



Madrid Declaration

Searching for a Coordinated
European-wide Effort in
Mental Health Research

Madrid, Spain, October 30th 2009

The scenario

Mental illness is an enormous, and ever-growing, public health threat worldwide. In Europe, mental disorders account for nearly one-fourth of all disease burden and premature death, with depression alone being the second largest component in total burden of illness. Mental health problems will affect an estimated 27% of Europeans at some point in their lives.

The social and economic costs of this are huge. A review of economic studies on mental disorders in Europe, published by the European Brain Council in June 2005, estimated the total cost of neuropsychiatric disorders in Europe in 2004 to be 386 billion euros. That burden is set to grow, mainly due to the fact that the European population is ageing, with the attendant rise in age-related dementias.

However, the lion's share of the total cost of mental disorders arises outside the health sector, because the psychosocial difficulties associated with mental disorders are not only responsible for substantial labour expenses, but can also be plausibly linked to the risk of criminal activity, motor vehicle accidents, child abuse and neglect, divorce, domestic violence, homelessness, and suicide. There is also growing evidence of gender and social inequalities in European mental illness, with marginalized sub-populations, such as recent immigrants, being more hard-hit.

On a regional scale, Europe has one of the best levels of mental-health resource allocation in the world, with a good supply of trained professionals, and policies and systems coordinated to support their interventions (WHO, 2005). Europe has invested in mental health promotion and mental disorder prevention, as well as in general health and social care. Despite this, the already high burden and impact of mental disorders throughout Europe (WHO, 2001) will continue to rise, partly because of the ageing phenomena, and partly because of unabating social and economic stressors that contribute to depression and anxiety disorders. Even though the provision of preventive and therapeutic medical care in Europe is better relative to other parts of the world, we still need to understand why there is an ever-widening gap between European mental health needs and the services to meet them.

Fortunately, policymakers in the European Union are becoming more aware of this gap, and have the institutions and mechanisms in place to tackle it. The 2005 EU Green Paper "Improving the mental health of the population: Towards a strategy on mental health for the European Union", while acknowledging that medical interventions play a central role in addressing mental ill-health (both in the acute phase and long-term), points out that the mental health system in Europe must address a wide range of factors and

determinants that help to create the enormous burden of mental disorders. This was further reiterated as the basis for the 2008 European Pact for Mental Health and Well-being.

More recently, the 2009 EU Resolution on Mental Health put mental health and well-being even further up on the European agenda, encouraging national action in "five priority areas for the promotion of the mental health and well-being of the population strengthening preventive action and self-help and providing support and adequate treatment to people with mental health problems and to their families and carers." The Resolution then went on to give recommendations to meet requirements of evidence-based and cost-effective actions in a comprehensive and integrated mental health strategy for Europe.

In order to carry out this resolution on mental health by the European Parliament, there is clearly a need for a coordinated European approach to promote and integrate research in biological, epidemiological and social aspects of mental health.

Investment in mental health research, however, is still insufficient. Neuropsychiatric disorders account for 35% of overall burden of illness in Europe, and are more costly than diabetes and cancer put together. The only way to prevent them from becoming more costly still is to intensify research efforts towards improving prevention, treatment and healthcare. Yet brain research received only 8% of the life science budget in the European Commission's Fifth Framework Programme (FP5, 1998–2002), 85 million euros, which represents less than 0.01% of the entire annual cost of neuropsychiatric disorders for that period. Brain research in general, and particularly psychiatric disorders, is clearly underfunded: although the burden and cost of neuropsychiatric diseases are twice those of cancer, they receive, per unit of cost or disability, only 50% of the total funding given to cancer research, 25% of the public funding for cancer research and 10% of the charity funding for cancer research. Clearly, mental illness is not a high enough priority for politicians, media or the general public.

But if Europe is to meet these challenges, it needs to move forward on the basis of closer cooperation between countries, greater collaboration between industry, academia and patient organisations, and increased investment in research. This would bring enormous economic returns, and might easily pay for itself by lightening the burden on healthcare systems and increasing the productivity of affected individuals. The human and social returns of such an investment are inestimable.



The International Mental Health Research Network initiative

In recent years, several national governments in the EU have taken the strategic step of funding formal, nationwide mental health research networks with the general goal of improving research capacity and quality. Typically, these networks provide an infrastructure linking health service sites and universities, making it possible to run large-scale studies. In September 2008, the UK Mental Health Research Network hosted a day-long workshop in London to explore areas for enhanced collaboration between national networks. The meeting was attended by over 40 delegates, with representation from all European networks, plus ECRIN, Canada (British Columbia) and the US (NIMH).

The meeting proved to be an excellent vehicle for presentations and discussions centred on understanding the operational characteristics of the different research networks represented, and the research topics currently being addressed. It was obvious that the collaboration between national networks already taking place—mostly involving one-off, multi-site projects—could serve as the basis for a structured and coordinated European-wide effort, one able to define the research agenda and substantially contribute to reducing the disease burden of mental disorders in Europe.

In order to advance in this direction, the CIBERSAM, with the support of Spain's Ministry of Science and Innovation, hosted the 2nd International Mental Health Research Network Meeting on 30 October of 2009 in Madrid, and invited representatives from the different existing nationally-funded mental health research networks and leaders of existing EU-funded projects in the area of mental health. The meeting was also attended by other key stakeholders, such as the European Commission (DG Research and DG SANCO), national funding agencies, and professional organisations. Representatives from the national research networks of the Netherlands, UK, Germany, France and Spain and the European Mental Health Initiative (EMHI) attended the event, as well as partners of the following ongoing EU funded projects: the EU Joint National Schizophrenia Networks for the Identification of Gene-Environment Interactions (EUGEI), Optimization of Treatment In the Management in Schizophrenia in Europe (OPTIMISE), Paediatric European Risperidone Studies (PERS), Reinforcement-related behaviour in normal brain function and psychopathology (IMAGEN), Psycho-social Aspects Relevant to Brain Disorders in Europe (PARADISE), OSPI Europe (Optimizing Suicide Prevention Programmes and their Implementation in Europe), European Network of Bipolar Research Expert Centres (ENBREC), Collaborative Research on Ageing (COURAGE) and IMI Psychiatry (NEWMEDS).



The way forward

The participants in the 2nd International Mental Health Research Network Meeting in Madrid all agreed that the best response to the European Parliament's resolution on mental health of February 2009 is to work towards the organisation of a coordinated European approach to promoting and integrating research in biological, epidemiological, social and public health aspects of mental health.

Today, it is evident that leading mental health research centres already have a high level of collaboration in Europe. This is reflected by successful applications for projects in response to the different calls from the European Commission's Seventh Framework Programme of Research (FP7, 2007-2013) and Innovative Medicines Initiative, a public-private partnership between the EU and the pharmaceutical industry. However this kind of collaboration is highly fragmented and project-specific, usually focusing on a scale of only three to five years. Lacking a stable collaborative infrastructure, the lessons learned are often lost when this period of collaboration comes to an end.

The experts who gathered in Madrid all agreed that it is in the best interest of European mental health research to articulate a formal cooperation system involving both existing EU-funded projects and national initiatives. This would enable us to optimize the resources generated by our research, such as pooling DNA banks and databases; developing joint analytical strategies, meta-analyses, and web-based clinical data-entry system across networks; establishing common standard operating procedures in translational and clinical research; and promoting cross-border translational research by linking sites that have complementary clinical and preclinical expertise.

FP7 has made brain diseases a priority, and the brain is also one of the five priorities of the Innovative Medicines Initiative. If European researchers working in mental health are going to seize these opportunities and meet the challenge of mental disorders in Europe, they need to achieve more intense ties linking industry, academia and patient organizations; increased investment in research, and closer cooperation among countries. All those involved should take advantage of the project-specific and national networks that already exist, which could serve as examples of best practice in managing a wider-ranging and more inclusive future network.



A long-term perspective is the key to this future network's success. Therefore, its objectives, research topics and funding priorities should be articulated within a stable and sustainable framework. The European mental health research community envisages a future in which this coordinated effort provides a permanent infrastructure by establishing a dynamic and adaptive cross-European network of distinctly qualified research centres. Such an approach is intrinsically collaborative and, while driven by representatives of the scientific community, should actively engage national funders and the European Commission.

The best vehicle for moving forward is the creation of a Network of Excellent Networks, which could provide cost-effective platforms for mental health research. These research platforms would not only be made available for people within the existing networks. One of the key activities of this collaborative effort would be to provide training and capacity-building for researchers and clinicians throughout the centres involved, and beyond, making an impact on the entire European mental health research community. Moreover, this Network of Excellent Networks will also focus on disseminating knowledge on mental health research in Europe.

This Network will have the following goals:

Short-term:

- Prepare a complete list of platforms and infrastructures of interest for collaborative European mental health research;
- Examine the training capabilities of existing national networks and current EU-funded projects in order to create permanent training centres for European researchers;
- Design a roadmap with the involvement of the different stakeholders which could be considered by the Commission in future FP8 calls for proposals, with the aim of providing the EC and other funding agencies with recommendations based on state-of-the-art assessments in basic and clinical sciences, with particular focus on dissemination of research outputs.

Medium-term:

- Achieve a specific budget for a truly coordinated, sustainable European effort with a permanent infrastructure; its financing could include several funding mechanisms from the Commission: a Network of Networks, Centre of Excellence proposals, Marie Curie Actions, a specific Eranet for Mental Health and Mental Disorders, or joint programming (if there is sufficient support at the country level);
- Once this research platform is fully implemented, its research will focus on translating our improved basic knowledge into scientifically-based interventions and the development of management strategies for mental disorders prevention and treatment that are cost-effective within the European context.

Long-term:

- The final aim of this initiative is to increase stakeholder involvement and ultimately improve patient outcomes.

All over Europe, some of the best mental health centres in the world, staffed with highly trained professionals, have the potential to become so much more than the sum of their parts—with the right framework for cooperation, collaborative effort, information-sharing, and pooling our synergies and strengths. If the obstacles we face in tackling the future of mental disorders are huge, so is the potential of this Network of Networks, and the attendant benefits that its success can bring to populations across the continent in improving their health and quality of life.

European Mental Health Research Networks supporting this declaration:

National Mental Health Research Networks:



CIBERSAM | Centre for Biomedical Research Network on Mental Health | Spain



MHRN | Mental Health Research Network | England



MHRN | Mental Health Research Network Cymru | Wales



SMHRN | Scotland



FondaMental | France



GROUP | Genetic Risk and Outcome of Psychosis | Netherlands
MooDs Network | Germany

European Networks:

EMHI | European Mental Health Initiative

ECRIN | European Clinical Research Infrastructures Network

PROJECTS:

PERS | Pediatric European Risperidone Studies

OPTIMISE | Optimization of Treatment In the Management in Schizophrenia in Europe



NESDA | The Netherlands Study of Depression and Anxiety



COURAGE | Collaborative Research on Ageing



EAAD | European Alliance Against Depression



OSPI | Optimizing Suicide Prevention Programmes and their Implementation in Europe



PARADISE | Psychosocial Factors Relevant to brAin DISorders in Europe



ENBREC | European Network of Bipolar Research Expert Centres



IMAGEN | Reinforcement-related behaviour in normal brain function and psychopathology



EUGEI | European Joint National Schizophrenia Networks for the Identification of Gene-Environment Interactions



RTA | Red de Trastornos Adictivos | Spain