Action against cancer: European partnership

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PURPOSE: to propose a European Partnership for Action Against Cancer.

BACKGROUND: figures show that, in 2006, after circulatory diseases, **cancer was the second most common cause of deat**h (two out of ten deaths in women and three out of ten deaths in men). This equates to approximately 3.2 million EU citizens diagnosed with cancer each year.

The legal basis for action in the field of health largely falls on the Member States (Article 152 of the EC Treaty). However, there are areas where joint EU action can bring considerable added value in tackling major health challenges more effectively, through information sharing and exchange of expertise and best practice.

The European Parliament and Council have also shown their political commitment and given strategic direction to future European cancer activities. On 10 April 2008, the European Parliament adopted a resolution on combating cancer in the enlarged EU, and, on 10 June 2008, reducing the European burden of cancer were adopted.

On this basis, the European Commission proposes a **European Partnership for Action Against Cancer for the period 2009-2013** to support the Member State in their efforts to tackle cancer by providing a framework for identifying and sharing information, capacity and expertise in cancer prevention and control, and by engaging relevant stakeholders across the European Union in a collective effort.

CONTENT: this Communication broadly sets out the objectives for the European Partnership for Action Against Cancer, as well as the identified areas and actions to be further determined.

Objectives of partnership: to more effectively combat cancer at European level, it will be necessary to draw up a strategy to assist the Member States to enhance their knowledge and cooperation in the field, within the context of the limited competences of the Community in this field. This Partnership aims to support the Member States in their efforts to tackle cancer by providing a framework for **identifying and sharing information**, **capacity and expertise in cancer prevention and control,** and by engaging relevant stakeholders across the European Union in a collective effort. The aim is for all Member States to have integrated cancer plans by the end of the partnership, which should result in a 15% reduction by 2020 (510 000 new cases).

Areas and actions to be covered: the Communication stresses the fact that **one-third of cancers are preventable** and that, for this reason, emphasis needs to be placed on **health promotion**. Cancer is caused by many factors and therefore its prevention needs to address on an equal footing lifestyle, occupational and environmental causes, such as smoking, being overweight, low fruit and vegetable intake, physical inactivity and alcohol consumption.

To prevent and combat cancer, further actions need to be taken in the areas of detection, the dissemination of good practices, cooperation in research activities and improving the comparability of results between the Member States.

1) **early detection:** cancer can be reduced and controlled by implementing evidence-based strategies for early detection and management of patients with cancer. This includes **appropriate information to**

ensure awareness about the benefits of screening for those who should benefit from it. In fact, the annual number of screening examinations in the EU is well below what it could be (approximately 125 million examinations per year).

The Communication proposes to reduce the burden of cancer by achieving 100% population coverage of screening for **breast, cervical and colorectal cancer** by 2013 by providing 125 million examinations to citizens per year. In order to achieve this target, Member States should promote large scale information campaigns on cancer screening, directed at the general public and health-care providers.

Other actions could include:

- assessing the effectiveness of Community policy in the area of tobacco control;
- using existing mechanisms, such as the stakeholder forums focusing on alcohol and nutrition, to take forward cancer actions;
- reviewing the European Code Against Cancer, including its implementation;
- assessing the burden of infection-induced cancer in the EU;
- providing an overview of the range of recommendations in the EU on the implementation of human papillomavirus vaccination as a public health policy to prevent cervical cancer;
- reviewing the Council Recommendation on cancer screening in view of recent scientific developments;
- development of a voluntary European pilot accreditation scheme for breast cancer screening and follow-up, building on the European guidelines for quality assurance in breast cancer screening and diagnosis.

2) **identification and dissemination of good practice:** the Communication also proposes tackling inequalities linked to cancer mortalities, in particular by reducing disparities between the member states. Whilst it may not be possible to eliminate all the existing inequalities, the Commission considers that a 70% reduction by 2020 is a feasible target, taking account of scientific developments and the different circumstances of different countries and cancers. This aim will be supported by the development of guidelines for models of best practice in cancer-related care.

Other actions could include:

- sharing knowledge and expertise on different models for comprehensive and integrated cancer care, and in particular the organisation of care, with the aim of developing consensus around definitions and models of care, including chronic and palliative care;
- exploring the application of ongoing European efforts under the Health Technology Assessment initiative as a means to tackle cancer more efficiently, building on the framework to be established under the proposed Directive on the Application of Patients' Rights in Cross-border Healthcare;
- exploring alternative technical and financial solutions for the European supply of medical isotopes, taking account of shortages in supply across Europe.

3) **cooperation and coordination in cancer research:** health research is of central importance to the EU's research commitments. Recognising that cancer research is mainly undertaken at national level and that it is considerably fragmented and diverse across the EU, the Community aims to step up its efforts to improve EU-wide coordination within this field. The Communication proposes the development of a coordinated approach to cancer research across the EU, aiming to achieve coordination of one-third of research from all funding sources by 2013.

Other actions could include:

- bringing together partners in a collective effort to address obstacles in European cancer research;

- identification of gaps in research and methodology, enhancement of research cooperation to avoid duplication of efforts and strengthening research on prevention and translational research;
- increasing public access to information on cancer research and clinical trials in particular;
- improving the regulatory environment on clinical research in the EU.

4) **providing the comparable information necessary for policy and action:** the Commission considers that it is important to ensure comprehensive and standardised cancer information and data from all Member States. In other words, comparative research at European level into best practices in the field is required. The sharing of relevant information for statistical purposes is essential for developing effective public health interventions and the European benchmarking process.

In this regard, the Communication proposes to ensure the availability of accurate and comparable data on cancer incidence, prevalence, morbidity, cure, survival and mortality in the EU by 2013.

Other actions could include:

- identification of obstacles in collection of data and indicators, including legislative obstacles and accessibility of data, and ways to overcome those problems;
- agreement on a set of core indicators to measure and enable European comparisons of the burden of cancer, quality of care and impact of cancer strategies, with special emphasis on health inequalities;
- encouragement of high quality standards and networking on cancer registries;
- collection of data on the cost of cancer to society;
- conducting a survey to gauge European opinion on cancer data registration as a means for public health research and planning of effective health systems.

Financing and next steps: the actions undertaken within the framework of the Partnership would be funded by existing financial instruments until the end of the current financial framework (2013) without additional budgetary consequences. In order to take forward these identified areas and actions, this Communication proposes a specific joint action to be supported by the **Health Programme as from 2010**. In addition, several other Community programmes also provide funding relevant to cancer, e.g. the 7th Framework Programme for Research and Technological Development as well as Regional Policy Programmes.

At the end of the current financial framework, a **review process** will be undertaken to assess the Partnership's successes and shortcomings. A final report on the work undertaken on the basis of this Communication will be submitted by the Commission to the Council of the European Union and the European Parliament, which will constitute the basis for determining future Community action on cancer.