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Slovenia

Slovenia, which at the beginning of January became the first former Communist state to take over the rotating European Union presidency, has made the fight against cancer its top health priority over the next six months. Justifying its choice, it explains that this is no random decision. Not only is cancer one of the most significant public health problems society is currently facing, but there are differences between EU countries in their ability to prevent and control the disease.

As Europe's population grows significantly older over the next 20 years, projections show that the incidence of cancer is set to increase. Projections suggest that in 2010, three million Europeans will develop cancer and nearly two million will die from the disease. By 2020, those figures are set to rise to 3.4 million and 2.1 million.

At the same time, other chronic, noncommunicable diseases, often linked to the same risks as cancer will also place extra pressure on public health systems. "Attending to the long term environmental and lifestyle risk factors that underpin the chronic disease burden, including cancer, is therefore an economic as well as a social and health policy priority," the Slovenian government insists.

The importance that Slovenia attaches to tackling cancer can be gauged from the fact that the first major public health initiative in its EU presidency is a two day conference on "The burden of cancer – how can it be reduced?" on 7 and 8 February. This will be followed by another two-day conference in Brussels in April devoted to cancer patients and a formal meeting with European MPs on the subject. The events will bring together leading experts as well as policy makers and is intended not only to promote professional debate, but also to produce political commitments.

The proceedings are expected to stress the importance of adopting an integrated approach towards the disease, while taking account of the complexity of risk factors. This will range from disease prevention, organisation of screenings and early detection to optimising treatment, rehabilitation and palliative care. Slovenia will also encourage the active participation of civil society and non-governmental organisations, especially patient groups, in this work. "We are positive that, with increased political commitment, we will contribute to evening out some of the inequalities in the burden of this disease," the Slovenian presidency notes.

The second major item on the Slovenian agenda is antimicrobial resistance. It intends to give political impetus to measures to address what is regarded as one of the most serious threats in combating communicable diseases and which is becoming more acute as patient mobility increases. The government will also continue work on tackling alcohol-related harm, on promoting healthy diet and physical activity and on improving mental health.

As information technologies make a greater contribution towards more accessible, cost-effective and safe healthcare, attention is increasingly focusing on ways to develop ehealth. This will be the focus of another conference in May.

Alongside these specific initiatives, the Slovenian presidency will have to take forward two broader, potentially controversial, policy debates. The first revolves around patient mobility and the ability of people to receive reimbursable hospital treatment in a country other than their own. The European Commission was due to present proposals shortly before Christmas to ensure legal clarity in this highly complex area where the rights of patients and responsibilities of public health systems need to be carefully balanced.

However, the timetable had to be quickly revised when it emerged that several European Commissioners were not happy with the draft text. In particular, they pointed to unresolved issues such as how to ensure cross-border recognition of prescriptions and the status of a doctor or hospital's liability if treatment goes wrong once a patient has returned home. Despite the unexpected delay, the Commission is expected to table its proposal in the coming months and it will be up to the Slovenian presidency to start the initial political consideration of its contents.

The second debate will focus on the Commission's white paper setting out its thinking on a strategic approach towards health issues in the EU up to 2013. This identifies three main themes: population ageing, major threats to health and the development of new technologies. The aim of the strategy is to bring greater coherence over the long term to what Europe does on health issues, instead of each government setting certain priorities close to its own heart when it assumes the rotating EU presidency. This is likely to be the centrepiece of the debate when health ministers meet in June.

The country focus section in the next issue of E-Hospital will be devoted to Slovenia.

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