



Editorial

 Climate change: SEPAR's responsibilities[☆]

Cambio climático: la responsabilidad de SEPAR



Climate change is not a matter of opinion. The amount of evidence available on the anthropogenic effect on global warming is so overwhelming that denying it is simply absurd.¹

A great number of diseases are associated with global warming, ranging from infectious diseases caused by vector spread and outbreaks of gastrointestinal diseases caused by floods to psychiatric diseases and mortality caused by extreme temperatures in cities. The World Health Organization estimates that by 2030 annual mortality attributable to climate change will account for around 250,000 deaths,² and there is a broad consensus that action against climate change is probably the greatest health opportunity of the 21st century.³ The European Respiratory Society has produced 2 position statements calling for the involvement of all physicians, especially pulmonologists, in the fight against global warming.^{4,5}

The first green paper measuring the carbon footprint of health systems was published recently. This report, compiled by Health Care Without Harm and ARUP (a company that offers sustainable solutions to industrial problems) highlights the contribution of the healthcare sector to climate change. If all healthcare systems were to come together and form a nation, it would rank fifth worldwide in terms of greenhouse gas emissions.⁶ It is paradoxical that the healthcare sector, which is responsible for everyone's health, contributes so enormously to the loss of health through global warming. It is clear that the healthcare sector must make a very serious effort to minimize the harm it causes to people through its own emissions.

The time for raising awareness of climate change has passed. Now we must put in place measures that facilitate a health system that is more sustainable and environmentally friendly. Countries like the United Kingdom have long been in the vanguard of this initiative. An example of this is a very recently published report in which the UK National Health Service commits to delivering a national health system with net zero emissions by 2040.⁷ Obviously, if we are to achieve a similar goal in Spain, policymakers must change the rules of the game. However, individual, personal and professional action, which can translate into collective action if we all push in the same direction, has a fundamental role to play. For example, the British Thoracic Society has promoted a series of recommendations for all physicians aimed at reducing the release of greenhouse gases from inhalers.⁸ This is a measure that will have a high impact in the short term. Pressurized inhalers con-

tain hydrofluorocarbon refrigerant gases, greenhouse gases that can be 2500 times more potent than CO₂ in their potential for global warming. In the United Kingdom, this type of inhaler accounts for 70% of all inhalers sold. In Spain, the proportion is approximately 50%; around 14 million devices per year in numerical terms. The same molecules that are delivered in metered dose inhalers (MDI) are available in dry powder inhalers (DPI), prompting the British Thoracic Society to recommend that, whenever possible, the molecule be prescribed in dry powder. An MDI pollutes 30 times more than a DPI (the equivalent of driving an average of 300 km compared to 6 km). Promoting disease control in order to use less rescue medication, prescribing rescue medication in dry powder instead of MDI, and switching from MDI to DPI while maintaining the same molecules could save more than 180,000 tons of CO₂ per year (the equivalent of more than 6000 flights from Madrid to London). These are individual measures that can be translated into tangible CO₂ reductions, and an example of the many measures that can and should be taken.

Personal action is essential, but scientific societies are also responsible for driving a shift toward more sustainable health care. They must include climate change in their priorities and pass this mindset down to their members. They must put pressure on the authorities to seek solutions to national health system emissions. SEPAR has a historic commitment to health and patient care and continues to spearhead this struggle by developing various initiatives in recent years. Designating 2020–2021 as the “SEPAR Year of Air Quality. Climate Change and Health” was a decision that highlights the relevance and interest that our scientific society attaches to this issue. Throughout the year, we will organize training, education, teaching, research and social outreach activities for the general population and all health professionals to transmit the main messages and improve knowledge and raise awareness of this serious problem. However, our Society on its own will not be able to change the current situation; we must lead all scientific societies in Spain in the fight for real change. This is probably the greatest healthcare challenge of all for the 21st century.

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[☆] Please cite this article as: Cabrera López C, Urrutia Landa I, Jiménez-Ruiz CA. Cambio climático: la responsabilidad de SEPAR. Arch Bronconeumol. 2021;57:381–382.

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23 October 2020