

which goes along with these tasks requires a broad understanding of health and concrete transferral of health into all policies. Still, the emerging knowledge in biotechnology has not yet diffused in the relevant public health and policy areas. Public Health Genomics is closing this gap. It can be defined as the responsible and effective translation of genome-based knowledge and technologies into public policies and health services for the benefit of population health. Thus, the workshop of the section 'public health genomics' aims to identify and discuss the influences on, and the ways and responsibilities of translating emerging genome-based health information and technologies into timely policy options among European member states and different stakeholders.

Genome-based innovations in public health: the contribution of systems biology

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Genome-based innovations in public health: the contribution of epidemiology

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Genome-based innovations in public health: the contribution of public health genomics

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Genome-based innovations in public health: the contribution of European law

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G.4. Workshop: The major and chronic diseases report 2007: state of the art of major and chronic diseases information in Europe and the way forward

*Chair: Coen van Gool**

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In 2006, DG SANCO requested the task force on major and chronic diseases (TFMCD) to produce a report on the state of the art of major and chronic diseases information in Europe, highlighting the contribution of TFMCD projects to this European health information. In 2007 the report was produced by TFMCD project leaders, covering the following diseases/conditions: (i) atherosclerotic cardiovascular disease, (ii) autistic spectrum disorders, (iii) cancer, (iv) dementia, (v) depression, (vi) diabetes, (vii) haematological malignancies, (viii) maternal and child health, (ix) multiple sclerosis, (x) musculoskeletal conditions, (xi) oral health, (xii) sexual and reproductive health and (xiii) life expectancy with chronic morbidity. The report has been published by the European Commission on 6 June 2008, and was made available at the EU Health Portal and the DG SANCO website. This workshop aims to present the report. The state of the art of major and chronic diseases information in Europe as described in the report—including gaps in health information—will be presented. To conclude the workshop will focus on needs for future research on and development of European public health monitoring based on the experience of the report. The added value of the workshop is: (a) showing to the participants the specific contribution of Commission funded major and chronic diseases projects to European Health Information by providing a clear and comprehensive picture of the state of the art of major and chronic diseases information in Europe and (b) providing insight into the areas for future action identified by the public health experts and how this relates to DG SANCO's policy priorities.

The major and chronic diseases report 2007

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In 2006, DG SANCO requested the Task Force on Major and Chronic Diseases (TFMCD) to produce a report on the state of the art of major and chronic diseases information in Europe. The TFMCD is one of the implementing structures of the Health Information Strand of the Programme for Community Action in the field of Public Health 2003–08. The aim of the report is 2-fold: first, to make visible the contribution of TFMCD projects to European health information, and second, to describe the state of the art of major and chronic diseases information in Europe, focussing not only on the monitoring systems implemented and data available, but also on gaps in information as well. In 2007 the report was produced on a voluntary base by several TFMCD project leaders—those able to allocate the necessary time and resources—often together with their expert colleagues. A template, covering the most important epidemiological aspects of major and chronic diseases information (e.g. prevalence, morbidity, mortality) was developed for the chapters to enhance comparability of results across the different diseases/conditions described in the report: (i) atherosclerotic cardiovascular disease, (ii) autistic spectrum disorders, (iii) cancer, (iv) dementia, (v) depression, (vi) diabetes, (vii) haematological malignancies, (viii) maternal and child health, (ix) multiple sclerosis, (x) musculoskeletal conditions, (xi) oral health, (xii) sexual and reproductive health and (xiii) life expectancy with chronic morbidity. The report has been published in June 2008. In this presentation, the aim and the structure of the report, as sketched briefly above, will be explained in more detail, providing the workshop participants with the necessary insights to understand the status of the report, and with a framework for the further contents of the workshop.

The state of the art of major and chronic diseases information in Europe

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As much as possible the chapters in the report follow the same template, which covers health determinants/risk factors, incidence/prevalence, morbidity (hospital discharge data, clinical management, treatment, survival, disability) and mortality. This allows for a comparison of the state of the art of health information across the different diseases and conditions addressed in the report. By following this approach, the report makes clear the differences in needs between areas in which monitoring activities/research have been going on for several decades now, such as cancer and cardiovascular disease, and diseases which have become the focus of attention more recently, such as autism and multiple sclerosis. During the workshop, the state of the art of health information is sketched. The specific contribution of the Commission funded projects to European health information is presented (e.g. the development of indicators, the implementation of guidelines, the development of coding and classification systems, the creation of data collection networks). Special attention will be given to important health inequalities (e.g. large differences in premature death due to cardiovascular causes between new and old Member States), gender differences (e.g. women's chance to have a mood disorder is twice as high as men's) and age differences (e.g. possible under-treatment of older diabetes patients). One important aim of the report is to identify the needs for future health information developments/research. The gaps in information identified by the authors of the report will therefore be presented as basis for the discussions in the next presentation.

Gaps in European major and chronic diseases information: which way forward?

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The Major and Chronic Diseases Report 2007 provides a comprehensive overview of what is available in terms of major and chronic diseases monitoring and what is not. Information on gaps in the European Health Information System is valuable knowledge for the European Commission to help set priorities. The recommendations for future health information action made by the authors of the report will be cross-referenced with the Commission policy for coming years. Important political reference documents that will be taken into account will be the Commission's Health Strategy White Paper, which provides an overarching strategic framework for the period 2008–13, spanning core issues in health as well as health in all policies and global health issues; the Programme of Community action in the field of health 2008–13 ('Together for Health'); and the EUGLOREH report ('the Global Report on the Health Status in the European Union'), which aims to provide a clear and coherent picture of the health status of the European population and related time-trends and determinants. Through this approach, the workshop participants will learn how the specific major and chronic diseases information recommendations fit into the larger context of EU public health policy.

H.4. Session: Patient participation

Municipal health survey: an instrument to promote local awareness towards health determinants

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Issue/problem

The fact that health determinants include not only individual factors but also environmental, economic, social and cultural factors, emphasizes the need to create a tool based on a holistic concept of health that supports the evaluation of people's health. There is need to create an observation instrument that can provide information and descriptive statistics on determinants of health. The Municipal Health Survey (MHS) offers answers to some of the problems presented by the holistic concept of health. The disclosure of this tool will contribute to the development and implementation of a shared information system that gathers data on the population's health status and at the same time evaluates the impact of the different health determinants on people's health.

Description of the problem

Supported by the Healthy Seixal Project (a project that promotes health in the urban areas, sustained on the Healthy Cities Movement of the World Health Organization) the MHS brought together a multidisciplinary team committed to build a tool that aims to support monitoring and evaluation of local people's health. The survey comprises some questions regarding the main health determinants collected from surveys designed and already validated in Portugal, and also from international surveys in order to help data comparisons.

Results (effects/changes)

As the MHS takes into account the holistic concept of health, it

can be considered an important source of information that helps to assess the impact of different health determinants and local policies on people's health. The results will deepen and improve the current health system and will contribute to a qualitative leap on new concepts of health impact assessment.

Lessons

The implementation of the MHS will also allow the identification of health-related needs and its determinants. This diagnosis is the starting point for the development of actions and projects that aim to empower and enable individuals to manage their own health in a more responsible way and to improve health policies at a local level.

A model regarding active participation in citizen's health promotion—the case of the Healthy Seixal Forum

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Issue/problem

To promote community health in the Seixal municipality is a process that currently comprises 130 active institutions from several sectors, such as education, health, environment, etc. This wide network and the resulting intersectoral work have been quite consistent throughout 15 years of work and result in a clear added value. However, its operation is somewhat difficult, namely because of the Project's complex communication matrix and its intersectoral nature, both focusing on health determinants.

These questions reinforce the need to find innovative contexts and also to create a partnership 'culture' and identity, which the Healthy Seixal Forum (HSF) has highly contributed to.