# Cancer screening

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The committee adopted the report by Antonio MUSSA (UEN, I) amending the proposal under the consultation procedure. It pointed out inter alia that screening policy must be conscious of men and women's different health challenges and needs and that particular attention should be paid to how men react to screening programmes for colorectal cancer, in terms of take-up. It was also important to continue to raise awareness of prostate cancer symptoms. In addition, the committee wanted more mobile screening campaigns to be carried out to ensure that all socio-economic groups are guaranteed equal access to cancer screening. MEPs also drew attention to the important role that cancer registries play in monitoring the impact of screening on the population. The committee included a number of new points In the proposal's recommendations to the Member States: - appropriate psychological support and after-care should be provided for those with a positive screening test; - appropriate tests should be available to all workers exposed to mutagenic and carcinogenic substances; - exchanges of experience among Member States should be facilitated through European networks; - a system of multiphase screening should be introduced to carry out in a single session all the tests envisaged for the age-group specified in the Recommendation. It also introduced new recommendations to the Commission: - promoting information campaigns designed to help raise awareness and public understanding about the benefits and risks that cancer screening offers in terms of early detection of cancer; - encouraging Member States to support European research on cancer screening including development of new guidelines and updating of existing guidelines for cancer screening. Lastly, MEPs wanted the proposal to include a reference to promising new screening tests currently being developed, including: mammography screening for women aged 40-49; improved Faecal Occult Blood Testing (FOBT) for colorectal cancer; flexible recto-sigmoïdoscopy or colonoscopy for colorectal cancer; testing for high-risk HPV infection for cervical cancer; improved methods for the preparation or interpretation of cervical specimens; and prostate-specific antigen testing for prostate cancer.