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## Global Actions on epilepsy and other neurological disorders

### Draft resolution proposed by Belarus, Bhutan, China, Colombia, Eswatini, the European Union and its Member States, Guyana, Iceland, Jamaica, Philippines, Russian Federation

The Seventy-third World Health Assembly,

**(PP1) Recognizing** that epilepsy and other neurological disorders are the leading cause of disability-adjusted life years and the second leading cause of death worldwide, and that epilepsy and other neurological disorders disproportionately impact people living in low- and middle-income countries;<sup>1</sup>

**(PP2) Noting that** neurological disorders are conditions of the central and peripheral nervous system that include epilepsy, headache disorders, neurodegenerative disorders, cerebrovascular diseases including stroke, neuroinfectious/neuroimmunological disorders, neurodevelopmental disorders and traumatic brain and spinal cord injuries;<sup>2</sup>

**(PP3) Noting with concern** that the risk of premature death in people with epilepsy is three times higher than in the general population and that, over the past 30 years, the absolute number of deaths due to neurological disorders has increased by 39%;<sup>3</sup>

**(PP4) Acknowledging**, as outlined in the WHO/ International League Against Epilepsy/International Bureau for Epilepsy Global Report on Epilepsy (2019), that epilepsy is one of the most common neurological disorders globally affecting an estimated 50 million people worldwide across all ages with increased rates in the young and the old;<sup>3</sup>

**(PP5) Recognizing** that epilepsy is a highly treatable condition and that over 70% of people with epilepsy could live seizure free if they had access to appropriate anti-seizure treatment,<sup>3</sup> the most cost-effective of which are included in the WHO Model List of Essential Medicines;

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<sup>1</sup> As per the Global Burden of Disease Study (citation: Global, regional, and national burden of neurological disorders, 1990–2016: a systematic analysis for the Global Burden of Disease Study 2016 *Lancet Neurol* 2019; 18: 459–80 Published Online March 14, 2019 doi: 10.1016/S1474-4422(18)30499-X.

<sup>2</sup> Consolidated Report by the Director General A73/5, para 29 from 12 May 2020.

<sup>3</sup> Epilepsy: A public health imperative. Geneva: World Health Organization; 2019  
<https://www.ilae.org/about-ilae/policy-and-advocacy/international-public-policy-activities/global-epilepsy-report-2019>.

**(PP6). Recalling** resolution WHA67.22 on Access to Essential Medicines, which calls for action to enhance access to essential medicines and urges Member States to identify key barriers to access to affordable, safe, effective, and quality-assured essential medicines;

**(PP7) Noting** that, despite the low cost of effective interventions for epilepsy (estimated at less than US\$ 5/per person/year), the current treatment gap is over 75% in most low-income countries and 50% in the majority of middle-income countries, and that lack of access to medicines, and other effective interventions and to specialist consultations coupled with discrimination and stigma associated with this condition, is resulting in disability, mortality, social exclusion, economic disadvantage and negative mental health outcomes in people living with epilepsy, and noting further that addressing epilepsy is widely considered to be a public health imperative, as concluded in the WHO/ILAE/IBE Global Report on Epilepsy;<sup>1</sup>

**(PP8) Recognizing** that approximately 25% of epilepsy cases and a significant proportion of other neurological disorders could be prevented if broader public health actions were taken to strengthen maternal and newborn healthcare, ensure effective noncommunicable disease control including promotion of cerebrovascular health and prevention of traumatic brain injuries, as well as prevention of central nervous system infections, and to develop scientific research and training of health professionals;

**(PP9) Acknowledging** the importance of addressing the preventable causes of epilepsy and other neurological disorders including by promoting healthy brain development and functioning over the life course;<sup>2</sup> the control of neurocysticercosis and its association with epilepsy<sup>3</sup>; the provision of safe environments to avoid traumatic injuries due to accidents, violence or exposure to environmental pollutants<sup>4</sup> and access to medicines to prevent neurological infections, such as tetanus, rabies, HIV-associated neurological disorders and cerebral malaria;<sup>5</sup>

**(PP10) Recognizing** that epilepsy and other neurological disorders often co-exist and can be compounded by other health conditions, and that epilepsy, for example, can occur secondary to stroke and traumatic brain injury, as well as neurological disorders, including epilepsy, are commonly associated with infections such as malaria and meningitis and one-fourth of people with intellectual disabilities also live with epilepsy, and noting further that the WHO Global Disability Action Plan (2014–2021) and the WHO Global Action Plan on the Public Health Response to Dementia (2017–2025) provide useful frameworks for taking a synergistic and complementary approach to addressing some of these co-existing conditions;

**(PP11) Noting with concern the significant mental health impact of neurological disorders on affected persons and their families and recalling** therefore, the importance of resolution WHA66.8 through which the World Health Assembly adopted the 2013–2020 Comprehensive Mental Health Action Plan;

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<sup>1</sup> Epilepsy: A public health imperative. Geneva: World Health Organization; 2019 <https://www.ilae.org/about-ilae/policy-and-advocacy/international-public-policy-activities/global-epilepsy-report-2019>.

<sup>2</sup> WHA67.10 resolution on the Development and Implementation of a Newborn Health Action Plan; WHA57.17 resolution on diet, physical activity and health and their impact on cerebrovascular health.

<sup>3</sup> WHA66.12 resolution on Neglected Tropical Diseases.

<sup>4</sup> WHA67.10 resolution on the Development and Implementation of a Newborn Health Action Plan; WHA57.17 resolution on diet, physical activity and health and their impact on cerebrovascular health.

<sup>5</sup> The Global Health Sector Strategy on HIV (2016–2021); the Global Technical Strategy for Malaria (2016–2030); and EB146(6) decision on Meningitis Prevention and Control.

**(PP12) Recalling** resolution A/RES/70/1 entitled Transforming the world: the 2030 Agenda for Sustainable Development, the outcome document of the United Nations Conference on Sustainable Development entitled “The Future We Want” and the report of the Open Working Group on Sustainable Development Goals, established pursuant to United Nations General Assembly resolution 66/288, which includes Goal 3: ensure healthy lives and promote well-being for all at all ages and Target 3.4: by 2030 reduce by one-third premature mortality from non-communicable diseases through prevention and treatment, and promote mental health and well-being;

**(PP13) Recalling** also that in order to promote physical and mental health and well-being, and to extend life expectancy for all, we must achieve universal health coverage;

**(PP14) Recalling** further that we are committed to the prevention and treatment of non-communicable diseases, including behavioural, developmental and neurological disorders, which constitute a major challenge for sustainable development;

**(PP15) Recalling** also the Political Declaration of the High-level Meeting of the United Nations General Assembly on the Prevention and Control of Non-communicable Diseases at which Heads of State and Government recognized that mental health, epilepsy and other neurological disorders are important causes of morbidity necessitating provision of equitable access to effective programmes and health-care interventions;

**(PP16) Reaffirming** the WHA68.20 resolution which urged Member States to address the global burden of epilepsy and the need for coordinated action at the country level to address its health, social and public knowledge implications, and requested WHO to provide technical support for epilepsy management, especially to countries with the lowest access to services and resources where the burden of epilepsy is greatest;

**(PP17) Acknowledging** that, given the high global disability and mortality burden associated with epilepsy and other neurological disorders, achieving Universal Health Coverage and the Sustainable Development Goals will not be possible without concerted intersectoral efforts to address the needs of people at risk of or living with epilepsy or other neurological disorders;

**(PP18) Recognising** therefore the urgency for an intersectoral public health approach to epilepsy and other neurological disorders that places the needs of affected people at the centre and which emphasises the critical role of tackling disease risk factors, primary health care, health system strengthening and sustainable access to affordable essential medicines in line with resolutions WHA62.12, WHA67.22 and WHA72.2;

**(PP19) Welcoming** therefore, reports EB 146/12, A71/41 and A73/5 which build on the achievements of WHO/ILAE/IBE in raising awareness and action for epilepsy through the ‘Out of the Shadows’ global campaign<sup>1</sup> and through the International Epilepsy Day and **further welcoming** the ongoing work, in response to decision EB146(8) to develop technical guidance (including health system strengthening and addressing the risk factors for disease) on accelerating country actions to address epilepsy and its synergies;

**(PP20) Recognising** further that, given the challenges of discrimination and stigma associated with neurological disorders and, in particular, epilepsy, innovative strategies are also needed to

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<sup>1</sup> [https://www.who.int/mental\\_health/management/en/GcaeBroEn.pdf?ua=1](https://www.who.int/mental_health/management/en/GcaeBroEn.pdf?ua=1).

strengthen international efforts and national leadership to support policies and laws for persons living with epilepsy and other neurological disorders while fully respecting their human rights;

**(PP21) Reiterating** additionally the multidimensional nature of epilepsy and other neurological disorders and, thus, the need for effective intersectoral partnerships and action plans that involve all stakeholders, including, though not limited to, health, social care, education and employment sectors, civil society and people living with neurological disorders and their families;

**(PP22) Acknowledging** the criticality of adequate public financing to address the significant and often catastrophic out of pocket health and social care expenditures experienced by people living with epilepsy and/or other neurological disorders;

**(PP23) Noting** the need for explicit incorporation into national budgets to support the implementation of evidence-based, intersectoral plans of actions as well as ongoing research into effective prevention, detection, treatment, care and rehabilitation, including treatment options with the potential to cure epilepsy and other neurological disorders,

**(OP1) URGES Member States:<sup>1</sup>**

**(OP 1.1) To provide** the appropriate support to WHO to develop the Intersectoral Global Action Plan on Epilepsy and Other Neurological Disorders referenced in paragraph 3.1;

**(OP2) CALLS UPON all relevant stakeholders:**

**(OP2.1) To provide appropriate support** to WHO and partners to develop the Intersectoral Global Action Plan on Epilepsy and Other Neurological Disorders referenced in paragraph 3.1;

**(OP3) REQUESTS the Director-General:**

**(OP3.1) To develop**, in consultation with Member States<sup>1</sup>, and in full collaboration with United Nations organizations and relevant non-State actors, a 10-year Intersectoral Global Action Plan on Epilepsy and Other Neurological Disorders in support of universal health coverage to address the current significant gaps in promotion of physical and mental health, and prevention, early detection, care, treatment and rehabilitation, as well as social, economic, educational and inclusion needs of persons and families living with epilepsy and other neurological disorders, and the ongoing need for research to improve prevention, early detection, treatment, care and rehabilitation, including treatment options with the potential to cure epilepsy and other neurological disorders;

**(OP3.2) To include** in the Intersectoral Global Action Plan ambitious, but achievable, global targets on reducing preventable cases of, and avoidable deaths, resulting from epilepsy and other neurological disorders, strengthening service coverage and access to essential medicines, improving surveillance and critical research and addressing discrimination and stigma;

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<sup>1</sup> And, where applicable, regional economic integration organizations.

**(OP3.3) To submit** to the 150th Executive Board, a draft Intersectoral Global Action Plan for consideration by Member States, as well as to report on the progress achieved in implementing this resolution, with an intention to submit the plan to Member States for endorsement during the Seventy-fifth World Health Assembly.

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