



Diabetes has gone global. It is one of those rare occasions when everyone backs 'globalisation'. The aim is to achieve a United Nations Resolution on diabetes, which means gathering the support of a majority of UN member countries to back such a resolution and then linking that to the European Parliament Resolution (the majority of MEPs supporting the parliamentary Declaration).

The UN recently adopted a Convention on Disability which was a great achievement for all who had campaigned to this end. We now want to see something compatible for diabetes - a spur to every country in the world to adopt a diabetes strategy. Warm congratulations to Bangladesh who have sponsored the resolution.

The number of countries who have asked me to squeeze them into my diary regarding their diabetes, stroke and heart disease initiatives persuades me that we really are making progress, and that prevention, care and cure messages are, if not

Diabetes: a global and personal health challenge

John Bowis, MEP

the same, at least linked. As I said to the Spanish Senate Health Committee recently, those in Health Departments who have responsibility for the finances of Europe's health have tremendous opportunity, but they can do nothing unless resources are released to enable them to develop services in these directions.

So we have a crucial task to educate fellow professionals, fellow politicians and budget holders. We need to get across, in lowest common denominator terms, the cost of not doing something. The cost of not spending now on health is going to be an enormous cost later. If more people eat and exercise sensibly, then we shall cut the cost of diabetes and its complications and consequences. We shall save money through prevention and thus be able to spend in new health directions. It is economic as well as health common sense for governments, employers and society as a whole.

With proposed Health Impact Assessments of all major EU and national policies, with food marketing, labelling and composition initiatives, with investment in and promotion of good health rather than simply picking up the pieces and bills of ill health, we are slowly coming to a realisation that we have to broaden our horizons, and open new collaboration with partners who go way beyond just health and social services, beyond housing and on across government to see how we can work together in support of individuals while screening out health risks, identifying cross discipline problems and ensuring appropriate dual diagnosis and treatment.

Some of our health challenges are there for the worst of reasons our lifestyles - and some are there for the best - the achievements of medical science and practice. Either way they have to be met. In many ways perhaps it also reflects the spirit of the European dream, as I understand it, which is to debate experience and options, to think the unthinkable and to dream the impossible and then, over time, to make it happen.

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Author's details

John Bowis was elected in 1999 to represent London in the European Parliament for the British Conservative Party (EPP/ED Group). He was re-elected in June 2004. From 1997-99 he worked in support of the World Health Organization's Global Campaigns on Mental Health and Epilepsy.

From 1987-97 he was a Member of the UK Parliament, where from 1993-96 he was a Health Minister and from 1996-97 a Transport Minister. While at Health he represented the UK on the EU Health Council.

In the European Parliament he is EPP/ED Co-ordinator and Spokesman on the Environment, Health & Food Safety Committee. He was Rapporteur on Food Safety, on Health & EU Enlargement, on Professional Qualifications and on the European Centre for Disease Prevention & Control. He lives with type 2 diabetes.

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