



# Briefing| EC - Ensuring equal access to all: Cancer in Women - Europe's Beating Cancer Plan

Dods - Debate Summary

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Subject: Ensuring equal access to all: Cancer in Women - Europe's Beating Cancer Plan

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Documents: [Agenda](#)

*On February 2, the European Commission organised a hybrid event on Cancer in Women and Europe's Beating Cancer Plan. Several high-level representatives from the European Commission provided an update on the actions of the Plan and presented the launch of the joint action on HPV vaccination and the cancer inequalities registry. Stakeholder representatives including cancer survivors joined the discussion to highlight the importance of equal access to cancer screening, diagnosis, treatment and care for women across Europe. Speakers likewise drew attention to the role of prevention, including the need for information campaigns and further action related to obesity and healthy lifestyles. Please find below a summary of the event.*

### Welcome and opening remarks

**Ursula von der Leyen, President of the European Commission (video message)**, highlighted elements of Europe's Beating Cancer Plan, referring firstly to the EU Network of Comprehensive Cancer Centres which seeks to enhance care and patient mobility across the EU, especially for people with rare cancers. She said that access to high-quality care was even more of a priority today due to the delays caused by the pandemic. Up to 1 million cancer cases could currently be undiagnosed in Europe due to millions of delayed screening tests and up to 1 in 5 patients are not receiving the treatment they need, she stated.

The President stressed that they were working hard with the member states to end the backlogs and double down on prevention. As regards cervical cancer, she announced the plan to vaccinate against HPV at least 90% of the EU target population of girls as well as significantly increase the vaccination of boys by 2030. In addition, she highlighted the cancer inequalities registry which will help to identify disparities between member states and regions so that they can better target their support. The Commission has launched the first stage of the registry, the data tool, and by the end of the year they will publish the first country performance reports, she added.

**Ic6 T6th, Cervical cancer survivor and past Co-Chair of the European Network of Gynaecological Cancer Advocacy Groups**, shared her personal story of surviving cervical cancer. After a lengthy process of getting the right diagnosis and treatment, she said that she was lucky to have recovered and that her mission was now to put an end to HPV and cervical cancer. Everyone should get the treatment they need to survive and live a good quality of life, she stressed. She emphasised the importance of ensuring that all

women had equal chances in terms of accessing screening, early diagnosis, and treatment. She also called for action in setting up national cancer plans.

**Christiane Amanpour, CNN Chief International Correspondent and advocate for early cancer detection** shared her personal story of surviving ovarian cancer. She said that women's cancers were historically the forgotten ones and this was particularly the case for ovarian cancer. This cancer is often misdiagnosed and women tend not to be taken as seriously as men when they present their concerns to doctors, she stressed. Too many times ovarian cancer is not diagnosed until the late stages, she added. She called for more focus on early diagnosis and information campaigns.

**Stella Kyriakides, European Commissioner for Health and Food Safety** stressed the Commission's commitment to deliver on Europe's Beating Cancer Plan in order to improve outcomes for patients. She provided an update on various actions under the plan, including the work on updating the European Code against Cancer and the Recommendation on cancer screening. Please see [here](#) for the Commissioner's full remarks.

### **European Cooperation for Better Prevention and Treatment**

**Tanja Spanic, President of Europa Donna - The European Breast Cancer Coalition** stressed that breast cancer was a major public health threat to women in Europe. She pointed out that 1 in 7 women had chances of developing cancer in their lifetime. Despite all the progress that had been achieved, Ms Spanic stated that there were still too many deaths. She explained that their coalition worked to raise awareness of breast cancer and press for improvement in appropriate screening and increased funding for research. She expressed regret about the significant difference in cancer services between EU countries and also within some countries, pointing out inequalities in access to genomic and genetic testing and other diagnostic techniques. Scientists and clinicians are faced with challenges in obtaining funding for clinical trials, she added. She concluded her remarks by stressing that early detection was crucial for saving lives.

**Prof Andreas Charalambous, President of the European Cancer Organisation** highlighted the clear evidence that HPV vaccination was a crucial element in the prevention of cervical cancer. He welcomed the focus on this in the Plan, also suggesting that the valuable work by the ECDC concerning coronavirus vaccination monitoring could be replicated for HPV vaccination. He also underlined the importance of education and the fight against misinformation around vaccines, calling for persistent and targeted health information campaigns.

### **The Building Blocks of Europe's Beating Cancer Plan (Panel discussion)**

**Prof Nicole Concin, President of the European Society of Gynaecological Oncology** stated that the pandemic was having an impact on cancer care on a daily basis. She explained that it was a daily balancing act trying to deliver the best medical services to patients while faced with limited resources and capacities geared towards the direct care of patients with coronavirus. The need to ensure the safety of cancer patients at risk due to weakened immune systems is also vital, she said.

**Dr Alberto Costa, Special Adviser for EU policy on cancer** highlighted the progress that had been made with the Plan despite the impacts of the pandemic. He wished to highlight the particular challenges faced by survivors, especially in relation to the right to be forgotten and their access to finance and credit. He encouraged people to share their personal experiences and ideas on the future of Europe platform.

**Prof Charalambous** said that an admirable part of the Plan was its focus on the issue of inequalities. He thought that the EU Network linking National Comprehensive Cancer Centres was the most effective model for delivering multi-disciplinary treatment and care. He also hoped that the cancer inequalities register would help them to pinpoint and solve acute problems. Access to care is not just about medicines but also access to innovative treatment modalities including surgeries, he added. He said that they also needed to address workforce shortages, especially for oncology pharmacists and cancer nurses.

**Prof Concin** explained that the predominant focus on young girls for HPV vaccination was primarily a question of resources. She said that it also made sense to vaccinate boys as they could transmit HPV and

also develop penile and anal cancers. Some countries have the resources to roll out vaccination of both girls and boys and Australia is a notable example, she added. She said that the focus in the Plan on supporting member states to greatly increase their vaccination rates was highly important and appreciated.

**Ms Spanic** remarked that in Slovenia HPV vaccination was available for both girls and boys and once a year there was also the offer of late vaccination free of charge for students and adults. Continuing, she stressed that evidence-based screening programmes were very important and also noted the valuable role of the knowledge centre on cancer. Asked about the challenges faced by women with disabilities in getting screening, she said that this was an important and commonly neglected topic which should be addressed, including the matter of specialist care nurses.

**Prof Charalambous** felt that the Plan did a good job on picking up on the psychosocial needs of children and young people. He believed the EU Network of Youth Cancer Survivors could have excellent potential in the long-run. He explained that his organisation had been working with Youth Cancer Europe in a co-design approach to propose a smart card application which could help improve long-term follow-up care for survivors.

**Prof Concin** highlighted the fact that cancer services were organised very differently across EU countries, which underlined the need to update the Council's recommendation on cancer screening and make sure that all recommendations followed the latest available scientific evidence.

**Dr Costa** highlighted evidence that simple measures aimed at tackling obesity such as dietary changes could help to cut thousands of cancer cases. He said that Europe should continue its efforts in this field.

**Commissioner Kyriakides** felt that the debate showed how they were engaging with all stakeholders in order to make a difference. On obesity, she said that they were working on the European Code against Cancer to be able to give the right messages to citizens and she also highlighted the healthy lifestyles for all initiative. Lastly, she referred to the implementation roadmap for the Plan which would help to ensure a high level of accountability.

### **Equal Access to Cancer Care in Europe - the way forward**

**Dr Olivier Véran, French Minister of Solidarity and Health (video message)** stressed that the Beating Cancer Plan was the cornerstone of a new European approach towards cancer prevention, diagnosis, treatment and care. He underlined the French Presidency's commitment to assist the European Commission in furthering the implementation of the Plan. He welcomed the Plan's focus on prevention, including the actions related to tobacco control, taxation and advertising. He stressed the critical role that prevention and early detection had in fighting all forms of cancer-related inequalities. He added that the resilience of health systems also depended on their ability to adapt to new technologies. He said that the Presidency was looking forward to the Commission's proposal on the European Health Data Space. The development of quality interoperable data will help with research, he stated.

**MEP Veronique Trillet-Lenoir (RE, FR) Rapporteur of the Special Committee on the fight against cancer (BECA)**, stressed that the BECA Committee had chosen the issue of health inequalities as the main theme of its report. She pointed out that the survival rates from cancer across the EU member states could differ by up to as much as 25%. She welcomed the inequalities registry as an important action to collect data on and better address national differences. Furthermore, she emphasised the importance of access to innovative treatments and medicine, particularly for rare cancers. She went on to underline the inequalities and injustice faced by cancer survivors in returning to a normal life, calling for implementation of the right to be forgotten across all EU countries. In this regard, she likewise called for more psychological support and more attention to problems faced by women survivors in the labour market and also in terms of infertility.

### **Closing words**

**Margaritis Schinas, European Commission Vice-President for Promoting our European Way of Life** insisted that the fight against cancer remained a major political priority, particularly in light of the disruption caused by the pandemic. He repeated the calls for more and better screening of women's cancers. Early detection can increase treatment options and save many lives, he said. He stressed that inequalities in access to cancer screening, diagnosis, treatment and care were unacceptable. He called for close collaboration, including between patient advocates and leading oncology experts, to help make the actions of Europe's Beating Cancer Plan a reality.

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