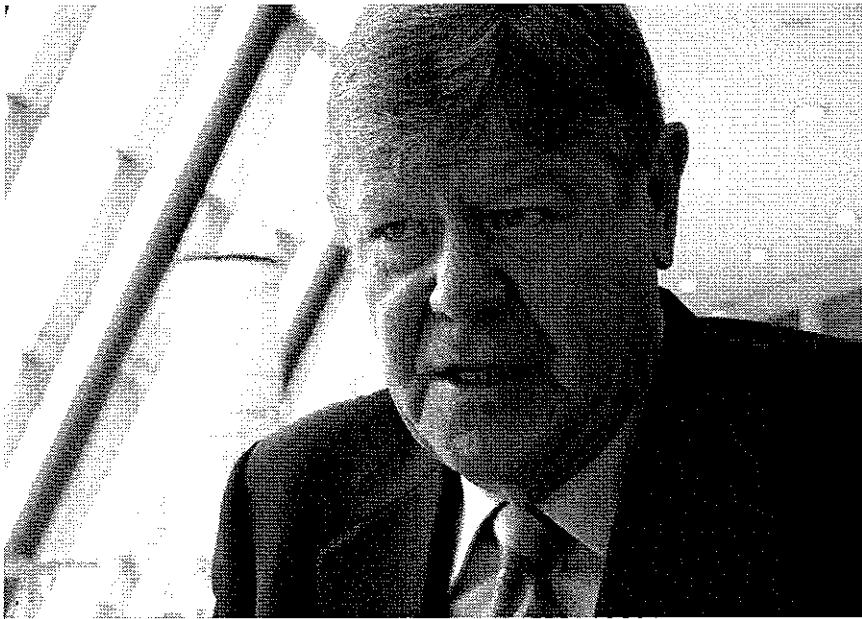


Health is also a question of education

The European Men's Health Forum is interested in the improvement of the present situation of men's health on a Europe-wide level. Vice President Rodney Elgie talked to Annamaria Toth, Alpbach News (AN) about the EMHF's goals.



Rodney Elgie: teaches men to go to the doctor. Foto: got

AN: What are the main aims of the EMHF and towards whom should patient's claims and needs be asserted?

Elgie: The main objects are to promote patients' rights across the European Union. Patients, no matter from which country they come, should get equal treatment. That does not happen at the moment. This is wrong. Also, what we want to do is to provide more information to patients.

AN: One of the most topical issues nowadays is that of the re-structuring of the age groups within society. How would you solve this problem?

Elgie: Essentially, we have two major problems: One is, we have a declining population and in most European countries the birth rates are insufficient to sustain a satisfactory development, that is, the population will drop. Against that, we have an ageing population because people are living much longer. You cannot really equal those two problems of a decreasing working population and an increasing ageing population. That will become unsustainable. Of course if people get older, they will need more health care. At the moment, people use 90% of their health costs in the last two years of

their lives. One of the things we are saying is therefore that we want to develop a healthy ageing population and this means the prevention of illness. This has to do with the withdrawal of smoking and illicit drugs, a healthy diet and exercise and requires an educated population because we can give sufficient education in order to change attitudes and behaviour.

AN: How do you proceed?

Elgie: We want to move from diagnose and treat to predict and prevent. With our knowledge of the human genome and a healthy lifestyle we can prevent many things. On the other hand, patients need to move from information to education and from education to empowerment. The problem is that countries who have invested money in prevention will not see a benefit for 10 to 15 years. But what governments want is an advantage in one or two years so that they can be re-elected. Actually, this is a lot more expensive. The more educated people are, the more sufficiently they use their health care systems.

AN: Do you have agencies in every member country of the EU?

Elgie: Apart from Luxembourg we do. What we are trying to do is to co-operate with the European Health Forum.

AN: Why are the sexes divided? These aims should be equally important for men and women.

Elgie: The reason is just historical. The European Institute for Women's Health was created about 40 years ago, the EMHF was only created just 5 years ago because we said: "This is crazy – why should we only focus on women's health?" Particularly men's health is important because men are on the whole fairly stupid. If we have a pain in our stomach we think that it will go away if we ignore it for ten days, but it won't.

AN: This has to do with gender images, hasn't it?

Elgie: Of course. We have to be macho and strong and going to the doctor is a sign of weariness. Especially in my area, mental diseases, there are lots of myths about depression.

I hope that there will be instances where the men's and women's organisations will come together on different issues. It is important that we get involved in the decision making processes of the EU and the Commission to promote health. One of the great problems of the Constitution is that it doesn't have competency in health, which seems to be a bit crazy because they cannot provide any information about health to the general public. That seems crazy because we are all in the European Union and we have the basic freedoms.

AN: These projects must require lots of financial support. How do you finance them?

Elgie: Some money we get from the local countries, from the European Commission, from trusts, foundations and from the pharmaceutical industry. We get lots of criticism for that, but actually it is part of a natural triangle: You go to a doctor, who prescribes you a medicine that you get from the pharmaceutical industry. So, why shouldn't we communicate with the pharmaceutical industries? But one thing we will never do is to have anybody dictating our work. We are also co-operating with research centres and universities in order to be up-to date with academic research.