



The Bone and Joint Decade 2000-2010

INFOLETTER 44

December 2005

Dear Bone and Joint Decade supporting organisation and friend,

On behalf of the BJD Steering Committee I am pleased to report to you of the latest achievements in regard to the initiative.

Lars Lidgren, Chairman of the Steering Committee

Dear Bone and Joint Decade friends around the world

As 2005 draws to a close, we are entering a new stage in our fight to reverse the massive impact of musculoskeletal conditions, and to improve the health-related quality of life of the millions of people affected worldwide.

Now halfway through the Bone and Joint Decade, a solid foundation has been set as **musculoskeletal science**, a term virtually unheard of 5 years ago, now gains prominence. Musculoskeletal science and conditions are appearing on national research agendas and in several healthcare initiatives, and as a result more resources are being channelled into the musculoskeletal field.

It was evident during our recent World Network Conference in Canada, which brought together nearly 200 patient advocates and musculoskeletal professionals from 45 countries, that across the globe the impact of our work is beginning to be felt.

I would like to highlight just a few initiatives this year, which have been driven by your continued efforts and cooperative work, and for which you deserve my congratulations:

In the United States, the Surgeon General has issued an official Report on Osteoporosis

In Europe, the European Parliament has recently signed a declaration recognising the burden of musculoskeletal disorders, and has pledged to include it as a major disease area on the research agenda in the EU's 7th Research Framework Programme.

This follows on from the publishing of an important BJD-led report -- European Action Towards

Better Musculoskeletal Health – which is the result of a very productive collaboration between several European and International musculoskeletal groups.

This year we have also seen countries such as France and Australia implementing separate national research committees for musculoskeletal disorders.

Several other countries such as Germany and Canada have succeeded in obtaining government-funded reviews on the burden of musculoskeletal disorders.

Current progress in our Undergraduate Medical Curriculum project is also noteworthy – in Sweden a national group has been formed representing all medical schools in the country and is working towards national acceptance of the curriculum. In Croatia, the Zagreb School of Medicine has already revised its curriculum according to the Bone and Joint Decade recommendations.

This year for the first time ever, in addition to our World Network Conference, with the help of our industry partners we were able to support a unique gathering of 50 patient representatives representing different countries worldwide in a BJD Patient Education conference preceding the Network Conference in Ottawa, Canada. This meeting highlighted the importance of the union between patients and professionals to the success of the Decade's mission.

Perhaps one of the more visible accomplishments of 2005 is the launching of our new BJD-driven open communications platform www.bjdonline.org which serves as a satellite website bringing together several prominent musculoskeletal societies in a common internet sphere.

In short, in the first half of the Bone and Joint Decade we have laid solid foundations: the challenge for the second half of the Decade is to build on them.

The emphasis for the next 5 years will be on collaboration between all of the widespread musculoskeletal organisations – both patient and professional – because our strength is in our cooperation. We now have 60 well-established National Action Networks, the support of 60 governments, and the backing of more than 750 organisations worldwide. Together we are making a difference.

A key theme at our recent conference was Global Minimum Standards of Musculoskeletal Health. As a start, we began formulating Standards of Care for two crucial areas in musculoskeletal care: the first is Chronic Pain, focusing on evidence-based recommendations to improve treatment effectiveness. And the second is Osteoporosis, specifically, determining risk factors for fracture, strategies for prevention, and the appropriate care pathways.

In the coming year, these important documents will be completed and then put forth for global adoption at our next network meeting in South Africa.

Musculoskeletal conditions are the most costly of all disease categories – they effect a quarter of all adults and account for one fourth of the total cost of illness. We are determined to reduce the blow this trend has on us all, collectively and individually. The Bone and Joint Decade Minimum Standards of Care will serve to influence governments to direct the appropriate resources and to implement the necessary systems to make these changes.

We can take pride in the fact that we have managed to get the ball rolling, and it can only pick up pace from here. I am confident that in the second half of the Decade our collaborative efforts will continue to raise the standards in musculoskeletal science, education, and health care on a global, regional and local level.

Once again, congratulations to all of you who make up the BJD global network for your successes in 2005 and I wish you a happy and healthy New Year.