



## Public Health in Europe – 10 years EUPHA

Wilhelm Kirch (Editor), *Public Health in Europe. 10 Years EUPHA* Heidelberg: Springer-Verlag, 2004. Pages 376

What is Public Health (PH)? What are the links between Public Health research and policy in Europe? Where is PH coming from in the 20<sup>th</sup> century and where is it directed to?

These are some of the questions addressed by *Public Health in Europe - 10 years EUPHA*, the volume, edited by Prof. W. Kirch and published by Springer in 2004, that presents a selection of the manuscripts from the 10<sup>th</sup> Annual Congress of EUPHA, held in Dresden in 2002.

Gunnar Tellness, the President of EUPHA, reminds us what PH is, or what it should be: the science devoted to reduce in the population the amount of disease, premature death and disease-related discomfort, sickness and disability. In addressing these themes, Tellness suggests to improve PH by employing health-promoting and cultural activities, in order to establish strong collaborations between public agencies, private business, organisations and pioneers.

PH research has produced some very interesting results, especially in eradicating or reducing infectious diseases. But now, the focus for research activity has shifted towards life-style factors, such as smoking, healthy nutrition, obesity and drugs of abuse, however, a gap between the results of PH research and policy still exists. Godfried Thiers gives an example of this, showing that there is insufficient political will to tackle these problems, especially for economical reasons. There is no need for further research on the effects of smoking on health, but further research is required on human behaviour and motivation, as well as, on why people take risks.

What common levels of PH should be achieved across Europe? Louise J. Gunning-Shepeers considers that it is fundamental to reinforce basic PH programmes, before investing in additional ones. She identifies five key areas for doing this: a) maternal and child health services (including childhood vaccination programmes); b) infectious disease control (TBC and AIDS are still big issues throughout the world; problems such as bio-terrorism may play an important role in the globalised world); c) infrastructures to address large scale disasters, to respond rapidly to outbreaks, epidemics and environmental disasters; d) health education, which must be used for changing behaviours on a limited number of potentially important risk factors, such as for instance smoking and safe sex; e) high-risk populations.

Of special interest is the contribution made by Italian researchers, Pietro Crovari and Roberto Gasparini. Their expertise in the field of Influenza Surveillance, had provided exhaustive information on the characteristics, objectives and methods of surveillance for this infectious disease. This is of great interest, considering the number of people who travel and migrate, as well as, the ability to travel from one end of the earth to another in just a few hours.

Nante and coll. give an excellent demonstration of the usefulness of health economic tools for PH research and policy. Using the Discrete Choice technique, the authors determine a statistical model capable of explaining (and forecasting) the choices of patients and their doctors (GPs) regarding hospitals for admissions.

Folino Gallo and coll., furthermore, show the effects of expenditure and the utilisation of medical products in the European Union, giving an interesting insight on medication errors and adverse drug reactions, economic burden and the environmental impact of medicines in Europe.

To Prof. Kirch our acknowledgement for having gathered these contributions in a logical and useful way for thinking and acting in the field of PH.

Giuseppe La Torre  
Editor Staff IJPH