Health and the health care system are a paramount political issue not only in the European Union and its member states. It is fully understandable and justified.

Population ageing, newly developed preventive, diagnostic and therapeutic technologies and ever increasing expectations of the public all create extraordinary pressure never experienced before by the society on the public health systems and, in particular, on their funding. Each country has to find its own path to dealing with this pressure.

Most politicians have been beating around the bush. The truth is there is no serious good news for the public in the health care sector. Two types of approaches are adopted in this regard: on the one hand, populists promise unrealistic things such as high-quality, safe and free health care for all, and, on the other hand, realists warn about the pending financial collapse of the system, underlining the need for co-payments and reduced scope of health care to be covered by public resources.

The cervical cancer issue is an unprecedented challenge. Thanks to advances in research and technologies over the last decades, an exciting opportunity arises for the public to take effective steps towards better health. For the first time in history mankind has real options not only for cancer treatment, early diagnosis and risk identification but also for cancer prevention and avoidance.

Viruses are the known cause of most cervical cancer cases. In addition to cervical cancer screening conducted for decades to detect cervical precancer and early curable cervical cancer it is now possible to identify high-risk persons, i.e. those who are at higher risk for developing the disease than the general population. Attention can therefore be focused on these high-risk subjects whose chance for early treatment and successful outcome is further increased. Moreover, a new vaccine is available that, under certain conditions, prevents viral infection and consequently protects against cervical cancer.

Fortunately, there is good news: effective methods are now available for cervical cancer treatment, screening and prevention. It sets a challenge to politicians who have to respond accordingly. Even more attention needs to be paid to the prevention, the position of prevention providers needs to be strengthened and more funds need to be channelled into this area. There is no doubt that the funds, no matter if public or private, used for the prevention is the best spent money in the health sector. Despite this generally known fact, the governments only allocate a negligible proportion of their health budgets to the prevention.

To promote prevention efforts of health professionals, close cooperation with the public, the patients, is needed. Only a well-informed patient can be a partner in the health care process. It is true in general and with reference to the prevention in particular. Large funds and considerable efforts are required for health education of the public. Access to information on health, disease, prevention and treatment should be provided to the general public. Such information has to be generally accessible, true, comprehensive and understandable.

If we succeed in encouraging, on the one hand, erudition, health education, information accessibility, promotion of prevention and primary health care involved in providing it, and on the other hand, science and research, we have a great chance of getting rid of a type of cancer – and we all hope that new possibilities and challenges will open up soon to us.

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