Breast cancer in the European Union

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The committee adopted the own-initiative report by Karin JÖNS (PES, D) on breast cancer in the EU, which called for the fight against breast cancer to be made a priority of health policy. MEPs believed that prevention, screening, diagnosis, treatment and aftercare must be improved everywhere in the EU and also urged the future Member States to make greater efforts. The report listed a number of facts about breast cancer: around 216,000 women in the EU fell victim to breast cancer in 2000 and, of these, 79,000 died. Breast cancer is the most common cause of death among women aged 35 to 55. The highest rates occur in Europe, especially in western and northern Europe. In western Europe, the risk of contracting cancer is 60% higher than in eastern Europe. The committee said that the breast cancer mortality rate must be reduced by 25% by 2008, and called on the Member States to offer, to all women aged from 50 to at least 69, a mammography every two years based on European guidelines. At present only eight of the fifteen Member States have a nation-wide screening programme. These programmes should be required to meet certain quality standards: each mammogram must be read independently by two radiologists; the image quality and radiation doses of the equipment must be monitored regularly. Every women who is a victim of breast cancer should be entitled to treatment by a multidisciplinary team. The EU Member States should set up networks of certified multidisciplinary breast centres, where each team would be made up of experienced surgeons, radiologists, oncologists, pathologists, nurses and radiographers who specialise in breast disease. Physicians and paramedical personnel should regularly attend further training courses and patients should be entitled to onco-psychological counselling and to physiotherapy services, as well as social services. MEPs welcomed the allocation of EUR 400 million for cancer research under the 6th framework research programme and called for further research into the relationship between breast cancer and potential risk factors such as tobacco, hormones and life-style (body weight, physical activity). They believed women should be informed of the results of a clinical examination and of a screening examination within five working days and receive treatment within four weeks of the diagnosis. Legislation should be adopted on patients' rights, in particular to ensure they receive understandable information during and after treatment and can lodge complaints. In addition, patients' organisations should be more closely involved than at present in decisions on health policy. The Commission was urged to present a proposal for a recommendation on mammography and to organise in late 2003, in conjunction with the Italian Presidency, a conference to review the results of the Europe against Cancer programme, with a view to the new action programme for public health (2003-2008).