

## Leader

# The Bone and Joint Decade 2000–2010

The goal of the Bone and Joint Decade is to improve the health related quality of life for people with musculoskeletal disorders throughout the world.

Musculoskeletal disorders are the most common causes of severe long term pain and physical disability, affecting hundreds of millions of people around the world. They affect all sectors of society. Back pain is the second leading cause of sick leave. Fractures related to osteoporosis have almost doubled in number in the past decade; it is estimated that 40% of all women over 50 years in age will suffer from an osteoporotic fracture. The severe injuries caused by traffic accidents and war produce a tremendous demand for preventive and restorative help. It is anticipated that 25% of health expenditure of developing countries will be spent on trauma related care by the year 2010. Despite improvements in prevention and treatment, crippling diseases and deformities of childhood continue to deprive many of their normal development. However, joint diseases are of especial significance in older age groups, accounting for half of all chronic conditions in persons aged 65 and over.

This morbidity is not reflected in the priority given to these problems for their effective prevention and treatment and for research to advance understanding. All musculoskeletal conditions have suffered from a lack of attention by the medical profession, the politicians and the public because they are not life threatening and many are considered to be a natural part of aging. Disabling pain is something that many suffer in silence and do not lobby for the better provision of care. The costs of these conditions are however huge in lost income and also the consumption of health and social resources. The number of aging people is expanding rapidly throughout the world. There are now effective methods of prevention and novel treatments have been developed for conditions such as rheumatoid arthritis and osteoporosis. There are therefore compelling reasons why more must be done to raise awareness of and priority for musculoskeletal conditions and this has led to initiatives developing within orthopaedics and within European rheumatology. A group of orthopaedic surgeons in Lund, Sweden considered creating a decade of priority as had been done with effect for neurosciences and the Decade of the Brain initiative. The European League Against Rheumatism (EULAR) established a working group to produce a "Declaration of Expectations for those with Musculoskeletal Conditions" similar to the St Vincent's Declaration, which has been effective in raising standards of diabetic care. These concepts came together at an inaugural Consensus Conference held in Lund, Sweden in April 1998 that was cosponsored by the World Health Organisation. It was attended by over 100 experts and representatives of national and international professional and patient organisations and editors of journals relevant to bone and joint disorders.

It was agreed that there was an urgent need for positive action and the proposal was supported that the first decade of the new millennium should be designated the Decade of the Bone and Joint 2000–2010 with the goal to improve the health related quality of life for people with musculoskeletal disorders throughout the world.

The aims and objectives of the Bone and Joint Decade were agreed upon at the end of the inaugural consensus meeting as well as an administrative structure. The Decade will raise awareness of the suffering and cost to society associated with musculoskeletal disorders such as joint diseases, osteoporosis, spinal disorders, severe trauma to the extremities and crippling diseases and deformities in children; of means to reduce this presently available and the need to advance this through research. An international steering group was elected that is broad based and includes various specialties relevant to bone and joint disorders and includes patient groups.

The Decade is a global campaign, not a new organisation. It is an umbrella providing opportunities and setting a framework for collaboration. No one single organisation alone can accomplish the desired benefits for the patient. The Bone and Joint Decade is a multi-disciplinary initiative involving everyone concerned with care including communities, patients, health care providers and researchers. There are now over 650 national and international organisations that represent such groups who have joined this campaign. It continues to grow as the aim is to include all such relevant organisations in all parts of the globe.

### Goals of the decade

The goals of the Decade will be achieved by raising awareness of the growing burden of musculoskeletal disorders on society; by empowering patients to participate in their own care; by promoting cost effective prevention and treatment; and by advancing understanding of musculoskeletal disorders through research to improve prevention and treatment.

The campaign will promote initiatives in all parts of the world, with particular support for activities in developing countries. This will be in partnership with appropriate national and regional patient, professional and scientific organisations; research bodies; scientific journals; health care providers; governments and non-governmental organisations. This will enable the goals of the campaign to be achieved at both a national and regional level.

The campaign is working with the supporting organisations both directly and by encouraging them to form umbrella groups at a national level, with all the relevant professional and patient groups working together in countries throughout the world towards the aims of the Decade. Such a national action network has existed in the UK for over 25 years as the British League Against Rheumatism. There are now almost 40 national action networks in all parts of the world, which give the opportunity for collaboration and the strength of representing the wide spectrum of patients and professionals related to musculoskeletal disorders. The details of the networks are on the web site ([www.bonejointdecade.org](http://www.bonejointdecade.org)) and membership is open to all relevant national organisations by contacting the national coordinator. It is important that all relevant medical professions are included, principally rheumatology, orthopaedics and rehabilitation. A recent meeting in Zurich of representatives from these networks from all continents showed their potential strength at promoting the aims of the Decade.

### Action programme

This initiative began with the inaugural consensus meeting in Lund, Sweden in April 1998 and was launched in Geneva in January 2000.

An initial target for the Bone and Joint Decade is to be officially supported by governments throughout the world and also by the United Nations. This is the first step of raising awareness and gaining priority. There has been much lobbying throughout the world and there is now endorsement of the Decade initiative in over 15 countries. Most importantly, as a result of direct approaches, Secretary General Kofi Annan, on behalf of the United Nations, has welcomed and supports this collaborative initiative. There is now active support by and collaboration with the World Health Organisation.

Initiatives will be promoted related to all musculoskeletal health in any geographical location. At the inaugural consensus meeting the enormity of the burden of musculoskeletal conditions was reviewed and it was considered that the important clinical areas globally are joint diseases, back pain and spinal disorders, osteoporosis and major limb trauma. What can be achieved was reviewed and the needs for research were highlighted. A series of consensus documents were prepared<sup>1</sup> that provide valuable outlines for the four clinical fields that had been selected, and give an indication of the potential for advance in other musculoskeletal conditions. The common features in all four conditions is the enormity of the problem, its likely future growth and the increasing availability of effective means of prevention and treatment. The lack of, but urgent need for priority of action is another consistent message that came from the meeting.

A problem is that the true burden of these painful, usually progressive, chronic conditions is not well documented and at present underestimated.<sup>2</sup> The identification of the global burden of musculoskeletal conditions now and in the future is a central activity of the Decade. This is in collaboration with the World Health Organisation, the Global Burden of Disease 2000 Project and with a global network of collaborators with expertise in the different conditions and in different geographical and socioeconomic settings. It is being done by review and collation of existing data, and the establishment of agreed outcome measures that can then be used in populations to collect data to compare and monitor outcomes. This was the subject of a scientific meeting in Geneva in January 2000 organised by the World Health Organisation in collaboration with the Bone and Joint Decade. It was opened by the Director General of the WHO, Dr Gro Harlem Brundtland, who recognised the importance of musculoskeletal conditions and the need for action now to reduce the burden. We need therefore, in addition, to establish what can be done, the present provision of care, the ideal provision of care, the costs and the priorities. This health care needs assessment, the Bone and Joint Monitor Project, will be done by expert review of evi-

dence and consensus. These activities will be done both at an international level, at a national level through local action networks and in collaboration with international and national organisations with a mutual interest. This project is actively supported by EULAR through several of its Standing Committees. This health care needs assessment will enable the development of strategies to improve the health related quality of life for people with musculoskeletal conditions relevant to their geographical and socioeconomic settings.

Strategies are not effective without implementation, and raising awareness and knowledge of all health care professionals of what can be achieved and how is essential if we wish to improve the outcome for the individual. At present undergraduate education of musculoskeletal conditions is inadequate and an initial target of the Decade is that the curriculum and time allowed should reflect the burden musculoskeletal conditions.

### Conclusion

The Bone and Joint Decade 2000–2010 aims to improve the health related quality of life for people with musculoskeletal disorders by working in partnership with all stakeholders to raise awareness, identify needs, empower patients, promote cost effective prevention and treatment and advance understanding through research to improve prevention and treatment.

The Decade will provide many opportunities for increased collaboration to the benefit of those with or working with musculoskeletal conditions. If successful, it will improve attitudes and raise the priority for the effective prevention and treatment of musculoskeletal conditions, and increase investment in research commensurate with the enormity of the burden they cause. Rheumatology has a central part to play in this and much to gain. All rheumatologists and their national organisations should work actively through the national action networks with their colleagues in related disciplines to take these opportunities that the Decade will give them.

### Addendum

A document of support for the Bone and Joint Decade 2000–2010 has been received from Kofi Annan, the Secretary General of the United Nations. (This can be downloaded from the web site [www.bonejointdecade.org](http://www.bonejointdecade.org))

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1 The consensus document. The Bone and Joint Decade 2000–2010. Inaugural Meeting 17 and 18 April 1998, Lund, Sweden. *Acta Orthop Scand* 1998;69 (suppl 281):67–86.

2 Murray JL, Lopez AD, eds. *The global burden of disease: a comprehensive assessment of mortality and disability from diseases, injuries and risk factor in 1990 and projected to 2020*. Geneva: WHO, 1996.