

Tackling the overlooked epidemic of heart failure in Germany

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In April 2023, key stakeholders committed to taking joint action to petition both the Federal Ministry of Health and the Bavarian State Ministry of Health and Care for policy change and greater investment in heart failure care.

This occurred at the second annual [German Heart Failure Roundtable](#), a much-needed initiative arranged by the patient organisation [Herzschwäche Deutschland](#). The attendees – who included representatives from patient groups, the German Society of Cardiology, the German Heart Foundation and health insurance providers, as well as local and regional politicians – agreed that political prioritisation of heart failure care and investment in the syndrome are currently lacking, resulting in missed opportunities for prevention and comprehensive care.

Heart failure is [more prevalent](#) in Germany than in other European countries, and it is the leading cause of [unplanned hospital admissions](#). The condition comes at a huge cost to Germany's economy, despite estimates suggesting that [almost two thirds of hospitalisations](#) from heart failure in the country are preventable.

A lack of political prioritisation and investment is stifling Germany's progress in heart failure care

After discussing the various issues affecting progress, participants identified the lack of political prioritisation and investment as the most significant obstacle. There is a need for greater awareness of heart failure among the public and policymakers, as well as centrally led initiatives and funding. For example, although Germany has a national plan for cancer, there is no equivalent for cardiovascular disease. Likewise, the funding for research in cardiovascular disease is much lower than in other disease areas. It does not help that significant delays to the planned national disease management programme (DMP) for heart failure mean that it has not yet been rolled out, leaving people without access to comprehensive care.

Telemedicine should complement, not replace, investment in a specialised heart failure workforce

The potential of telemedicine to enhance care in heart failure was a key focus of the discussion, given the recent decision to fully reimburse this service. Some of the participants had run their own projects piloting the integration of telemedicine in their community, with mixed results. This inconsistency highlights the importance of targeted investment in research and evaluation to determine how to use telemedicine effectively so that it can improve patient outcomes and quality of life.

There was a perception among the participants that the German government is prioritising investment in technologies over investment in the workforce. It is important to note that telemedicine should support heart failure nurses in their work rather than serving as a tool to substitute their practice. According to one participant, Germany currently has approximately 400 trained heart failure nurses, but estimates suggest that [more than 3,000](#) might be required to fully support the population.

The mental health of people with heart failure is not receiving enough attention

Another important, and largely under-recognised, topic is the link between heart failure and mental health. People with heart failure are up to [five times more likely to have depression](#) than other people. The combination of these conditions results in lower life expectancy, reduced quality of life and high costs to health systems.

A cardiac psychologist at the round table pointed out that depression and heart failure cause some of the same symptoms, such as fatigue, and may be interrelated. He added that the diagnosis of depression in people with heart failure is rare in Germany, with treatment even less common, highlighting this as a key area for policymakers to improve on.

He also queried why specialist heart failure centres are not required to have psychologists, given the relationship between heart failure and mental health. In the field of cancer, for example, it is a requirement for specialist centres to have these professionals appointed. A likely reason is that the scarcity of studies and evidence on the interrelationship of mental health and heart failure makes it hard to determine best practice in this area.

Improving heart failure care and research in Germany is reliant on political commitment and action

The German Heart Failure Roundtable highlighted the urgent need for changes in policy and more funding for heart failure care to prevent unnecessary hospitalisations and ensure that people can live well with this syndrome. Priority actions should include the roll-out of the DMP and investment in a dedicated workforce – including specialist nurses and medical assistants (Medizinische Fachangestellte, MFA) – ready to cater to the growing number of people living with heart failure. The government must also provide funding for research on how best to integrate telemedicine into heart failure care and how to better identify and address mental health conditions as part of this care.