European Union
Statement

WHO
143rd Executive Board
(28 May – 29 May 2018)

Item 5.2 – International classification of diseases

Geneva, 28 May 2018

- CHECK AGAINST DELIVERY –
Ms Chair, dear colleagues,

I am speaking on behalf of the European Union and its Member States.

The Candidate Countries Montenegro*, Serbia* and Albania*, the country of the Stabilisation and Association Process and potential candidate Bosnia and Herzegovina and Georgia align themselves with this statement.

We thank the Secretariat for bringing this issue of utmost importance for information to the EB. We also thank the Secretariat for the extra information in the White Paper. We would like to share the following.

We welcome the eleventh revision (ICD-11), as it is an ambitious effort to provide a comprehensive controlled vocabulary and detailed list of existing health conditions and basic linearization for mortality and morbidity statistics.

We are particularly pleased that ICD-11 is to be published and used primarily electronically. This will help in its integration to national eHealth solutions. In terms of morbidity statistics ICD-11 will be a step forward.

However, we would like to stress several points for attention of the Secretariat.

Firstly, ICD-10 has been in use for a long period of time and for some countries it is highly integrated in numerous information systems, mentioned in legislation. Thus alterations of classifications may imply comprehensive work to modify the systems for primary reporting

* Montenegro, Serbia and Albania continue to be part of the Stabilisation and Association Process.
of clinical data. Specific methodologies and country specific case mix secondary classification will have to be redesigned.

Secondly, we would like to point out that time between the launch of the implementation version and next year’s Assembly is short. It may not be enough to receive and analyze the experience of those Member States which are able to start using the implementation version that will be released in June 2018. We are particularly interested in the application of ICD-11 to mortality data. By EB144 in January 2019 we need a sound analysis of the initial experiences. Therefore we suggest to the Secretariat to organize an interactive briefing on this issue for Member States before the end of this year.

Thirdly, all required tools and supporting materials may not be ready for use (e.g. training, mapping, mortality reporting controls). After their completion, there will be time needed to translate and implement them in different countries. Moreover, translation of ICD-11 is currently in preparation only for selected languages. It will again take time and capacity to prepare translation in other remaining languages.

Finally, implementing a new version of the ICD is time consuming and costly affair for Member States. Thus the decisions that will be taken by the 144th EB on the timelines will be very important to all Member States.

Thank you for your attention.