

INTENSIFYING THE FIGHT AGAINST CANCER: A CALL TO ACTION

A new case of cancer is diagnosed in the European Union (EU) every nine seconds. In 2020, 2.7 million Europeans were diagnosed with the disease, and 1.3 million people lost their lives to it. Cancer mortality is set to increase by more than 24% by 2035, making it the leading cause of death in the EU. With the Europe's Beating Cancer Plan (EBCP), the EU has strengthened its fight against cancer. However, many challenges in cancer prevention, treatment, and quality of life after diagnosis remain and need to be addressed. Therefore, the timely roll out of remaining initiatives under the EBCP and their effective implementation are crucial and should remain on top of the political agenda for the upcoming legislature.

The Association of European Cancer Leagues urges the policymakers in the 2024-2029 legislative cycle to:

- **Make Europe a leader in innovative cancer research**
- **Help to improve the National Cancer Control Programmes**
- **Take all the necessary steps to enable healthy choices for all**
- **Promote intersectoral policies that protect planetary health**
- **Address inequalities in early detection of cancer**
- **Improve cancer care through national Comprehensive Cancer Infrastructures**
- **Jointly buy expensive treatments with high added value**
- **Address unmet medical needs and foster multiple pathways for medicines development**
- **Harmonise training and care guidelines for supportive cancer care**
- **Empower patients and survivors to live with and beyond cancer**
- **Guarantee social, labour, and financial protection, and inclusion of those touched by cancer**

The overall focus should be on equity and closing the gaps within and among Member States. In addition, all services to cancer patients and survivors should be quality-assured, and those in need should benefit equally despite their socioeconomic situation. We elaborate on these calls to action below.

HORIZONTAL ASPECTS

❖ **Make Europe a leader in innovative cancer research**

The fight against cancer cannot be won without innovation. Therefore, it is imperative that the EU strengthens its role as the leading actor in cancer research across the whole continuum.

To improve primary cancer prevention, it is essential that the EU continues to invest in independent research to better understand carcinogenesis, for example in relation to existing and emerging chemicals and lifestyle effects. The EU also has a key role to play in the innovation of secondary prevention of cancer, with more research needed to develop new early detection methods that are more accurate, less invasive, and less costly.

While fundamental, clinical, and translational research are the backbone in establishing scientific advances in cancer treatment, the real-world implementation of discoveries made in the clinical setting remains a challenge and needs to be addressed. Therefore, the EU needs to support the adoption of treatments that bring proven added value. In addition, to foster innovation in cancer treatment, European institutions should incentivise research, with a focus on investigator-driven studies, in the areas of unmet medical needs (for example cancers with very low survival rate, such as brain or pancreatic ones). Furthermore, the EU should support open science by mandating the public availability of the results of clinical trials. Serious effort should also be put into research verifying the true value and best use of the innovations, including new treatments. Comparative research between various treatment options that measure final outcomes, such as overall survival and quality of life, should be also prioritised. This would bring a robust evidence base to assess the effectiveness of new treatments and help decision makers along the value chain.

Lastly, the EU should at least double the funding currently allocated to research on cancer survivorship in the EU mission on cancer, contributing to an improved understanding of the late- and long-term effects associated with cancer and its treatment, as well as palliative care.

Science is global and we can only beat cancer in partnership. The EU must go further to support multinational collaboration with third countries such as the United Kingdom – including on clinical trials – for the benefit of all citizens.



Help to improve the National Cancer Control Programmes

National Cancer Control Programmes (NCCPs) offer a strategic tool for EU Member States to improve cancer prevention and to ensure that appropriate treatment and care are available.

Most countries have NCCPs in place, however their level of development and quality differ. We, therefore, call for more EU-level coordination on NCCPs. The Commission should facilitate the exchange of best practices among Member States so that they could draft or improve the NCCPs. Existing guidelines should be reviewed and updated to reflect Europe's ambition in the fight against cancer. Moreover, the Commission should assist Member States; this could be done through a Joint Action with a provision of budgetary support. We also see the need to facilitate data collection and sharing at the EU level, to better support cross-country learning and exchange. Cross-border cooperation and coordination could also be strengthened by creating a network of relevant bodies responsible for the implementation of the NCCPs. This would ensure that all Member States have up-to-date, high quality, and effective plans to beat cancer.



PREVENTION

❖ Take all the necessary steps to enable healthy choices for all

With 30 to 50% of all cancer cases being preventable by following a healthy lifestyle, European decision-makers have a key role to play in making health-promoting environments a reality for everyone in Europe, addressing tobacco and alcohol consumption as well as overweight and obesity as main risk factors.

To achieve this, policymakers should commit to better regulating products entering the European market, especially unhealthy products such as those containing tobacco, nicotine, and alcohol. Europe urgently needs strengthened and harmonised product classification systems, fiscal measures and pricing policies, as well as marketing and advertisement bans and restrictions for products associated with a higher risk of developing cancer, or a co-morbidity directly linked with cancer. Decision makers need to support product restrictions and bans when these can greatly contribute to public health, while ensuring that the contacts between the industry and health policymakers are consistently monitored to guarantee a health-first approach and counter potential interferences. Furthermore, the incentive structure of the Common Agricultural Policy should be reviewed to incentivise the production and consumption of healthier food options across all population groups, and to disincentivise alcohol and tobacco production. Lastly, we call on European decision makers to take action to make physical activity widely accessible for all, and to invest in effective, science-based communication to ensure that Europeans have access to reliable information about the benefits of healthy lifestyles, and the link between unhealthy products and cancer.



Promote intersectoral policies that protect planetary health

Human and planetary health are inextricably linked, and cancer is no exception. The EU should reach the ambitious goals laid out in the European Green Deal by no later than 2030. The fight against cancer can be intensified by consistently taking a health-first approach in the design of intersectoral policies on climate, energy, environment, agriculture, transport, and industry. We call on the European policy makers to take action to reduce all kinds of pollution; protect citizens and the planet from exposure to hazardous chemicals; implement agricultural, industrial, and urban policies centered around health, sustainability, and equity considerations.

Address inequalities in early detection of cancer

Progress in implementing population-based cancer screening programmes and in increasing screening uptake vary across and within Member States. With the EU recommending the use of innovative screening methods and the expansion of evidence-based screening programmes to new cancer types, it is now more imperative than ever that the knowledge generated through the European Cancer Inequalities Registry (ECIR) is effectively used to address screening inequalities. European institutions should systematically provide Member States with financial and technical support for interventions addressing the inequalities uncovered by the ECIR, as well as for research and development of reliable early detection methods other than screening.

The EU should urge Member States to better inform citizens about the benefits and risks linked to participating in a screening programme, supporting informed choices also among those with low health literacy.



TREATMENT

❖ **Improve cancer care through national Comprehensive Cancer Infrastructures**

Comprehensive Cancer Infrastructures (CCIs) that integrate research and high-quality clinical care are key in the fight against cancer. Therefore, the European Commission should promote the establishment of CCIs within and across all EU Member States, including at least one national Comprehensive Cancer Centre (CCC) as well as tumour-specific Comprehensive Cancer Care Networks (CCCNs) in each Member State. For small countries, the establishment of national CCIs and collaborations with CCC across the borders should be facilitated. The CCCs should focus on improving care for rare and complex tumours and specific groups, such as adolescents and young adults, and establishing reference centres for these cancers. Furthermore, to increase the uptake of high-quality diagnostics and the latest innovative treatments, as well as access to clinical trials across and beyond the EU, the Commission should establish a European network of CCCs. This would help to address and reduce unacceptable disparities currently present across the EU.

❖ **Jointly buy expensive treatments with high added value**

Medical and technological developments are bringing a growing number of innovative cancer medicines on the European market. However, many of these novel treatments are extremely expensive. Therefore, we call on the EU policy makers to set up a mechanism for EU-level purchase and price negotiation of effective novel cancer treatments. Acting as a single buyer means that the EU would bring the market power of its 500 million citizens to the table. Joint procurement can help achieve lower prices and make small markets attractive for suppliers, offsetting current inequalities among the EU Member States and tackling shortages. It can also guarantee equitable access to new medicines with proven added value in all European countries. Relatedly, it is important that the costs of innovative medicines purchased jointly are divided among Member States fairly, according to their financial capacity.

In addition, to address the issue of affordability, more transparency on end user prices and pricing policies is needed. A step in the right direction could be an obligation for Member States to disclose real prices of expensive medicines to designated health officials.

❖ **Address unmet medical needs and foster multiple pathways for medicines development**

The pharmaceutical industry is not always willing to invest in developing medicines, including advanced therapy medicinal products, for unmet medical needs because they are intended for a relatively small number of patients and are therefore of low commercial interest. The EU pharmaceutical framework should provide incentives in this area. Furthermore, non-commercial medicine developers, such as academic institutions, have a role to play, however they currently face many hurdles. Therefore, we call on the European Commission to examine the challenges that academic developers of innovative treatments addressing unmet medical needs face and help to overcome them.



PATIENTS AND SURVIVORS SUPPORT

❖ Harmonise training and care guidelines for supportive cancer care

Despite cancer survival rates increasing in the EU, supportive cancer care remains significantly overlooked and underfunded. European institutions should facilitate the development and implementation of European training standards for healthcare professionals caring for cancer patients, survivors, and those living with a terminal diagnosis. Moreover, guidelines on comprehensive survivorship care plans should be provided. The right balance should be struck between standardisation and flexibility, allowing for adaptation to local care realities while ensuring that cancer patients and survivors can access the best available care in all Member States. Training programmes and care plans should include specific provisions on key areas for quality of life, such as mental health, sexual health, physical and vocational rehabilitation, and palliative care. Multidisciplinary, integrated models of survivorship care should include specialised home and community care delivery, palliative and terminal care.

❖ Empower patients and survivors to live with and beyond cancer

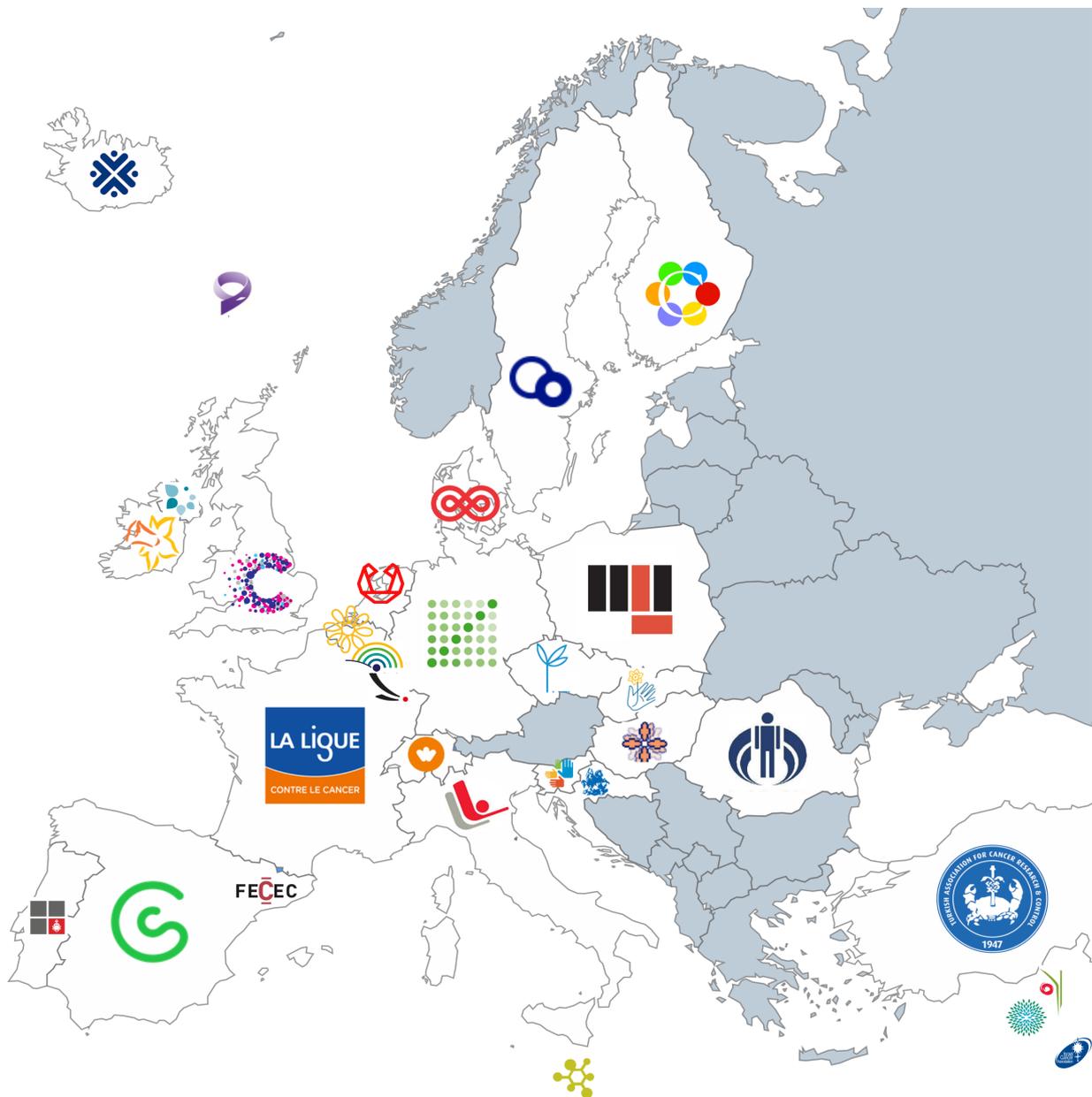
The preferences, needs and wants of cancer patients and survivors are often sidelined as they undergo treatment and experience its aftermath. Therefore, it is essential that the EU takes the lead in supporting the continuous development of guidelines on person-centered counselling. Moreover, it is key to ensure the effective implementation of the Cancer Survivor Smart-Card in all EU countries and to leverage existing and emerging digital solutions to equip cancer patients and survivors with the knowledge, tools and support they need to take control of their cancer journey. These tools and support should also reach patients that are not digitally literate.



Guarantee social, labour and financial protection, and inclusion of those touched by cancer

European cancer patients, survivors and their carers often face long-term, adverse consequences of cancer that go beyond their health. The EU has several instruments that should be deployed to change this reality. European institutions should proactively facilitate the creation of multilingual counselling structures to assist everyone who has the right to access cancer-related support, catering for the needs of different population groups, including people from socially vulnerable groups. Moreover, the EU must ensure that Member States take the necessary steps to minimise the financial distress linked to cancer treatment, and set a legally defined set of European standards to ensure that survivors do not face discrimination when accessing insurance and financial products. In addition, it is essential that cancer patients, survivors and carers are not discriminated against, and are adequately protected on the labour market. Return to work must also be supported and accompanied. The development and implementation of relevant national provisions should be monitored as part of the coordination exercise in labour and social policies undertaken as part of the European Semester.





Foundation Against Cancer Belgium
 Stand Up To Cancer Flanders
 Croatian League Against Cancer
 Cyprus Anti-Cancer Society
 Cyprus Association of Cancer
 Patients and Friends
 League Against Cancer Prague
 Danish Cancer Society
 Faroese Cancer Society
 Cancer Society of Finland
 French League Against Cancer
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