Whereas rheumatic and musculoskeletal diseases affect more than one in four Europeans (~120m) of all ages and are the single greatest cause of physical disability, comprising the single greatest socioeconomic cost due to long term work absence and the payment of disability benefits

Whereas people with rheumatic and musculoskeletal diseases frequently have severe limitations to their independence as individuals and face discriminatory policies and attitudes that limit their full participation in society

THEREFORE WE AS REPRESENTATIVES OF THE MSKD COMMUNITY, PEOPLE WITH ARTHRITIS, PHYSICIANS AND OTHER HEALTH PROFESSIONALS IN EUROPE, SUGGEST THAT

1. The European Union and its Member States should recognise the socioeconomic importance of rheumatic and musculoskeletal diseases of all ages and assign them appropriate priority

2. There is an urgent need to prioritise basic, and clinical research regarding the causes, predictors, management and impact of these chronic diseases

3. The European Union and Member States should ensure that people with disabilities related to rheumatic and musculoskeletal diseases have the right to full inclusion in society; this encompasses optimisation of environmental and life-style factors, the availability of self-management tools and respect for the right to a flexible education and work environment

4. People with rheumatic and musculoskeletal diseases should receive prompt access to high quality care, ideally in specialised centres, thus maximising long-term quality of life

5. Management of rheumatic and musculoskeletal diseases should be in accordance with evidence-based recommendations in every European Union Member State

6. People with rheumatic and musculoskeletal diseases are experts in living with their condition and should be involved in the design, delivery and evaluation of their services

AND THEREFORE ASK THE EUROPEAN COUNCIL, COMMISSION AND MEMBER STATES TO ENSURE THAT THESE RECOMMENDATIONS ARE IMPLEMENTED BY A EUROPEAN STRATEGY AND NATIONAL ACTION PLANS