹

Noting also, with concern, that the risk of premature death in people with epilepsy is three times higher than in the general population and that, over the past 30 years, the absolute number of deaths due to neurological disorders has increased by 39%;³

Acknowledging, as outlined in the WHO/International League Against Epilepsy/International Bureau for Epilepsy Global Epilepsy Report 2019, *Epilepsy: a public health imperative*,³ that epilepsy is one of the most common neurological disorders globally affecting an estimated 50 million people worldwide across all ages with increased rates in the young and the old;

Recognizing that epilepsy is a highly treatable condition and that over 70% of people with epilepsy could live seizure-free if they had access to appropriate anti-seizure treatment,³ the most cost-effective of which are included in the WHO Model List of Essential Medicines;

Recalling resolution WHA67.22 (2014) on access to essential medicines, in which the Health Assembly called for action to enhance access to essential medicines, and urged Member States, inter

¹ Document A73/5.

² As per the Global Burden of Disease Study (Global, regional, and national burden of neurological disorders, 1990–2016: a systematic analysis for the Global Burden of Disease Study 2016 *Lancet Neurol* 2019; 18: 459–80 Published Online 14 March 2019 doi: 10.1016/S1474-4422(18)30499-X).

³ *Epilepsy: A public health imperative*. Geneva: World Health Organization; 2019
<https://www.ilae.org/about-ilae/policy-and-advocacy/international-public-policy-activities/global-epilepsy-report-2019>.

alia, to identify key barriers to access to affordable, safe, effective, and quality-assured essential medicines;

Noting that, despite the low cost of effective interventions for epilepsy (estimated at less than US\$ 5 per person per year), the current treatment gap is over 75% in most low-income countries and 50% in the majority of middle-income countries, and that lack of access to medicines and other effective interventions, and to specialist consultations, coupled with discrimination and stigma associated with this condition, is resulting in disability, mortality, social exclusion, economic disadvantage and negative mental health outcomes in people living with epilepsy; and noting further that tackling epilepsy is widely considered to be a public health imperative, as concluded in the WHO/International League Against Epilepsy/International Bureau for Epilepsy Global Epilepsy Report 2019, *Epilepsy: a public health imperative*;¹

Recognizing that approximately 25% of epilepsy cases and a significant proportion of other neurological disorders could be prevented if broader public health actions were taken to strengthen maternal and newborn health care, ensure effective noncommunicable disease control (including promotion of cerebrovascular health and prevention of traumatic brain injuries, as well as prevention of central nervous system infections), and to develop scientific research and training of health professionals;

Acknowledging the importance of addressing the preventable causes of epilepsy and other neurological disorders, including by: promoting healthy brain development and functioning over the life course;² the control of neurocysticercosis and its association with epilepsy;³ the provision of safe environments to avoid traumatic injuries due to accidents, violence or exposure to environmental pollutants;² and access to medicines to prevent neurological infections, such as tetanus, rabies, HIV-associated neurological disorders and cerebral malaria;⁴

Recognizing that epilepsy and other neurological disorders often co-exist and can be compounded by other health conditions, that epilepsy, for example, can occur following stroke and traumatic brain injury, that neurological disorders, including epilepsy, are commonly associated with infections such as malaria and meningitis, and that among people with intellectual disabilities one in every four also lives with epilepsy; and noting that the WHO global disability action plan 2014–2021 and WHO's global action plan on the public health response to dementia 2017–2025 provide useful frameworks for taking a synergistic and complementary approach to tackling some of these co-existing conditions;

Noting with concern the significant mental health impact of neurological disorders on affected persons and their families and recalling, therefore, the importance of resolution WHA66.8 (2013), through which the World Health Assembly adopted the comprehensive mental health action plan 2013–2020;

¹ Epilepsy: A public health imperative. Geneva: World Health Organization; 2019 <https://www.ilae.org/about-ilae/policy-and-advocacy/international-public-policy-activities/global-epilepsy-report-2019>.

² See resolution WHA67.10 (2014) on the newborn health action plan; and resolution WHA57.17 (2004) on the global strategy on diet, physical activity and health.

³ See resolution WHA66.12 (2013) on neglected tropical diseases.

⁴ The Global Health Sector Strategy on HIV (2016–2021); the Global Technical Strategy for Malaria (2016–2030); and EB146(6) decision on Meningitis Prevention and Control.

Recalling United Nations General Assembly resolution 70/1 (2015) entitled “Transforming the world: the 2030 Agenda for Sustainable Development”, the outcome document of the United Nations Conference on Sustainable Development entitled “The Future We Want,”¹ and the report of the Open Working Group on Sustainable Development Goals,² established pursuant to United Nations General Assembly resolution 66/288, which includes Goal 3 (Ensure healthy lives and promote well-being for all at all ages) and Target 3.4 (by 2030 reduce by one third premature mortality from noncommunicable diseases through prevention and treatment, and promote mental health and well-being);

Recalling also that in order to promote physical and mental health and well-being, and to extend life expectancy for all, we must achieve universal health coverage;

Recalling further that we are committed to the prevention and treatment of noncommunicable diseases, including behavioural, developmental and neurological disorders, which constitute a major challenge for sustainable development;

Recalling also the Political Declaration of the third High-level Meeting of the United Nations General Assembly on the Prevention and Control of Non-communicable Diseases entitled “Time to deliver: accelerating our response to address non-communicable diseases for the health and well-being of present and future generations”, at which Heads of State and Government recognized that mental health, epilepsy and other neurological disorders are important causes of morbidity necessitating provision of equitable access to effective programmes and health-care interventions;

Reaffirming resolution WHA68.20 (2015) on the global burden of epilepsy and the need for coordinated action at the country level to address its health, social and public knowledge implications, in which the Health Assembly urged Member States to address the global burden of epilepsy and the need for coordinated action at the country level to address its health, social and public knowledge implications, and requested WHO to provide technical support for epilepsy management, especially to countries with the lowest access to services and resources where the burden of epilepsy is greatest;

Acknowledging that, given the high global disability and mortality burden associated with epilepsy and other neurological disorders, achieving universal health coverage and the Sustainable Development Goals will not be possible without concerted intersectoral efforts to address the needs of people at risk of, or living with, epilepsy or other neurological disorders;

Recognizing therefore the urgent need for an intersectoral public health approach to epilepsy and other neurological disorders that places the needs of affected people at the centre, and which emphasizes the critical role of tackling disease risk factors, primary health care, health system strengthening and sustainable access to affordable essential medicines in line with resolutions WHA62.12 (2009) on primary health care, including health system strengthening, WHA67.22 (2014) on access to essential medicines and WHA72.2 (2019) on primary health care;

Welcoming therefore, the reports contained in documents EB146/12, A71/41 Rev.2 and A73/5, which build on the achievements of WHO, the International League Against Epilepsy and the International Bureau for Epilepsy in raising awareness and advocating for action for epilepsy through

¹ The future we want. United Nations Conference on Sustainable Development (Rio de Janeiro, Brazil, 20-22 June 2012), outcome document. United Nations General Assembly resolution 66/288.

² Document A/68/970.

the “Out of the Shadows” global campaign,¹ and through the International Epilepsy Day; and further welcoming the ongoing work, in response to decision EB146(8) (2020) on epilepsy to develop technical guidance (including in respect of health system strengthening and addressing the risk factors for disease) to accelerate country actions to address epilepsy and its comorbidities;

Recognizing that, given the challenges of discrimination and stigma associated with neurological disorders and, in particular, epilepsy, innovative strategies are also needed to strengthen international efforts and national leadership to support policies and laws for persons living with epilepsy and other neurological disorders, while fully respecting their human rights;

Reiterating additionally the multidimensional nature of epilepsy and other neurological disorders and, thus, the need for effective intersectoral partnerships and action plans that involve all stakeholders, including, though not limited to, health, social care, the education and employment sectors, civil society and people living with neurological disorders and their families;

Acknowledging the critical importance of adequate public financing to address the significant and often catastrophic out-of-pocket health- and social-care expenditures experienced by people living with epilepsy and/or other neurological disorders;

Noting the need for explicit incorporation into national budgets of funding costs to support the implementation of evidence-based, intersectoral plans of actions as well as ongoing research into effective prevention, detection, treatment, care and rehabilitation, including treatment options with the potential to cure epilepsy and other neurological disorders,

1. URGES Member States² to provide the appropriate support to WHO to develop the intersectoral global action plan on epilepsy and other neurological disorders referenced in paragraph 3(1) below;
2. CALLS UPON all relevant stakeholders to provide appropriate support to WHO and partners to develop the intersectoral global action plan on epilepsy and other neurological disorders referred to in paragraph 3(1) below;
3. REQUESTS the Director-General:
 - (1) to develop, in consultation with Member States,² and in full collaboration with United Nations organizations and relevant non-State actors, a 10-year intersectoral global action plan on epilepsy and other neurological disorders in support of universal health coverage to address the current significant gaps in promotion of physical and mental health, and prevention, early detection, care, treatment and rehabilitation, as well as the social, economic, educational and inclusion needs of persons and families living with epilepsy and other neurological disorders, and the ongoing need for research to improve prevention, early detection, treatment, care and rehabilitation, including treatment options with the potential to cure epilepsy and other neurological disorders;
 - (2) to include in the intersectoral global action plan ambitious, but achievable, global targets on reducing preventable cases of, and avoidable deaths resulting from, epilepsy and other

¹ https://www.who.int/mental_health/management/en/GcaeBroEn.pdf?ua=1 (accessed 12 November 2020).

² And, where applicable, regional economic integration organizations.

neurological disorders, strengthening service coverage and access to essential medicines, improving surveillance and critical research and addressing discrimination and stigma;

(3) to submit a draft intersectoral global action plan for consideration by the Executive Board at its 150th session, together with a report on the progress achieved in implementing this resolution, with the intention of submitting the draft action plan to the Seventy-fifth World Health Assembly for endorsement.

Third plenary meeting, resumed session, 13 November 2020
A73/VR/3 (resumed)

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