



betes in Europe – by, for example, contacting individual national health ministers requesting action at Council level and encouraging MEPs to sign a Parliamentary Declaration calling for action by the European Commission. Once more, individual nurses can help influence this process by writing to MEPs and asking them to consider European action to reduce the threat of the diabetes epidemic. Politicians are sometimes stimu-

lated to action more by the approach of an individual voter than by what they may see as an organised lobby by a pressure group, however worthy.

Working towards a strategy for diabetes in Europe needs collaboration between all stakeholders: people with diabetes, health care professionals, politicians, administrators and the general public. Diabetes is a shared responsibility: *together we are stronger*.

References

1. *Diabetes Atlas*, 2nd edn. Brussels: International Diabetes Federation, 2003. [Also available at <http://www.idf.org/e-atlas>]
2. Diabetes Prevention Research Group. Reduction in the evidence of type 2 diabetes with life-style intervention of metformin. *N Engl J Med* 2002; **346**: 393–403.
3. 'Otocec Declaration' 2004: *International Diabetes Federation European Region*. [Also available at IDF Europe website: <http://www.idf.org>]

The European Diabetes Research Database, a new networking tool

C Brendel*

Scientific and political background

EURADIA (Alliance for European Diabetes Research) aims to co-ordinate European diabetes research and to be active in public advocacy and political lobbying at the highest European level.

In this regard, EURADIA has already ensured that diabetes features as a thematic priority area in the Sixth Framework Programme (2002–2006) of the European Commission and will continue these activities, so that diabetes keeps a high position in the Seventh Framework

Abstract

EURADIA's ambition is to create the 'Who's Who' of people and groups carrying out clinical and basic research on diabetes in Europe in order to stimulate international collaboration. Copyright © 2005 FEND.

Eur Diabetes Nursing 2005; 2(2): 82–83.

Key words

database; research; health care; clinical trials; collaboration

Programme (planned to span 2007–2013).

The aim of the European Union is to become the leading knowledge-driven economy in the world by 2010. Cutting edge science requires wide communication, collaboration and competition. EURADIA launched an open-access European Diabetes Research Database in 2002 which provides a platform for improved communication and the sharing of resources among diabetes research groups in geographical Europe and beyond, including Iceland, Russia and Israel. This initiative was welcomed by the diabetes research community as well as by European Commission representatives. (See <http://www.euradia.org>.)

Structure of the database

This database is a non-exhaustive list of the main European centres, groups and individuals researching diabetes or related subjects at both clinical and basic levels, including psychological aspects and patient education. It covers 33 countries and includes academic institutes as well as non-academic institutes and industry. Physicians, nurses or other health care professionals who have a research-related activity also appear in the database and are strongly encouraged to do so. Since all the details on each group could not be included in the database, the users are invited to visit the homepages of the institutes, when available. Consequently, we urge researchers to create their own

Author

Carole Brendel, PhD, Scientific Officer, EURADIA, Düsseldorf, Germany

*Correspondence to: Carole Brendel, PhD, Scientific Officer, EURADIA, c/o EASD Rheindorfer Weg 3, D-40591 Düsseldorf, Germany; tel: +49-211-75 84 69 18 / +49-211-75 84 69 0; fax: +49-211-75 84 69 29; e-mail: euradia@easd.org



homepage in English (we will assist if requested).

The database is searchable by administrative keywords (name of the head of department, country and address), and scientific keywords describing the field of research of each group (research subjects, technical expertise, ongoing clinical trials and epidemiological studies). The keywords cover clinical science and care, genetics, epidemiology, islets, pathophysiology, and metabolism, as well as complications.

A database for whom?

Although this database is intended for anybody who has an interest in diabetes research, it was mainly created for researchers, health care professionals and students. It enables them to find partners for research collaboration, clinical trials, technology transfers, obtaining patents in collaboration with industry, or applying for grants, especially for EU funds that require multinational applications. The database will also be a powerful instrument for advertising or searching for position vacancies.

Quality of the database

The database was created by contacting members of the European Association for the Study of Diabetes (EASD). The next steps will be to contact members of the other EURADIA partner organisations with a view to increasing the participation of health care professionals and industry research groups, and to broadening the scope of the database.

Purpose and future challenges of the database

This 'Who's Who' of people and groups carrying out clinical and basic research on diabetes should help researchers and health care professionals to build working networks and stimulate collaboration between individuals and teams who might not have established contacts yet, notably due to geographical distance. It will also allow political leaders to obtain an overview on diabetes research in Europe, to determine the national strengths and weaknesses of research in order to organise technology platforms, and to develop education or support regional expertise. It also gives

EU institutions the opportunity to find experts for audits, grant evaluations, and the preparation of calls for tenders, as well as to obtain advice on the structuring, networking and future policies of research.

One of the major future challenges of EURADIA will be to complete the database with European clinical trials and epidemiological studies. This should contribute to avoiding duplication of efforts, to making the best of each centre's know-how, to developing patient databases and ultimately to lessening the burden on volunteers participating in the surveys.

Finally, we hope that this European initiative will pave the way towards a worldwide diabetes database and a strengthening of the interactions between researchers working on different areas of diabetes. It is now time for you to register!

For registration or comments on the database, please contact the Scientific Officer of EURADIA or visit <http://www.euradia.org> where a downloadable questionnaire is available.

Conference Notice

International Diabetes Federation 19th World Congress

3–7 December 2006

Cape Town International Convention Centre, Cape Town, South Africa

For further information and to register please contact:

19th World Diabetes Congress, IDF, Congress Unit, Avenue Emile De Mot 19, B-1000 Brussels, Belgium.

Tel: +32 2 5431631; fax: +32 2 5385114; e-mail: WorldDiabetesCongress@idf.org; website: www.IDF2006.org