

MEPs Against Cancer

The MEPs Against Cancer (MAC) is the only cancer focused interest group at the European Parliament. Since 2005, MAC MEPs work together in order to improve cancer control and prevention in Europe, in the belief that European cooperation adds value to Member State actions.

MEPs Against Cancer receive secretarial support from the Association of European Cancer Leagues (ECL), a Brussels-based non-profit organisation representing national and regional cancer societies in Europe.









BEATING CANCER: MISSION POSSIBLE

TOWARDS EFFECTIVE CANCER CONTROL IN EUROPE

Foreword

With more than 3.7 million new cancer cases and 1.9 million deaths each year, Europe accounts for 23.4% of cancer cases and 20.3% of cancer deaths, globally. This is despite Europe making up only 9.0% of global population. Cancer will remain one of the main challenges European citizens will face in the future, therefore, it is of utmost importance for both national and European policy-makers to act towards the implementation of stronger cancer control and contributing to the well-being of all Europeans.

On 23-26 May 2019, EU citizens will vote in the European Elections. In this manifesto, members of the MEPs Against Cancer interest group declare their dedication to continue working together towards greater attention to cancer prevention and early diagnosis, tackling inequalities in Europe, particularly in regards to access to high quality treatments and care, and improving the lives of cancer patients, survivors and family caregivers.

European Union shall fulfill its potential to become a global leader in the fight against cancer.

I. PREVENTION AS A KEY TO SUSTAINABLE CANCER CONTROL

The WHO International Agency for Cancer Research (IARC) estimates that up to 50% of cancer deaths in Europe could be prevented if current knowledge about cancer prevention was put into practice. Yet, despite longstanding awareness about its fundamental role, achieving effective cancer prevention remains elusive for even those most well-resourced countries, with large differences in the cancer burden within and between Member States.

This disparity is influenced by a wide variety of factors ranging from differences in implementation of cancer prevention and screening programmes, to exposure to various risk factors, and promotion of healthy lifestyle habits. Promoting health and cancer prevention are proven cost-effective measures to identify cancer cases in a timely fashion and to reduce both the risk of cancer and economic burden on national healthcare budgets. The European Union has a potential to lead the global offensive against cancer, thus a renewed political commitment to prioritise prevention is required.

In the 2019-2024 legislature, MEPs Against Cancer aim to:

Address modifiable risk factors at the individual and community level by:

- Using fiscal policies and marketing controls to influence demand, access and affordability of tobacco, alcohol and foods and drinks high in saturated fats, trans fats, salt and sugar;
- Harnessing the European Structural and Investment Funds (ESIF) to support regional and local authorities to invest and maintain primary prevention activities at a community level in a long-term perspective.

Promote access to quality assured cancer screening and early detection services, calling for:

- Decreasing the gap in cancer incidence and mortality between Eastern and Western Europe, prioritising cervical cancer by joining forces with the WHO to implement the global call to action to eliminate cervical cancer;
- Updating the 2003 EU Council recommendations on cancer screening, providing support for cancer screening experts in Europe to produce roadmaps for adapting the cancer screening guidelines for Member States and regions with limited resources.

Take action to reduce harmful occupational and environmental exposures, by:

- Taking measures towards supporting Member States in meeting WHO Global Air Quality guidelines to enhance the health and safety of its citizens;
- Tackling exposure to carcinogen, mutagen and reprotoxic (CMR) substances in both workplaces and the wider population;
- Setting investment priorities in health adaptation to climate change and boosting health surveillance to track progress resulting from climate change mitigation.

In all policies, the EU must prioritise measures that improve health and apply to all populations, particularly those who are excluded or vulnerable, especially women, children and refugees.

II. BEATING CANCER WITH HIGH QUALITY TREATMENTS

Thanks to new diagnostic tools and treatments such as biological antibody medicines, many cancer cases today can be diagnosed earlier, treated more effectively or even cured altogether. Although there has been substantial progress, in many populations and areas the progress has not kept up pace. In Europe, there are substantial differences in access to new cancer treatments and in waiting times for new medicines.

Studies have also shown that not all new expensive medicines bring added benefit to patients over existing treatments. Given the large (and growing) number of cancer patients and survivors, focusing on their quality-of-life is fundamental. Clinical and translational research are the backbone in establishing scientific advances. However, implementation of its discoveries in the clinical setting in order to improve cancer care in the real world remains a challenge. Moreover, commercially driven research often focuses on safe return on investment (such as breast cancer) rather than on areas of unmet medical need (such as pancreatic cancer).

MAC MEPs are determined to work together on tackling these disparities, aiming for:

Access to high quality cancer treatments for all patients in Europe, by:

- Encouraging cooperation in: (i) horizon scanning for emerging medical technologies to assess budgetary impact of new key treatments; (ii) high quality European health technology assessment (HTA) to identify high value technologies (medicines, medical devices and diagnostic tools) which should be given priority access to patients; and (iii) joint procurement initiatives to increase governments' bargaining power in negotiations with the pharmaceutical industry.
- Ensuring regulatory agencies demand a high standard of evidence for market approval of cancer treatments and avoid misuse (e.g., of the orphan market protection or accelerated approval schemes), by following their guidelines.
- Calling for increased transparency in pharmaceutical system and a universal definition for the fair price of treatments, which is both sustainable for European health systems and profitable enough to ensure innovation.

Efficiency in cancer research, by:

- Deepening cooperation in cancer research in Europe (including EEA countries and the UK).
- Increasing public investment in cancer research, driven by medical need; attaching prerequisites to public funding, ensuring medicines resulting from publicly funded research are available at an affordable and fair price; investing in re-purposing research of off-patent medicines which can serve as cheap cancer treatments.
- Supporting open science; making research results of all clinical trials publicly available.
- Making comparative trials obligatory, where appropriate.
- Collecting data in a post-launch phase and re-assessing treatments once new data is available to get a clear understanding of added value in the real-life setting.
- Standardisation of nationally collected data to ensure interoperability of cancer registries, to gain better understanding of disparities in Europe.
- Enhancing the use of the European Reference Networks (ERN) for rare oncological disorders.

III. IMPROVING CARE AND INVOLVING PATIENTS IN HEALTH POLICY DECISIONS

There are around 10 million people with a history of cancer in Europe. With the current increasing survival rate, cancer survivors will begin to make a significant proportion of the population in the future. While it is encouraging that more people survive cancer than ever before, this presents national health systems in the EU with a new and growing challenge. Life after cancer treatment does not necessarily mean living well, as survivors may experience many side-effects and psychosocial issues which heavily affect their quality of life and reintegration in social and professional life.

Patient empowerment and patient-centeredness are key to high quality of care. Moreover, studies showed that patient empowerment not only improves care practice and health outcomes, but can also reduce costs. Patient voice shall be appropriately represented in the decision-making process related to national and European health policies.

MEPs Against Cancer aim to support patients, survivors and their caregivers, by:

- Integrating systematic needs assessment after cancer treatment and survivorship care planning as part of the care pathway for cancer patients.
- Working towards equal access to rehabilitation, psychosocial, and palliative care services.
- Advancing integration of psychosocial care for cancer patients and their family caregivers.
- Supporting legislation protecting employees in their return to work and providing security for cancer patients and family caregivers at the work place.
- Working with national governments toward access to insurance and financial services for cancer survivors, shaping national policies and implementing best practices such as the *right to be forgotten*.
- Increasing patient participation in shaping health policies and decisions, including health technology assessment (HTA), clinical trials design, development of e-health tools etc.
- Ensuring patients receive information about trials that may be relevant for them, in their own country and abroad and they can access them smoothly.
- Collecting patient reported outcomes and experience measures (PROMs/PREMs) in clinical trials and including quality of life indicators as primary endpoints together with overall survival (OS); necessary for the marketing authorisation and assessing added value of the technology.
- Supporting European research to obtain reliable information on costs, safety and effectiveness of complementary and alternative medicine (CAM), proving evidence-based information for patients and for national authorities to enable integration of CAM into their health services.

Disclaimer

This manifesto represents views of MEPs Against Cancer as a group. Some actions and opinions may not reflect the views of the individual Members of the European Parliament, nor the views of different political parties.



