Basic information

2018/2782(RSP) RSP - Resolutions on topical subjects	Procedure completed
Resolution on policy challenges and strategies against women's cancers and related comorbidities **Subject** 4.10.09 Women condition and rights 4.20.01 Medicine, diseases	

Key players

European Parliament	**Committee responsible**	**Rapporteur**	**Appointed**
	FEMM Women's Rights and Gender Equality	AIUTO Daniela (EFDD)	26/09/2018
		Shadow rapporteur PETIR Marijana (PPE) BORZAN Biljana (S&D) VALLINA Ángela (GUE/NGL)	
European Commission	**Commission DG**	**Commissioner**	
	Health and Food Safety	ANDRIUKAITIS Vytenis Povilas	

Key events

Date	Event	Reference	Summary
12/02/2019	Debate in Parliament		
13/02/2019	Decision by Parliament	T8-0112/2019	Summary
13/02/2019	Results of vote in Parliament		
13/02/2019	End of procedure in Parliament		

Technical information

Procedure reference	2018/2782(RSP)
Procedure type	RSP - Resolutions on topical subjects
Procedure subtype	Debate or resolution on oral question/interpellation

Legal basis	Rules of Procedure EP 142-p5
Stage reached in procedure	Procedure completed
Committee dossier	FEMM/8/13865

Documentation gateway

European Parliament

Document type	Committee	Reference	Date	Summary
Motion for a resolution		B8-0097/2019	11/02/2019	
Text adopted by Parliament, single reading		T8-0112/2019	13/02/2019	Summary

European Commission

Document type	Reference	Date	Summary
Commission response to text adopted in plenary	SP(2019)327	17/07/2019	

Resolution on policy challenges and strategies against women's cancers and related comorbidities

2018/2782(RSP) - 13/02/2019 - Text adopted by Parliament, single reading

The European Parliament adopted a resolution tabled by the Committee on Women's Rights and Gender Equality on policy challenges and strategies against women's cancers and related comorbidities.

Members noted that one in three Europeans develops cancer during his or her lifetime and every year around 1.3 million people die of cancer in the EU. Breast cancer is the most common fatal cancer among women in the EU (16%), followed by lung, colorectal and pancreatic cancers, while prostate and lung cancers remain the most common among men. Whilst cancer and other related comorbidities hit both women and men, the types of cancer specific to each sex and approaches to diagnostics and prevention differing for women and men, which indicates the need there is a need for a targeted policy. Members noted that data show that up to half of all cancer deaths could be prevented if the cancer is detected on time and adequately treated. However, the EU continues to be characterised by many significant disparities both within and between Member States: in private and public settings, in rural and urban areas, in regions and cities, and even in hospitals in the same city, when it comes to the quality of the treatment provided.

Parliament therefore invited the Commission and Member States to put in place a ***comprehensive EU strategy and evidence-based, cost-effective policies*** against cancer and related comorbidities. These would take into account the particular needs of women and men by collecting accurate and comprehensive cancer incidence/survival data disaggregated by sex in order to ensure that specific actions are targeted at cancer patients, while undertaking research, initiating preventive action against particular types of cancer, and providing access to accurate information, screening, diagnosis, monitoring, treatment and post-therapy support in order to guarantee medical healthcare.

Stressing that, while responsibility for organising healthcare systems with the individual Member States, cooperation at European level, together with the efficient use of EU funds, can contribute to the development of an effective EU strategy against cancer and related comorbidities. Accordingly, the Commission was asked to serve as a platform for the exchange of best practices among the Member States with regard to cancer care models and standards for cancer programmes in order to create synergies in addressing common challenges.

Parliament called on the Commission to:

- step up its efforts to improve EU-wide coordination within the field of women's cancer research which is very fragmented and diverse across the EU; make better use of the Innovative Partnership for Action Against Cancer (iPAAC) in order to achieve greater coordination, especially regarding ovarian cancer;

- establish awareness campaigns on gender-specific cancers that disproportionally affect women and on how to prevent cancer, providing information about the modifiable lifestyle factors for prevention, such as changes in diet, alcohol consumption and exercise;

- prioritise action to close the gap between Central and Eastern Europe and the European average regarding the incidence and mortality of ovarian and cervical cancers by removing structural inequalities between countries through the organisation of effective and cost-effective cancer-screening services;

- take decisive action to minimise the exposure of women and men to carcinogens, substances that are toxic to reproduction and endocrine disruptors;

- take action to fully support the WHO strategy on eliminating cervical cancer.

Member States were invited to:

- collaborate on cancer prevention by fully implementing the European Code Against Cancer;

- initiate information and awareness-raising campaigns at secondary schools on human papillomavirus (HPV) with the aim of informing girls and young women about this infection;

- promote the establishment of up-to-date centres at which specialised psychological help is offered to oncological patients by qualified intermediate care technicians, psychologists and other relevant medical personnel;

- strengthen the development of community care in order to encompass a wider range of services needed by cancer survivors and people with chronic conditions;

- improve access to timely screening through more effective funding and greater resources, and to initiate awareness-raising campaigns encouraging all groups at risk to take advantage of early medical check-ups;

- make use of EU funds, such as the European Structural and Cohesion Funds and European Investment Bank instruments, among others, in order to create quality-assured screening, prevention and treatment centres that are easily accessible for all patients.

Lastly, Parliament called on the Commission and Member States to fully implement the existing legal framework on the use of high-risk medical devices and their effect on women’s health, and further develop measures to guarantee the safety of breast implants, stating that an in-depth assessment of the risks associated with such implants is urgently required.