

United Against Cancer: Forging New Frontiers

European Cancer Summit Report

20–21 November 2024 Brussels and Online

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Foreword

The European Cancer Summit 2024 brought together leaders, advocates, policymakers, and healthcare professionals from across Europe and beyond with a shared mission: to drive progress, innovation, and collaboration in the fight against cancer. In a time of both unprecedented challenges and remarkable advancements, this year's Summit reaffirmed the power of collective action in achieving transformative change for patients, survivors, and families.

The Summit addressed key themes shaping the cancer care landscape today, from tackling inequalities and supporting the oncology workforce, to harnessing digital health and Al, and eliminating vaccine-preventable cancers. Each session underscored not only the successes achieved but also the work that lies ahead. As this report highlights, progress in cancer care requires more than technological or scientific breakthroughs—it demands systemic change, political will, and a steadfast focus on improving patient outcomes and quality of life.

The voices heard throughout the Summit-patients, advocates, policymakers, and experts—are united in their commitment to a future where every individual affected by cancer receives equitable, high-quality care. The importance of survivorship, the need for comprehensive support for metastatic patients, and the role of collaboration in eliminating preventable cancers were recurring themes that cannot be ignored. This report reflects the key outcomes, insights, and recommendations that emerged from the Summit. It serves as both a record of the progress achieved and a call to action for the cancer community, policymakers, and society at large. Together, we must ensure that the momentum generated here translates into meaningful improvements in prevention, diagnosis, treatment, and quality of life for all patients.

On behalf of the European Cancer Organisation, I extend my deepest gratitude to all those who contributed to the Summit and to this report. By working together, we can deliver a brighter future in the fight against cancer.



Csaba Dégi

President of the European Cancer Organisation



Isabel Rubio

ECO President-Elect & Co-Chair of the ECO's Prevention, Early Detection and Screening Network



Gilliosa Spurrier-Bernard

Co-Chair of ECO's Patient Advisory Committee and Patient Advocate, Melanoma Patients Network Europe

Save the Date: The next European Cancer Summit takes place on 19 & 20 November 2025



United Against Cancer Inequalities: Forging Fair Cancer Outcomes for All

With co-chairs Nicolò Battisti and Sarah Collen, including speakers:

- Veronika Ostrihonova MEP, Member, Committee on Civil Liberties, Justice and Home Affairs
- **Claudia Allemani,** Professor of Global Public Health, Cancer Survival Group, London School of Hygiene and Tropical Medicine
- Alan White, Professor of Men's Health, Leeds Beckett University
- Paola Anna Erba, President-Elect, European Association of Nuclear Medicine
- Nela Hasic, President, Think Pink Europe
- Andrew Whitehead, Vice President, Head of Health Equity, BMS

Cancer inequalities remain one of the most pressing challenges in healthcare across Europe, reflecting disparities in prevention, diagnosis, treatment, and outcomes among diverse demographic groups and geographic regions. This session of the European Cancer Organisation's Summit brought together leading experts and policymakers to explore innovative solutions and highlight actionable steps towards achieving fairer cancer outcomes for all.

Mapping Cancer Inequalities: The Role of Data

The session opened with a discussion on the European Cancer Pulse, an innovative data visualisation tool designed to shed light on inequalities in cancer care. By presenting disparities in access to screenings, treatment availability, and patient outcomes across Europe, the Pulse provides a comprehensive, evidencebased foundation for targeted policy reforms. The data it aggregates not only highlights regional inequalities but also underscores the socio-economic and demographic factors that exacerbate these gaps.



Nicolò Matteo Luca Battisti Co-Chair, Inequalities Network & ECO Board Member

'Addressing cancer inequalities requires not just identifying disparities but committing to systemic reforms that ensure no patient is left behind.' One critical insight from the Pulse is the persistent underutilisation of cancer screenings, particularly among underserved populations. For example, breast and cervical cancer screening rates vary significantly between urban and rural areas and among different socio-economic groups. In some regions, limited healthcare infrastructure makes it challenging for individuals to access preventive services. In others, cultural barriers or misinformation deter individuals from seeking care, even when it is available. These challenges are further compounded by fragmented data collection systems, which often fail to capture the full scope of inequalities, particularly those affecting minority ethnic groups.

The European Cancer Pulse not only highlights disparities but also offers policymakers actionable insights for addressing these gaps. Harmonising data-sharing practices across Europe is crucial to creating an integrated framework for tackling inequalities. Legal barriers, such as GDPR misinterpretations, must be clarified to enable data-driven strategies while ensuring privacy and ethical standards. This approach could lead to more effective cancer care policies, prioritising regions and populations most in need.

Addressing Gender Disparities in Cancer Care

Gender inequities in cancer care were a significant focus of the session, drawing on insights from the Women and Cancer: More than 12 Million Reasons for Action report. This comprehensive policy action paper highlights the unique challenges faced



Panelists of the 'United Against Cancer Inequalities: Forging Fair Cancer Outcomes for All' session

by women across the cancer care continuum, including delayed diagnoses, unequal access to treatment, and under-representation in clinical trials.

Women often face a dual burden—managing caregiving responsibilities while navigating their own healthcare needs. Economic barriers, such as the high cost of screenings and treatments, disproportionately impact women in lowerincome groups. Additionally, cultural stigmas around cancers like breast and cervical cancer discourage timely care, especially in conservative or underserved communities. Women in lower socio-economic groups or rural areas often face greater delays in diagnosis and limited access to advanced treatment options, compounding their health risks.

A key recommendation from the report is the expansion of gender-sensitive policies to address these barriers. This includes implementing targeted educational campaigns to raise awareness of cancer risks and prevention strategies. Outreach programmes in rural areas, leveraging mobile health units, have demonstrated significant success in bringing services directly to communities with limited access. These initiatives must be supported by stronger public health messaging that challenges cultural taboos and empowers women to seek care proactively.

Another recommendation is to ensure equitable representation of women in clinical trials. Historically, women—particularly those from minority or vulnerable groups—have been underrepresented in research, resulting in gaps in understanding gender-specific responses to treatments. Addressing this imbalance requires systemic changes, such as mandating diversity targets in clinical research and increasing funding for studies focused on women's health. Additionally, creating incentives for pharmaceutical companies to recruit diverse populations can further enhance the representation of women in trials.

Sarah Collen

Co-Chair, Inequalities Network





'Women face unique challenges in cancer care—not only as patients but as caregivers and healthcare professionals. Gender-sensitive policies are critical to bridging these gaps.'

The discussion also touched on men's health, with an emphasis on prostate cancer. Late diagnoses and limited awareness remain significant challenges, highlighting the need for targeted awareness campaigns and improved surveillance programmes. By addressing gender-specific barriers for both men and women, stakeholders can adopt a more inclusive approach to cancer care.

LGBTIQ Communities: Closing the Gaps

The LGBTIQ Workstream, another critical initiative highlighted at the Summit, aims to address systemic barriers that prevent sexual and gender minorities from accessing equitable cancer care. The Cancer Care for the LGBTIQ Community: Addressing Inequalities report revealed alarming disparities, including lower rates of participation in cancer screenings and higher levels of discrimination within healthcare settings. One of the report's key findings is the significant under-representation of LGBTIQ individuals in preventive healthcare services. Transgender individuals, for instance, often face challenges related to medical records not aligning with their gender identity, which can result in delays or denials of care. Additionally, stigma and discrimination in healthcare settings deter many LGBTIQ individuals from seeking regular screenings or follow-up care. For LGBTIQ individuals living in rural or conservative areas, these barriers are often compounded by a lack of access to culturally competent healthcare providers.

The LGBTIQ survey launched at the Summit aims to fill critical gaps in data and identify specific barriers to care. Early findings highlight the importance of culturally competent training for healthcare providers to reduce unconscious bias and improve the quality of care. This includes integrating LGBTIQ sensitivity training into medical education curricula and establishing clear protocols for respectful and inclusive patient interactions.

Policy recommendations from the Workstream emphasise integrating inclusive practices into national cancer strategies. This includes adopting anti-discrimination policies within healthcare systems, promoting the use of gender-neutral language in patient interactions, and ensuring that healthcare facilities are safe and welcoming spaces for all individuals. Furthermore, public health campaigns specifically targeting the LGBTIQ community can help raise awareness about the importance of preventive screenings and empower individuals to seek care without fear of judgement.



Nicolò Matteo Luca Battisti, Co-Chair, Inequalities Network & ECO Board Member

Panellists stressed the importance of collaboration between healthcare providers, advocacy groups, and policymakers to create a more equitable healthcare environment. Ensuring that LGBTIQ individuals are included in cancer research and clinical trials is another critical step, as it will lead to more tailored treatments and better health outcomes for this underserved population.

Bridging Geographic Disparities

Geographic inequalities in cancer care remain a critical issue, particularly for non-EU countries. Regions such as Bosnia and Herzegovina face significant barriers to accessing preventive measures like HPV vaccinations and routine cancer screenings. These disparities are exacerbated by limited healthcare infrastructure, economic constraints, and political instability.

Nela Hasic President, Think Pink Europe



'In non-EU countries, cancer patients often face a double burden: lack of access to treatment and systemic healthcare shortcomings. Collaborative efforts like EU4Health are essential to closing these gaps.'

Speakers highlighted the importance of initiatives like EU4Health in addressing these challenges. Mobile screening units have been particularly effective in reaching remote and rural areas, providing access to care for populations that might otherwise be overlooked. Cross-border partnerships, such as those facilitated by the European Cancer Organisation's Inequalities Network, were also identified as essential for fostering collaboration and sharing best practices.

The session underscored the need for targeted funding to support capacity-building in underserved regions. Investments in training healthcare professionals, improving diagnostic capabilities, and tailoring public health campaigns to local contexts are crucial for reducing disparities. For example, localised education campaigns about HPV prevention and vaccination could significantly improve participation rates in underserved areas.

Additionally, fostering partnerships between EU and non-EU countries can facilitate the transfer of knowledge and resources. Collaborative initiatives that leverage the expertise of well-established healthcare systems could help bridge the gap



Veronika Ostrihonova MEP, Member, Committee on Civil Liberties, Justice and Home Affairs

between regions with varying levels of healthcare development. By prioritising equity in resource allocation, stakeholders can ensure that no population is left behind.

The aftermath of conflicts raises questions about reconstructing cancer care systems. Drawing lessons from past conflicts such as the Balkans wars, the crucial role of healthcare professionals was highlighted. Professionals are often forced to leave conflict-torn regions, and addressing this issue becomes integral to rebuilding effective healthcare systems.

A Call to Action: Collaborative Solutions

The session concluded with a resounding call for greater collaboration among stakeholders. Tackling cancer inequalities requires a multifaceted approach that brings together policymakers, healthcare providers, researchers, and community organisations. The European Cancer Organisation's Focused Topic Networks, including the Inequalities Network and initiatives like the Cancer Inequalities Registry, provide a robust framework for action.

Key recommendations included leveraging existing data to inform policy decisions, fostering inclusive practices within healthcare systems, and ensuring that all patients—regardless of gender, geographic location, or identity—have access to high-quality care. Panellists also highlighted the importance of involving patient advocacy groups in decision-making processes to ensure that policies are responsive to the needs of those most affected by cancer inequalities.

By addressing systemic barriers and championing equity, Europe can take meaningful steps towards reducing the cancer burden for all. The session's discussions provided a clear roadmap for action, emphasising the need for sustained commitment

Claudia Allemani

Professor of Global Public Health, Cancer Survival Group, London School of Hygiene and Tropical Medicine





'Data sharing is the backbone of effective cancer research. Misinterpretation of GDPR should not be a barrier to progress.'

Launching the new ECO LGBTIQ Survey

SUMMIT 2024

european cancer

Data is still missing to inform policy: LGBTIQ cancer inequalities are underexplored in Europe as compared to North America

Launching today a **new pan-European survey** to **understand** and **generate actionable policy insights** on LGBTIQ persons':

- barriers to accessing cancer detection and care
- attitudes and approaches towards cancer care

Interested in supporting the survey? Contact <u>alexandra.eni@europeancancer.org</u>



and collaboration across sectors. Expanding on existing initiatives and exploring innovative solutions will be essential for creating a future where cancer care is truly equitable for everyone.

KEY POINTS FROM THE SESSION

- The European Cancer Pulse is a vital tool for identifying and addressing cancer inequalities across Europe.
- Gender-sensitive policies and initiatives, such as the Women and Cancer report, are crucial for equitable healthcare.
- Data-sharing challenges under GDPR need urgent resolution to support comprehensive cancer research.
- Non-EU countries require focused support to bridge gaps in cancer prevention and care.
- Inclusive clinical trials and diversity in research practices are essential for advancing health equity.

FIND OUT MORE

- Inequalities Network
- European Cancer Pulse
- LGBTIQ Workstream

Delivering a Bright Future in Oncology – The Young Cancer Professionals Session

With co-chairs Nikolina Dodlek and Andreas Charalambous, including speakers:

- András Kulja MEP & MD, Vice-Chair, Committee on the Environment, Public Health and Food Safety & Member, Subcommittee on Public Health
- Fernando Aguirregomezcorta García, Consultant in Pediatric Oncology, Central University Hospital of Asturias
- Maria Inês Clara, Clinical Psychologist and PhD candidate in Health Psychology, University of Coimbra
- Joanna Dodkins, National Prostate Cancer Audit Clinical Research Fellow, The Royal College of Surgeons of England
- Yuqin Liang, Department of Radiation Oncology (Maastro), GROW-Research Institute for Oncology and Reproduction, Maastricht University Medical Centre+

This session, co-chaired by Nikolina Dodlek and Andreas Charalambous, showcased the vitality, innovation, and determination of young cancer professionals across Europe. As the leaders of tomorrow, these professionals brought forward new perspectives and solutions to enhance cancer care and research. The session highlighted three outstanding abstracts, explored the importance of interdisciplinary training through the INTERACT-EUROPE 100 project, and provided insights into the journey of healthcare professionals transitioning into policy and leadership roles.

Young Cancer Professionals Network: Empowering Tomorrow's Leaders

The Young Cancer Professionals (YCP) network plays a pivotal role in empowering early-career oncology professionals. With over 180 active members, the network provides a platform for collaboration, mentorship, and leadership development. As emphasised by co-chair Andreas Charalambous, engaging young professionals is critical in addressing the oncology workforce crisis and ensuring a sustainable future for cancer care.

Through a range of initiatives, the YCP network supports the next generation of oncology leaders. Regular networking events, mentorship opportunities, and educational resources help members build connections and acquire essential skills. The network's focus on fostering an inclusive community ensures that professionals from diverse specialties and backgrounds can collaborate effectively.

Andreas Charalambous Founder & Chair, European Cancer Community Foundation & Past-President, European Cancer Organisation





'Our young cancer professionals are the future of oncology. We must listen to them and learn from their perspectives.'

During the session, attendees learned about upcoming opportunities within the network, including the election of new vice-chairs and steering committee members. These positions not only offer leadership experience but also enable members to influence the network's future direction. Additionally, YCP organises roundtables and workshops on pressing issues in oncology, providing members with a platform to discuss challenges and propose innovative solutions.

Highlighting its impact, Nikolina Dodlek emphasised how the network has grown significantly over the past few years, expanding



Panelists of the 'Delivering a bright future in oncology - our Young Cancer Professionals session' session

its membership and broadening its scope. This growth reflects the increasing recognition of young professionals as essential contributors to the oncology community. As Dodlek noted, empowering young professionals is not only about providing resources but also about creating an environment where their voices are heard and valued.

Young Cancer Professionals Network: Empowering Tomorrow's Leaders



Maria Inês Clara

Clinical Psychologist and PhD candidate in Health Psychology, University of Coimbra



'Digital interventions like OncoSleep demonstrate how technology can break down barriers to care and improve quality of life for cancer survivors.'

The session featured three exemplary abstracts presented by young researchers, each addressing critical gaps in cancer care and proposing innovative solutions.

1. Digital Cognitive-Behavioural Therapy for Insomnia in Cancer Survivors

Maria Inês Clara presented findings from the OncoSleep trial, which assessed the effectiveness of digital cognitive-behavioural therapy for insomnia (CBT-I) in cancer survivors. Insomnia, affecting nearly 50% of survivors, often hinders recovery and quality of life. Clara's study demonstrated significant reductions in insomnia severity and associated symptoms, including anxiety, depression, and fatigue, among participants receiving digital CBT-I. The intervention's accessibility and clinician support highlight its potential for integration into routine cancer care. Clara's findings also underscore the importance of addressing mental health as a critical component of survivorship care.

2. Predicting Radiotherapy Side Effects Using Explainable AI

Yuqin Liang's research on the PRE-ACT project introduced an Al-based model designed to predict radiotherapy side effects in breast cancer patients. By utilising complex imaging and genomic data, the model achieved high predictive accuracy for conditions like arm lymphoedema and skin atrophy. The Al tool also facilitates shared decision-making by providing patients and clinicians with clear, personalised risk assessments. Liang's work underscores the potential of Al to advance personalised oncology care and improve patient outcomes. Furthermore, the study highlights how explainable Al can bridge the

Yuqin Liang

Department of Radiation Oncology (Maastro), GROW-Research Institute for Oncology and Reproduction, Maastricht University Medical Centre+

'Explainable AI is not just about predictions; it's about empowering patients and clinicians to make informed decisions together.'







Joanna Dodkins

National Prostate Cancer Audit Clinical Research Fellow, The Royal College of Surgeons of England



'Quality improvement should be a cornerstone of oncology care, but it requires sustained funding and national coordination to be effective.'

gap between complex technology and practical applications in clinical settings.

3. Driving Quality Improvement in Oncology

Joanna Dodkins presented a systematic review of quality improvement (QI) interventions in surgical, medical, and radiation oncology. Despite the clear benefits of QI initiatives, Dodkins' analysis revealed significant gaps in funding, national coordination, and training. Her findings call for comprehensive, well-supported studies to enhance the quality of existing cancer care services. Dodkins emphasised the need for multi-disciplinary collaboration to address these challenges effectively. Her presentation also shed light on the potential of QI interventions to reduce disparities in care and improve patient outcomes.

Interdisciplinary Training: The INTERACT-EUROPE 100 Project

Interdisciplinary collaboration is at the heart of modern oncology care. The INTERACT-EUROPE 100 project, a flagship initiative of the European Cancer Organisation, exemplifies this principle by fostering cross-specialty training in cancer care. The programme, which aims to reach 100 cancer centres across Europe, provides



Fernando Aguirregomezcorta García, Consultant in Pediatric Oncology, Central University Hospital of Asturias Expert Group, Ministry of Health of Ukraine participants with skills to navigate the complexities of multidisciplinary teams and deliver patientcentred care.

Fernando Aguirregomezcorta, a paediatric oncologist and participant in the INTERACT pilot programme, shared his experiences during the session. He emphasised the importance of breaking down traditional silos between specialties to improve patient outcomes. The project's structured curriculum includes clinical training, online learning, and in-person workshops, offering a comprehensive approach to developing collaborative competencies among cancer professionals.

Bridging the Gap Between Clinical Practice and Policy

András Kulja, a Member of the European Parliament and former surgeon, provided an inspiring perspective on the transition from clinical practice to policy-making. Drawing on his experiences as a healthcare professional and social media campaigner, Kulja emphasised the need for young clinicians to take active roles in shaping healthcare policies. His journey highlights the potential for young cancer professionals to influence systemic change beyond their immediate clinical environments.

Kulja's story underscores the importance of understanding the broader healthcare landscape. He discussed how his experiences as a surgeon informed his approach to policy, particularly in advocating for patient-centred care and resource allocation. His work also highlights the role of effective communication—both with the public and within political systems—in driving meaningful change.

A Call to Action: Strengthening the Pipeline of Oncology Leaders

As the session concluded, speakers and attendees reflected on the need to support young professionals in overcoming challenges

András Kulja MEP & MD

Vice-Chair, Committee on the Environment, Public Health and Food Safety & Member, Subcommittee on Public Health





'The transition from clinical practice to policymaking is challenging but essential to create meaningful change in healthcare systems.' such as funding constraints, training gaps, and workforce shortages. Investments in mentorship, interdisciplinary training, and innovative research are critical to empowering the next generation of oncology leaders. The Young Cancer Professionals network and initiatives like INTERACT-EUROPE 100 exemplify the potential of collaborative, forward-thinking approaches to address these challenges. By fostering a culture of inclusion, innovation, and leadership, the oncology community can build a brighter future for cancer care.

INTERACT

JROPE 100

Inter-Specialty Cancer Training Programme (ISCTP)

Core values:

- Collaboration across oncology specialties;
- Cross-functional skills;
- Personalised care and treatments adapted to individual needs.

2 Training Programmes

One for Trainers and one for Participants built on these values and including: in-person events, clinical training, online learning, self-study and reflection activities.



Co-funded by the European Union

KEY POINTS FROM THE SESSION

- The Young Cancer Professionals network provides critical support and leadership opportunities for early-career oncology professionals.
- Innovative research by young professionals addresses gaps in care, including digital therapies, Al-driven tools, and quality improvement initiatives.
- Interdisciplinary training programmes like INTERACT-EUROPE 100 are essential for fostering collaboration and improving patient-centred care.
- Supporting young professionals through mentorship, funding, and training is key to addressing the oncology workforce crisis.
- Clinicians transitioning into policy roles can drive systemic change to benefit patients and healthcare systems.

FIND OUT MORE

- Young Cancer Professionals
- European Cancer Summit 2024 Selected Abstracts
- INTERACT-EUROPE 100

Going Further on Prevention, Early Detection and Screening

With co-chairs Isabel Rubio and Torsten Blum, including speakers:

- **Tilly Metz MEP**, Vice-Chair, Subcommittee on Public Health & Member, Committee on the Environment, Public Health and Food Safety
- Ulrika Årehed Kågström, President, Union for International Cancer Control (UICC)
- Filippos Filippidis, Chair of the Tobacco Control Committee, European Respiratory Society
- Erik Briers, Member, ECO Patient Advisory Committee & Vice-Chairman, Europa Uomo
- Marcus Höglund, Director, Innovation Scaling Accelerator, MSD
- David Ritchie, Project Officer, Environment and Lifestyle Epidemiology, International Agency for Research on Cancer

The European Cancer Organisation's session on Prevention, Early Detection, and Screening brought together leading policymakers, researchers, and patient advocates to highlight the critical role of these pillars in reducing Europe's cancer burden. Co-chaired by Isabel Rubio and Torsten Blum, the session explored innovative solutions, including the European Cancer Screening Policy Index, advancements in tobacco control, and strategies to overcome barriers to screening access.



The European Cancer Screening Policy Index: A Benchmark for Progress

The launch of the European Cancer Screening Policy Index marked a pivotal moment in Europe's fight against cancer. As a cornerstone of the "Time to Accelerate for Cancer Screening" campaign, the Index provides an evidence-based tool to assess and compare the state of cancer screening policies across EU Member States. By highlighting disparities and benchmarking progress, it serves as a catalyst for actionable policy changes.

Key findings from the Index revealed that only a handful of European countries have fully implemented all the recommended cancer screening programmes, which include breast, cervical, colorectal, prostate, and lung cancer screenings. Countries such as Slovenia, Portugal, and Norway emerged as leaders, showcasing exemplary alignment with EU recommendations. However, challenges persist. The harmonised registration of cancer screening data remains inconsistent, and significant social inequalities in access to screening—based on income, education, and geographic location—continue to undermine equity.

Norbert Couespel, presenting on behalf of ECO, emphasised the need for regular public reporting on screening programme performance. The absence of transparency and standardised benchmarks risks creating a disconnect between policy recommendations and real-world outcomes. To bridge this gap, Couespel stressed



Isabel Rubio, Summit Co-Chair & Prevention, Early Detection and Screening Network Co-Chair



Ulrika Årehed Kågström, President, Union for International Cancer Control (UICC)

that data-driven tools like the Index are essential for identifying gaps, prioritising interventions, and fostering collaboration between countries.

The Index aggregates and evaluates data across four key categories: overarching cancer screening infrastructure, previously recommended programmes (breast, cervical, colorectal), newly recommended programmes (prostate, lung), and social inequalities in access to screening. Scores are calculated for each country based on the availability, implementation, and equity of these programmes. This methodology ensures that the Index not only benchmarks current policies but also provides actionable insights for Member States to improve their systems.

The Index's ability to facilitate cross-country learning has already begun inspiring action. Policymakers from Member States with lower scores are exploring successful models implemented by leading countries, such as Norway's comprehensive data infrastructure and Portugal's community outreach programmes. This sharing of best practices underscores the potential for the Index to drive systemic improvements in cancer screening policies.

Tobacco Control: A Critical Lever for Prevention

Tobacco remains one of the leading preventable causes of cancer, responsible for nearly 300,000 cancer-related deaths annually in Europe. Filippos Filippidis, Chair of the Tobacco Control Committee at the European Respiratory Society, underscored the urgency of stronger tobacco control measures.

While the EU's Beating Cancer Plan sets a goal for a tobacco-free generation by 2040, progress has been slow. Policies such as the revision of the Tobacco Products Directive and the introduction of stricter taxation on novel tobacco products have faced delays. Filippidis called for more

Filippos Filippidis

Chair of the Tobacco Control Committee, European Respiratory Society



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'Effective tobacco control policies are not just preventive measures; they are lifesaving interventions that can significantly reduce cancer incidence.'

decisive action, including comprehensive bans on tobacco advertising and promotion, the expansion of smoke-free environments, and robust enforcement of taxation policies.



Panelists of the 'Going Further on Prevention, Early Detection and Screening' session

He highlighted examples of successful interventions, including increased tobacco taxation in several European countries, which has directly contributed to a decline in smoking rates. Similarly, awareness campaigns targeting younger populations have been instrumental in changing social norms around tobacco use. However, Filippidis emphasised that legislative action must be complemented by communitylevel engagement to sustain momentum.

Overcoming Barriers to Screening Access

Equitable access to cancer screening is essential to achieving the full potential of early detection. The session spotlighted barriers that hinder participation, including geographic disparities, stigma, and socioeconomic inequities. Ulrika Årehed Kågström, President of the Union for International Cancer Control (UICC), shared Sweden's experience in tackling these challenges. Despite high overall participation rates, significant gaps persist among women with lower education levels and immigrants.

Sweden's use of mobile screening units in rural areas has been a game-changer, bringing services directly to underserved communities. These units are equipped to offer screenings for multiple cancer types, reducing logistical challenges for patients. Coupled with multilingual educational campaigns, these efforts have significantly increased participation rates among immigrant populations.

Another innovative approach discussed was the integration of Al-driven tools to optimize screening pathways. Algorithms can identify high-risk populations more effectively, enabling targeted



Ulrika Årehed Kågström President, Union for International Cancer Control (UICC)



'Screening achieves its full potential only when it reaches everyone, regardless of socioeconomic status or geographic location.'

interventions and resource allocation. For example, Al has been used to predict no-show rates for appointments, allowing healthcare providers to adjust scheduling practices and improve efficiency.



Tilly Metz MEP, Vice-Chair, Subcommittee on Public Health & Member, Committee on the Environment, Public Health and Food Safety

The European Cancer Screening Policy Index also highlighted the importance of integrating social equity measures into screening programs. Strategies such as risk-based screening, culturally sensitive outreach, and partnerships with community organizations were identified as effective solutions. These practices not only improve access but also build trust within marginalized communities, ensuring that no one is left behind.

Overcoming Barriers to Screening Access

Advances in technology are revolutionising cancer screening, offering new opportunities for early detection and improved outcomes. Marcus Höglund presented the LungX initiative, a collaborative effort between MSD and Microsoft to identify and activate high-risk individuals for lung cancer to seek care. By leveraging symptom checker technology and targeted awareness campaigns, the programme has successfully reached hard-to-reach populations, including men and individuals from lower socioeconomic backgrounds.

Similarly, new methods such as liquid biopsies and Al-assisted mammography are enhancing the accuracy and efficiency of screening programmes. Al algorithms, for example, have outperformed traditional approaches in detecting breast cancer, potentially reducing workload for radiologists and improving diagnostic confidence. However, panellists emphasised the need for robust implementation research to address challenges related to data standardisation and real-world applicability. The forthcoming fifth edition of the European Code Against Cancer, set for release in 2025, will incorporate these technological advancements. David Ritchie of the International Agency for Research on Cancer (IARC) noted that the updated Code aims to provide actionable guidance for integrating innovation into national cancer prevention strategies. This alignment between research and policy will be critical to maximising the impact of new technologies.

A Call to Action: Scaling Best Practices

The session concluded with a call to scale up best practices in cancer prevention and screening across Europe. Torsten Blum highlighted the importance of collaboration, stating, "Sharing what works is key to achieving equity. From mobile units to risk-based screening, these approaches can and should be adapted to local contexts."

ECO's "Time to Accelerate for Cancer Screening" campaign aims to bridge the gap between

policy recommendations and implementation. By fostering collaboration among Member States, leveraging tools such as the Cancer Screening Policy Index, and addressing inequities head-on, Europe can take significant strides towards reducing the cancer burden.

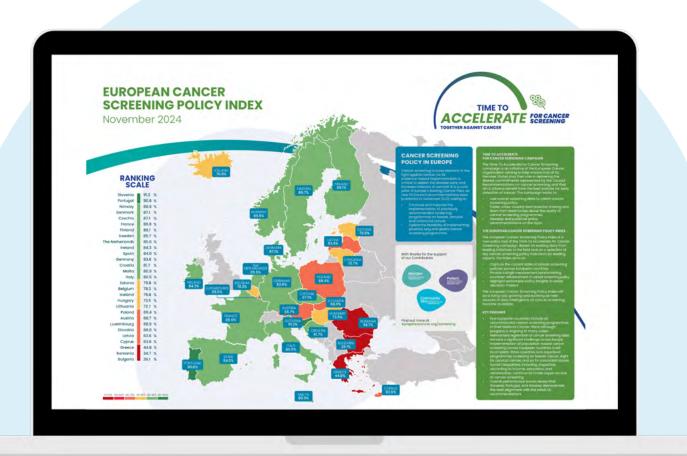
The session also underscored the importance of sustained funding for screening programmes. Investments in training healthcare professionals, expanding technological infrastructure, and conducting public awareness campaigns were identified as key priorities. These measures will not only enhance participation rates but also improve early detection outcomes, ultimately saving lives.

Torsten Blum Co-Chair, Prevention, Early Detection and Screening Network



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'Sharing what works is key to achieving equity. From mobile units to risk-based screening, these approaches can and should be adapted to local contexts.'



Time to Accelerate: ECO Roadmap

Bringing EU Council Recommendations on Cancer Screening to reality

TIME TO

ACCELERATE SCREENING

- Raise awareness of the EU Council recommendations on cancer screening and their content at national level
- Regular public reporting on the **progress towards** implementation of the Council Recommendations on cancer screening
- Utilise, and sustain, **implementation-focused projects at regional, national and international levels** to support countries in achieving the EU Council Recommendations' expanded advice on cancer screening programmes.



https://www.europeancancer.org/manifesto

KEY POINTS FROM THE SESSION

- The European Cancer Screening Policy Index provides a benchmarking tool to evaluate and improve cancer screening policies across Europe.
- Tobacco control policies are the most cost-effective actions to prevent cancer; stricter enforcement and greater transparency are urgently needed.
- Addressing barriers to screening access, including geographic and socioeconomic disparities, is essential for achieving equity.
- Technological innovations, such as AI and liquid biopsies, are transforming screening but require thoughtful implementation to maximise their impact.
- Scaling good practices and fostering collaboration among Member States will be key to advancing Europe's cancer screening agenda.

FIND OUT MORE

- <u>Prevention, Early Detection and Screening Network</u>
- European Cancer Screening Policy Index

Stocktaking on Europe's Beating Cancer Plan: Achievements and Future Challenges

With co-chairs Csaba Dégi and Isabel Rubio, including speakers:

- Stella Kyriakides, EU Commissioner for Health & Food Safety
- Alessandra Moretti MEP, Member, Committee on the Environment, Public Health and Food Safety
- Walter Ricciardi, Chair of the EU Cancer Mission Board
- Matti Aapro, President of SPCC & All.Can, ECO Past President, UICC Board Member
- Ramon Reyes, President, Association of European Cancer Leagues
- Gilliosa Spurrier-Bernard, Co-Chair, ECO Patient Advisory Committee & Summit Co-Chair

Europe's Beating Cancer Plan, launched in 2020, has become a cornerstone of the European Union's commitment to reducing the cancer burden across Member States. This session at the European Cancer Summit 2024 provided a platform for reflection on the plan's progress and achievements under the tenure of Stella Kyriakides, EU Commissioner for Health and Food Safety, and to outline a path forward under new leadership.

Co-chaired by Csaba Dégi and Isabel Rubio, the session brought together policymakers, patient advocates, researchers, and healthcare professionals. Panellists highlighted the progress made in prevention, early detection, care, and survivorship, while candidly addressing areas where action needs to be accelerated. The session emphasised the need to balance past successes with the challenges ahead, particularly as the EU transitions into a new era of leadership.

Reflecting on the Achievements of the Plan

Europe's Beating Cancer Plan has driven significant advancements in cancer prevention, early detection, and care. Among its key achievements is the launch of the European Cancer Screening Policy Index, which has encouraged Member States to expand screening



Panelists of the 'Stocktaking on Europe's Beating Cancer Plan: where have we come from, what have we achieved, what are the next frontiers?' session



Walter Ricciardi Chair of the EU Cancer Mission Board



'We've seen countries adopting new cancer plans or refreshing existing ones, using the EU framework as a foundation.'

programmes. Collaborative efforts have led to the development or revision of national cancer plans in several countries, using the EU framework as a foundation for their strategies. This momentum has set a precedent for how comprehensive health initiatives can unite diverse nations in pursuit of a shared goal.

Under Commissioner Stella Kyriakides' leadership, groundbreaking initiatives such as the European Cancer Information System (ECIS) and the Cancer Survivorship Smart Card were introduced. ECIS has enabled real-time tracking of cancer trends, providing policymakers and researchers with valuable data to guide interventions. The Survivorship Smart Card has transformed posttreatment care by ensuring that survivors receive comprehensive and consistent follow-ups across healthcare systems.

HPV vaccination campaigns, a cornerstone of cancer prevention, also expanded significantly during her tenure. These campaigns have reached unprecedented levels of coverage in several Member States, bringing Europe closer to eliminating HPV-related cancers. Additionally, Member States have adapted the European Cancer Plan's framework to tailor solutions to local challenges, as highlighted by ECO's "Roadmap to 2030" initiative. Reports from more than 20 EU capitals showcased innovative, region-specific strategies, demonstrating the adaptability and impact of the plan.

Strengthening Prevention and Early Detection

Prevention remains a central pillar of the Cancer Plan, with policies addressing tobacco use, alcohol consumption, and unhealthy diets. Reducing exposure to these risk factors not only saves lives but also helps tackle societal inequities linked to health disparities. Efforts to promote healthy lifestyles, combined with legislative measures, have been pivotal in advancing this goal. Despite progress, challenges persist. Harmonising tobacco control policies across Member States remains complex. While some countries have introduced effective measures, such as increased taxation and comprehensive advertising bans, others lag behind, limiting the overall impact. Alcohol-related cancer risks also demand greater attention. Panellists advocated for improved labelling standards and public awareness campaigns to highlight the link between alcohol consumption and cancer, as outlined in Europe's Beating Cancer Plan. They stressed that prevention campaigns should not only inform but also empower individuals to make sustainable changes to their health behaviours.

In terms of early detection, the expansion of cancer screening recommendations to include prostate and lung cancers marks a significant milestone. However, disparities in access remain. While some nations offer robust, inclusive screening programmes, others struggle with limited infrastructure and uneven coverage. Addressing these gaps requires targeted funding, stronger political commitments, and coordinated action to ensure that all citizens benefit from early detection efforts. The introduction of mobile screening units and Al-driven diagnostic tools was highlighted as a practical approach to overcoming these barriers.

Alessandra Moretti MEP Member, Committee on the Environment, Public Health and Food Safety



'Prevention of risk factors is not just about saving lives; it's about reducing societal inequities and ensuring healthier futures for all.'

Fostering Equity in Cancer Care

Equity was a recurring theme throughout the discussion. Despite significant advancements, cancer care remains unevenly distributed across Europe. The establishment of Comprehensive Cancer Centres and the networking of smaller units have helped reduce some disparities, yet significant gaps persist, particularly in rural and underserved areas. Patients in these regions often face logistical challenges, limited access to specialists, and delayed diagnoses. To combat these inequalities, panellists called for greater investment in workforce training, particularly in regions with acute shortages of oncology professionals. Digital health tools, such as telemedicine platforms, were also identified as essential for bridging geographic gaps in care. These platforms enable patients in remote areas to connect with leading specialists, ensuring that distance does not become a barrier to highquality treatment.



Gilliosa Spurrier-Bernard Co-Chair, ECO Patient Advisory Committee & Summit Co-Chair



'Patients in rural and underserved areas continue to face barriers that prevent them from accessing high-quality care.'

The 'Cancer Diagnostic and Treatment for All' initiative was highlighted as a promising approach to democratising access to innovative treatments, including genomics and personalised medicine. Panellists also emphasised the importance of patient navigation systems and community health worker programmes, which help patients navigate complex healthcare systems, ensuring timely access to treatment and reducing dropout rates from care pathways.

A Tribute to Stella Kyriakides' Leadership

As the EU transitions to new leadership, the session served as a tribute to Stella Kyriakides and her unwavering dedication to the cancer community. Csaba Dégi opened the session by



Stella Kyriakides, EU Commissioner for Health & Food Safety

describing Kyriakides as a true champion for patients, highlighting her dual perspective as both a policymaker and a cancer survivor.

In her speech, Commissioner Kyriakides reflected on her tenure and the transformative impact of the Beating Cancer Plan. She acknowledged the challenges of implementing ambitious policies during the COVID-19 pandemic but praised the resilience of the cancer community in driving progress. Key themes from her remarks included the importance of prioritising prevention, addressing inequities in access to care, and fostering innovation through research and technology.

Her remarks were deeply personal, as she recounted her experiences both as a policymaker and a cancer survivor. She emphasised that the fight against cancer is not only about data and policies but also about the human stories behind the statistics. Kyriakides reinforced the need for continued action, stating, "No one should face a diagnosis alone, and no one should be left behind by their healthcare system."

Stella Kyriakides EU Commissioner for Health & Food Safety





'Unity is our strength, and this plan is a model for how we can tackle other public health challenges together.'

She also spoke passionately about the importance of collaboration among Member States, stating, "Unity is our strength, and this plan is a model for how we can tackle other public health challenges together." Her call to maintain momentum under the new EU leadership resonated strongly with attendees, many of whom acknowledged her pivotal role in making cancer a top priority on the EU's agenda.

Looking Ahead: The Next Frontiers

Panellists agreed that Europe's Beating Cancer Plan must remain a priority under the new EU leadership. The "Roadmap to 2030" outlines critical actions, including updating tobacco and alcohol legislation, expanding the "right to be forgotten" for cancer survivors, and enhancing access to comprehensive care.



From left to right. Stella Kyriakides and Alessandra Moretti MEP

Walter Ricciardi emphasised that the Cancer Mission and the Beating Cancer Plan should work in tandem to achieve maximum impact. He stressed the importance of mission-driven approaches, integrating public health with broader societal objectives and fostering partnerships across sectors to address systemic barriers.

Panellists reiterated the importance of ensuring that initiatives remain well-funded and inclusive, maximising their reach and effectiveness. The session concluded with a call to action: to preserve the plan's momentum, ensure political continuity, and prioritise equity in all aspects of cancer care. Patients were repeatedly recognised as central to this journey, with panellists stressing that their voices must guide future strategies. There was a consensus that building on the achievements of the past five years will require unwavering political will and a shared commitment across Europe.

Csaba Dégi President, European Cancer Organisation





'Dear Stella, you are not just a leader; you are a warrior for the cancer community, and your legacy will endure in the lives you have touched.'



From left to right: Csaba Dégi, Isabel Rubio, Stella Kyriakides, Alessandra Moretti MEP, Walter Ricciardi, Matti Aapro, Ramon Reyes,and Gilliosa Spurrier-Bernard

KEY POINTS FROM THE SESSION

- Europe's Beating Cancer Plan has driven progress in prevention, early detection, and survivorship, with initiatives such as the Cancer Screening Policy Index and the Cancer Survivorship Smart Card.
- Prevention remains a critical focus, with calls for stronger tobacco and alcohol control policies.
- Equity in cancer care is a pressing challenge, requiring investment in workforce training, digital tools, and comprehensive care networks.
- Stella Kyriakides' leadership has left a lasting legacy, inspiring continued collaboration and innovation.
- The 'Roadmap to 2030' provides a blueprint for future action, emphasising equity, sustainability, and cross-sectoral solutions.

FIND OUT MORE

• Europe's Beating Cancer Plan







EU Commissioner for Health and Food Safety, Stella Kyriakides meeting Summit delegates

Under Pressure: Safeguarding the health of Europe's oncology workforce

With co-chair Wim Ceelen, including speakers:

- Vytenis Andriukaitis MEP, Member, Committee on the Environment, Public Health and Food Safety & Subcommittee on Public Health
- David Collingridge, Editor-in-Chief, Lancet Oncology
- André Ilbawi, Cancer Control Officer, World Health Organization
- Robin Zon, President, American Society of Clinical Oncology (ASCO)
- Wendy Oldenmenger, Co-Chair, Workforce Network
- Mirjam Crul, Co-Chair, Workforce Network
- Kathy Oliver, Co-Chair, ECO Patient Advisory Committee; Chair & Founding Co-Director, International Brain Tumour Alliance
- Paul Efthymiou, Ambassador, Doctors in Distress
- Hilary Hansen, Global Public Affairs Head, Oncology, Sanofi
- Ethan Basch, ASCO Representative & Chief of Oncology, University of North Carolina

The oncology workforce crisis has reached a critical juncture, with healthcare systems across Europe struggling with staff shortages, burnout, and mounting demands. This session, co-chaired by Wim Ceelen, Mirjam Crul, and Wendy Oldenmenger, highlighted the findings of the European Cancer Organisation's landmark report, Under Pressure: Safeguarding the Health of Europe's Oncology Workforce, while also unveiling actionable recommendations to address this urgent issue.

The session brought together leading voices, including Vytenis Andriukaitis, MEP, André Ilbawi from the World Health Organization (WHO), and representatives from the American Society of Clinical Oncology (ASCO). Discussions underscored the scale of the crisis, shared personal testimonies, and issued a call to action for policymakers, healthcare institutions, and international organisations.



The Crisis in Europe's Cancer Workforce

Europe's cancer workforce is under unprecedented pressure. According to the ECO's survey, 52% of oncology professionals describe their workload as "endless," while 51% feel that decision-makers fail to prioritise their well-being. The report revealed alarming levels of burnout, with nearly one in five professionals affected, and 8% indicating plans to leave the field within the next five years. These findings highlight the urgent need for systemic changes to sustain high-quality cancer care.

André Ilbawi

Cancer Control Officer, World Health Organization





'Burnout and stress are not just workforce issues—they are public health crises.'

Panellists emphasised that the oncology workforce crisis is not simply an operational challenge, but a direct threat to patient care. Excessive workloads and administrative burdens take time and energy away from patient-facing activities, increasing the



Panelists of the 'Under Pressure: Safeguarding the health of Europe's oncology workforce from our Workforce Network' session

risk of errors and delayed treatment. André Ilbawi described burnout and stress as public health crises, noting that their impact ripples across entire healthcare systems. Patients, particularly in underserved areas, face longer wait times and inconsistent care, deepening health inequities across Europe. Addressing these systemic issues requires investment in workforce expansion alongside structural changes that enhance efficiency and job satisfaction.

Key Findings and Themes from the Report

The ECO report, developed with contributions from over 700 professionals across 30 European countries, provides a comprehensive analysis of the challenges facing the cancer workforce. The findings were organised into three workstreams: **Data and Survey Insights:** The survey highlighted widespread dissatisfaction with working conditions. Administrative burdens were cited as a pervasive issue, with oncology professionals spending significant portions of their time on non-clinical tasks. Insufficient support for mental health and disparities in career development opportunities further compound the strain on professionals.



Mirjam Crul Co-Chair, Workforce Network

need to deliver it.'

'Our patients deserve the best care, and our workforce deserves the support they Notably, young cancer professionals reported greater dissatisfaction compared to their senior colleagues, signalling a troubling trend for the future workforce. Panellists highlighted the importance of addressing these concerns to retain talent and ensure a pipeline of skilled oncology specialists. Expanding mentorship programmes tailored to early-career professionals was one recommendation to counteract these trends.

Human Stories: Personal testimonies shed light on the human cost of the crisis. From nurses overwhelmed by administrative tasks to oncologists grappling with moral distress due to resource constraints, the stories reveal the emotional toll of working in cancer care. One oncologist shared, "I'm constantly torn between giving my patients the time they need and meeting the demands of an overstretched system. It's exhausting." These stories underscore the urgent need for systemic reforms that prioritise the well-being of oncology professionals. Many also highlighted that burnout is not only personal but collective, affecting team dynamics and morale across departments.

Best Practices and Innovations: The report also highlighted examples of effective strategies to address workforce challenges. Flexible staffing models, peer-support networks, and digitisation initiatives to streamline administrative tasks were cited as promising approaches. In the Netherlands, a pilot programme for automated documentation reduced the administrative workload by 30%, enabling clinicians to focus more on patient care. Sharing these innovations across borders could help drive systemic improvements across Europe. Implementing similar initiatives in resourcelimited settings could bridge gaps and alleviate disparities in cancer care delivery.



Ethan Basch

ASCO Representative & Chief of Oncology, University of North Carolina



'The oncology workforce crisis transcends borders. Sharing data, best practices, and innovative solutions will benefit us all.'

Recommendations for Action

The session emphasised the need for coordinated, multi-level action to tackle the oncology workforce crisis. The ECO report outlines 47 policy recommendations, with key priorities including:

Developing a Pan-European Workforce Action Plan: Panellists called for the European Union to adopt a comprehensive strategy to tackle the workforce crisis, aligned with Europe's Beating Cancer Plan. Vytenis Andriukaitis stressed the need for harmonised efforts, advocating for crossborder collaborations to ensure equitable access to cancer care across Member States. He suggested creating an EU-wide task force to oversee workforce planning and implementation.

Improving Working Conditions: Measures such as reducing administrative burdens, ensuring fair compensation, and providing access to mental health support were identified as critical steps. Panellists also stressed the need for inclusive workplace cultures that recognise and reward the contributions of all oncology professionals,



On screen: Robin Zon, President, American Society of Clinical Oncology (ASCO)

regardless of their role or level of experience. Addressing systemic inefficiencies, such as outdated workflows, was noted as vital to improving workplace satisfaction.

Fostering Career Development: Mentorship programmes, advanced training opportunities, and clear career pathways are essential for attracting and retaining talent in oncology. Addressing gender disparities and providing targeted support for young professionals were also highlighted as key priorities. Panellists pointed to successful mentorship initiatives in Spain and Germany, where structured programmes have significantly improved job satisfaction and retention rates among junior staff. Lifelong learning and professional development were also highlighted as critical solutions.

Enhancing Data and Monitoring: Improved data collection and analysis are essential for identifying workforce gaps and measuring the impact of interventions. The ECO recommends that Eurostat conduct comprehensive studies on workforce capacity and burnout levels. Enhanced monitoring would also allow for evaluating new policies and their effectiveness in reducing stress and improving job satisfaction. Developing standardised metrics for burnout assessment was proposed to facilitate cross-border comparisons.

Vytenis Andriukaitis, MEP Member, Committee on the Environment, Public Health and Food Safety & Subcommittee on Public Health



'Member States must collaborate to ensure every patient receives equitable care.'

The Global Dimension of the Crisis

The session also explored the global context of the oncology workforce crisis, drawing comparisons with challenges faced in the United States and other regions. Ethan Basch, representing ASCO, stressed the importance of international collaboration, stating that shared data and best practices can help address workforce challenges globally. He emphasised that many of the issues—burnout, resource shortages, and inefficiencies—are universal, requiring a unified approach to develop sustainable solutions. André Ilbawi from the WHO echoed this sentiment, advocating for integrated approaches that tackle the root causes of workforce shortages. He stressed the need to align education, training, and health system reforms to build resilient oncology workforces worldwide. "This is not just a European problem," he stated. "It is a global crisis that demands global solutions." Proposals included international exchanges and partnerships to foster innovation and capacity-building.

A Call to Action

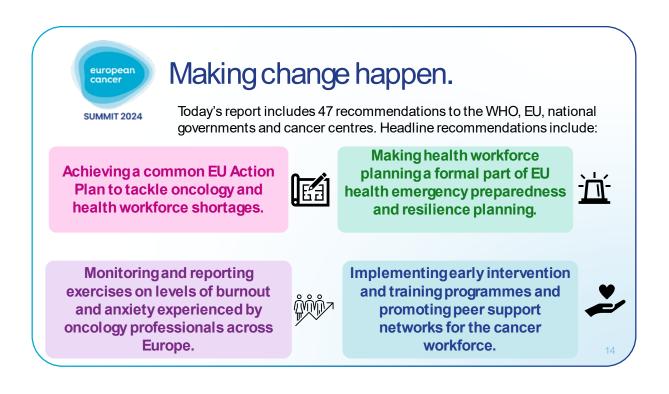
As the session concluded, panellists reiterated the urgency of addressing the oncology workforce crisis. The ECO Workforce Network pledged to continue its advocacy efforts, leveraging the findings of the Under Pressure report to drive meaningful change.

Panellists also stressed the importance of grassroots engagement, urging healthcare institutions to empower staff to contribute ideas and solutions. Building resilience within teams and fostering open communication were identified as key elements in creating sustainable work environments.



From left to right: Wendy Oldenmenger, Wim Ceelen, and Mirjam Crul

The session closed with a challenge to policymakers and healthcare leaders: to act decisively and collaboratively to safeguard the future of Europe's oncology workforce. Mirjam Crul's final remarks captured the session's sentiment: "Our patients deserve the best care, and our workforce deserves the support they need to deliver it. This is a shared responsibility, and the time to act is now."



KEY POINTS FROM THE SESSION

- The oncology workforce crisis poses significant risks to patient care, with burnout and staff shortages undermining the quality and timeliness of treatments.
- The ECO's "Under Pressure" report highlights key challenges, including excessive workloads, administrative burdens, and insufficient mental health support.
- Policy recommendations focus on improving working conditions, fostering career development, and enhancing data collection to inform solutions.
- International collaboration and shared best practices are essential to addressing workforce challenges across borders.
- Urgent action is needed at all levels to ensure a sustainable and resilient oncology workforce for the future.

FIND OUT MORE

- Workforce Network
- Under Pressure: Safeguarding the Health of Europe's Oncology Workforce



From left to right: Wim Ceelen, Mirjam Crul, David Collingridge, André Ilbawi, Hilary Hansen, Paul Efthymiou, and Kathy Oliver. Speaking: Vytenis Andriukaitis MEP

European Cancer Community Foundation's Cancer Workforce Grants

After a careful evaluation by the grant selection committee, the European Cancer Community Foundation is delighted to announce the winners of this year's European Cancer Workforce Grants. These grants celebrate pilot initiatives designed to enhance the professional lives of the oncology workforce, ultimately increasing their capacity to save lives and improve patient outcomes across Europe and beyond.

> european cancer community foundation

The European Cancer Workforce Fund was launched in early 2024 in collaboration with the European Cancer Organisation's Workforce Campaign. This partnership reflects the organisation's commitment to innovative research that improves working conditions for men and women on the frontlines of cancer care.

The winners were officially announced by Prof. Andreas Charalambous, the Foundation's founder and chair, during a special session at the European Cancer Summit in November.

We extend heartfelt congratulations to the winners:

Henry George Smith, Consultant Surgeon, Copenhagen University Hospital, Denmark, for the project: 'Developing a virtual multidisciplinary team workflow to optimise colorectal cancer care for patients from diverse resource settings'



Dr Inesa Huivaniuk, Global Medical Knowledge Alliance Ukraine, Kyiv, Ukraine, for the project: 'Supporting Women in Oncology in Ukraine: Addressing Burnout and Enhancing Well-being



Among Surgeons, Oncologists, and Radiation Oncologists'The Foundation looks forward to sharing updates on future grants in the coming year, and interested parties can find more information on the website.



Andreas Charalambous, Founder & Chair, European Cancer Community Foundation & Past-President, European Cancer Organisation



From left to right. Mirjam Crul and Kim Benstead

Quality backed by evidence and systems

With co-chairs Yolande Lievens and Ajay Aggarwal, including speakers:

- Acko Ankarberg Johansson, Swedish Minister for Health Care
- Liesbet van Eycken, Director, Belgian Cancer Registry
- Jeliazko Arabadjiev, Member, EU Cancer Mission Board
- **Patrycja Rzadkowska**, Vice-Chair, ECO Patient Advisory Committee & Vice-Chair, Pancreatic Cancer Europe
- *Miet Vandemaele,* Doctoral Fellow, Faculty of Medicine and Health Sciences, Ghent University
- Marilys Corbex, Cancer Team Lead, WHO Europe

The provision of high-quality cancer care is a cornerstone of health systems across Europe, essential for ensuring equitable access and optimal outcomes for all patients. At the European Cancer Summit 2024, experts and stakeholders evaluated achievements and challenges in advancing cancer care standards. This session, co-chaired by Ajay Aggarwal and Yolande Lievens, explored how evidence-based strategies and coordinated efforts can bridge persistent gaps in care delivery. The discussions underscored the pressing need for resilience, innovation, and equity to ensure that every patient benefits from high-quality care.

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Jeliazko Arabadjiev Member, EU Cancer Mission Board



'Equity in access to quality cancer care remains a guiding principle.'

Bridging the Gap Between Policy and Practice

Integrating health systems and quality initiatives into cancer care remains an ambitious but critical objective. Comprehensive cancer centres and robust cancer registries have emerged as pivotal tools for identifying disparities, driving evidencebased interventions, and ensuring consistency across Member States. Initiatives like the European Cancer Information System (ECIS) are supporting harmonised cancer care standards, highlighting equity as a central principle of quality care. However, disparities in implementation persist. Many regions, particularly in Eastern Europe, struggle with limited infrastructure, underfunded systems, and the absence of functional cancer registries. These gaps hinder efforts to track patient outcomes and evaluate the effectiveness of interventions. A coordinated approach at national and EU levels, supported by sustainable funding, is essential to overcome these barriers and establish a framework for high-quality, equitable care.

The Role of Data in Enhancing Care Quality

Data collection and analysis are transformative forces in improving cancer care. Cancer registries, as the backbone of cancer surveillance, provide invaluable insights into incidence, survival rates, and treatment outcomes. These data allow health systems to forecast healthcare needs, evaluate



Liesbet van Eycken, Director, Belgian Cancer Registry



Panelists of the 'Quality backed by evidence and systems: a review from our Health Systems & Quality Cancer Care Network' session

the impact of clinical guidelines, and implement quality improvements.

Data-driven policies have demonstrated success in countries like Belgium, where the centralisation of pancreatic cancer surgeries significantly reduced postoperative mortality rates. Yet, the potential of data remains untapped in many regions. To maximise its impact, data collection must be expanded and standardised to include biomarkers, socioeconomic indicators, and patient-reported outcomes. Enhanced collaboration between registries and clinical communities is critical to ensure that these data are actionable and lead to tangible improvements. Further investment in digital infrastructure and interoperability will be necessary to streamline data integration and access across borders.

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Liesbet van Eycken Director, Belgian Cancer Registry



'Timely and comprehensive data are the cornerstone of quality improvement.'

Patient-Centred Care: The Foundation of Quality

Quality cancer care extends beyond clinical outcomes to encompass the emotional, psychological, and social needs of patients. Holistic care recognises the person behind the disease, addressing the full spectrum of challenges faced by individuals during their cancer journey. Timely diagnosis, multidisciplinary teamwork, and access to supportive care services are essential components of patient-centred care.

Patient advocacy groups play an instrumental role in shaping healthcare policies to prioritise these aspects. They ensure that patient voices remain

Patrycja Rzadkowska Vice-Chair, ECO Patient Advisory Committee & Vice-Chair, Pancreatic Cancer Europe





'Cancer care should be holistic, addressing not just the disease but the person behind it.'

at the forefront of decision-making processes, advocating for equitable access to resources and treatment. By fostering stronger collaboration between patients and healthcare providers, systems can deliver care that not only treats the disease but supports the individual's overall wellbeing. Expanding access to psychological support services and integrating survivorship programmes into care pathways are critical next steps.

Tackling Commercial Determinants of Health

Commercial determinants of health—the privatesector influences on public health systems—are a growing concern in cancer care. Market forces often prioritise profit over patient outcomes, creating barriers to affordability and access. Addressing these challenges requires stringent regulations to ensure that innovation serves the public good.

The rising cost of cancer drugs, which often outpaces their clinical benefit, exemplifies the need for enhanced price regulation and transparency. Evidence-based decision-making in drug approval and reimbursement processes can ensure that resources are allocated to treatments with demonstrable value. Balancing affordability and innovation is key to creating systems that are both sustainable and patient-focused. In addition, fostering public-private partnerships with clearly defined goals and accountability mechanisms could help align commercial interests with public health priorities.

Innovation and Access: Realising Potential

While innovation holds immense promise for advancing cancer care, its implementation often lags due to fragmented systems and inconsistent regulatory frameworks. High-value innovations, such as advanced radiotherapy techniques and precision medicine, have the potential to transform outcomes but must be equitably accessible to achieve their full impact.

Efforts like the Value-Based Radiation Oncology project are developing frameworks to evaluate the efficacy and cost-effectiveness of new technologies, paving the way for broader adoption. By aligning innovation with evidence-based policy, health systems can ensure that advances in care benefit all patients, regardless of geographic or socioeconomic barriers. Streamlining regulatory approval processes and fostering international collaboration on technology development and deployment could accelerate the pace of innovation reaching patients.



Marilys Corbex

Cancer Team Lead, WHO Europe



'We need to rethink the system to prioritize treatments that deliver meaningful benefits to patients.'

Lessons from National Strategies

National strategies provide valuable models for elevating cancer care. Sweden's comprehensive cancer plan demonstrates how coordinated, evidence-based approaches can drive meaningful progress. Over the past decade, Sweden has prioritised patient outcomes, equity, and access to precision medicine. These efforts have significantly improved survival rates and reduced disparities across the country.

Collaboration across sectors and levels of government is fundamental to the success of such strategies. Partnerships between healthcare providers, academic institutions, and civil society create a foundation for innovation and systemic improvement. Sweden's ongoing commitment to eliminating cervical cancer by 2027 exemplifies how targeted, actionable goals can galvanise stakeholders and deliver measurable results. Expanding similar strategy-based approaches to other Member States could amplify their collective impact across Europe.

Acko Ankarberg Johansson Swedish Minister for Health Care



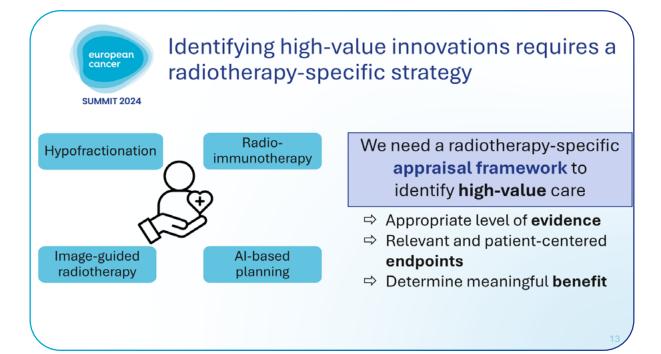
'Cancer care requires a coordinated effort that leverages the strengths of healthcare, academia, civil society, and the private sector.'



Acko Ankarberg Johansson, Swedish Minister for Health Care

A Call to Action

The session concluded with a clear message: quality cancer care must remain a top priority across Europe. Implementing evidence-based policies, fostering innovation, and addressing systemic disparities require collective action. Stakeholders must work collaboratively to build resilient systems that ensure equitable access to high-quality care for every patient. The Health Systems and Quality Cancer Care Network reaffirmed its commitment to advancing these goals, emphasising the need for sustained advocacy, funding, and coordination. As Yolande Lievens aptly summarised, 'Quality cancer care is not a luxury; it is a fundamental right for every patient, regardless of where they live or their socioeconomic status.'



KEY POINTS FROM THE SESSION

- The integration of health systems and quality initiatives is essential for improving cancer care across Europe.
- Cancer registries and data-driven insights play a pivotal role in identifying disparities and informing policy changes.
- Patient-centered care must address emotional, social, and psychological needs alongside clinical outcomes.
- Balancing innovation with affordability and accessibility requires stringent regulations and evidence-based decision-making.
- National strategies, such as Sweden's cancer plan, demonstrate the power of coordinated, strategy-based approaches to drive improvements in cancer care.

FIND OUT MORE

Health Systems and Quality Cancer Care Network

Together Against Cancer in a Time of Crisis

With co-chairs Mark Lawler and Jacek Jassem, including speakers:

- Adam Jarubas MEP, Chair, Subcommittee on Public Health
- Anna Uzlova, Co-Founder & CEO, Charity Foundation Inspiration Family, Ukraine
- **Richard Sullivan**, Director, Institute of Cancer Policy and Co-Director of the Centre for Conflict & Health Research
- Maria Babak, Member, Board of Directors, Institute of Cancer & Crisis, Armenia
- Klaus Meier, President, European Society of Oncology Pharmacy (ESOP)
- Magda Chlebus, Executive Director of Science Policy & Regulatory Affairs, EFPIA

Emergencies and crises disrupt lives on an unimaginable scale, often leaving the most vulnerable populations with limited access to essential services. Cancer patients in conflict zones face unique and severe challenges, as the infrastructure and resources critical for their care are frequently destroyed or inaccessible. The European Cancer Summit 2024 addressed these pressing issues in a session organised by the Emergencies and Crises Network. Co-chaired by Mark Lawler and Jacek Jassem, the session focused on improving cancer care during crises, supported by insights from a newly published manifesto in The Lancet.

The Growing Need for Resilient Cancer Care Systems

The session underscored the urgency of building resilient cancer care systems to address the increasingly complex crises of modern times. From the ongoing war in Ukraine to conflicts in Sudan and Palestine, millions of cancer patients find themselves displaced, often without access to life-saving treatments. Panellists highlighted how crises compound vulnerabilities for patients, particularly in low- and middle-income countries, where healthcare systems are already under strain.



Panelists of the 'Together Against Cancer in a Time of Crisis Organised by the Emergencies and Crises Network' session

Key statistics from Ukraine revealed the staggering scale of the challenge: cancer is the second leading cause of death in the country, with over 100,000 new cases diagnosed annually. The war has shattered the country's therapeutic geography, forcing patients to navigate logistical and financial barriers to access care. Beyond Ukraine, similar stories emerge in regions like Sudan, where resource shortages and infrastructure destruction severely hinder cancer treatment. These challenges underline the need for global solidarity and innovative solutions to safeguard care.

Richard Sullivan from the Institute of Cancer Policy highlighted the broader impact of these crises on cancer care delivery, emphasising how the weaponisation of health services has escalated. Sullivan noted that hospitals and healthcare workers increasingly find themselves targets during conflicts, a trend that undermines the ability of already strained systems to provide even basic care. He called for global efforts to protect healthcare infrastructure and uphold the principles of medical neutrality.



Richard Sullivan Director, Institute of Cancer Policy and Co-Director of the Centre for Conflict & Health Research



'The weaponisation of health services during conflicts is now the norm, with hospitals and healthcare workers increasingly targeted.'

Challenges in Delivering Cancer Care During Crises

Delivering cancer care during crises presents multifaceted challenges, encompassing destroyed infrastructure, limited resources, and patient displacement. Hospitals and clinics often become direct or collateral targets, leaving many patients without access to diagnostic tools or treatment. In conflict zones like Sudan and Lebanon, healthcare professionals are stretched to their limits, managing overwhelming patient volumes while grappling with shortages of medical supplies and trained personnel.

Displacement exacerbates these issues. Refugees frequently encounter barriers such as language difficulties, unfamiliar healthcare systems, and financial constraints. The psychological toll of displacement further complicates treatment adherence, particularly for patients navigating



Adam Jarubas MEP, Chair, Subcommittee on Public Health

complex cancer therapies. Patients in these situations often face the impossible choice between delaying treatment and undertaking perilous journeys to access care. Emotional support and solutions that provide continuity of care are crucial to mitigating these challenges and ensuring that patients receive timely treatment. Addressing these systemic issues also requires long-term strategies to integrate displaced patients into host countries' healthcare systems, ensuring continuity and equity in care.

The Manifesto for Action: A Global Framework

A centrepiece of the session was the manifesto on improving cancer care in conflict-impacted populations, published in The Lancet and developed by a coalition of healthcare professionals, policymakers, and patient advocates. The document presents seven key strategies for transforming cancer care during emergencies:

- Advocacy for Geneva Convention
 Compliance: Strengthening international
 mechanisms to ensure the safety of
 healthcare workers and facilities in conflict
 zones.
- Integration of Cancer Care into Humanitarian Agendas: Elevating noncommunicable diseases within global crisis responses, including those led by the United Nations.

Cancer: Forging New Frontiers



From left to right. Maria Babak, Magda Chlebus, Anna Uzlova, and Adam Jarubas MEP,

- Development of Inclusive Care Models: Addressing specific needs such as paediatric oncology, palliative care, and displaced populations.
- Leveraging Digital and Context-Specific Solutions: Employing telemedicine and blended financing to adapt care to crisis conditions.
- Biannual Reporting on Progress: Publishing updates to maintain accountability and share best practices.
- Creating a WHO Working Group: Establishing a dedicated body to define and monitor cancer care in emergencies.
- Positioning Cancer Care as a Core
 Emergency Response Pillar: Ensuring cancer
 care becomes a standard component of
 global crisis management plans.

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Mark Lawler

Co-Chair, Emergencies and Crises Network



'Our shared responsibility is to stand with cancer patients and healthcare professionals during times of crisis, ensuring their voices are heard and their needs are met.' The manifesto emphasises the necessity of building systems that prioritise equity, resilience, and sustainability. Maria Babak, a contributor to the document, described it as a roadmap to creating systems where hope prevails even in the most challenging circumstances. Its principles aim to empower local healthcare systems while leveraging international collaboration to bridge resource and capacity gaps.

Lessons from Past Crises

Recent emergencies, including the COVID-19 pandemic and the war in Ukraine, have provided critical lessons on maintaining care continuity. Decentralised clinical trials and telemedicine platforms emerged as indispensable tools during these crises, ensuring that patients could access care despite physical barriers. These innovations demonstrate the value of flexible, patient-centred approaches that can adapt to rapidly changing conditions.

Efforts to rebuild cancer care infrastructure in war-affected regions also offer important insights. Training programmes for healthcare professionals in Ukraine, led by organisations such as the European Society of Oncology Pharmacy, have helped mitigate staff shortages and enhance service delivery. Providing multilingual patient education materials has further enabled displaced patients to navigate unfamiliar healthcare systems effectively. These initiatives underline the importance of equipping local healthcare providers with the tools and knowledge needed to meet patients' diverse needs.

Richard Sullivan underscored the role of international collaboration in addressing these challenges, emphasising the importance of shared resources and expertise. He highlighted examples where partnerships between local and international organisations successfully expanded access to essential treatments, even in the most resource-limited settings.

The Role of International Advocacy and Collaboration

International advocacy is critical to addressing these challenges and mobilising resources for cancer care in crisis zones. The manifesto calls on governments, NGOs, and global health organisations to integrate its recommendations into broader humanitarian responses. Advocacy efforts must also counteract disinformation campaigns that undermine trust in healthcare systems and global initiatives.

Addressing these systemic challenges requires robust international collaboration. Stakeholders must work together to establish protocols that protect healthcare workers and facilities, ensuring their safety and continuity during conflicts. Additionally, funding mechanisms must be developed to support long-term infrastructure rebuilding and workforce training in affected regions. Strengthening partnerships between

Maria Babak

Member, Board of Directors, Institute of Cancer & Crisis, Armenia





'We must act together to create a world where hope prevails over despair, ensuring that no cancer patient is left behind.'

local and international organisations can further enhance capacity-building efforts and ensure sustainability.

A Call to Action

The session concluded with a resolute call to action, urging stakeholders to prioritise the needs of cancer patients in crisis settings. The Emergencies and Crises Network committed to advancing the manifesto's recommendations, focusing on collaborative efforts with WHO and other international bodies to protect healthcare workers and patients. Developing sustainable funding mechanisms and documenting lessons learned from past emergencies will be key to building more resilient systems.

Mark Lawler closed the session with a powerful statement: 'Our shared responsibility is to stand with cancer patients and healthcare professionals during times of crisis, ensuring their voices are heard and their needs are met.'

The Challenge of Cancer Care in Conflict Zones

SUMMIT 2024

european cancer



Infrastructure Limitations: Hospitals and clinics often suffer from destruction, reducing access to essential services.



Resource Constraints: Shortages of medical supplies, trained personnel, and financial support hinder effective care delivery.



Displacement of Populations: Many individuals affected by conflict may not have stable access to healthcare facilities.

KEY POINTS FROM THE SESSION

- Cancer care in crisis zones faces unique challenges, including infrastructure destruction, resource shortages, and patient displacement.
- The manifesto on improving cancer care in conflict-impacted populations outlines seven key strategies, from advocacy for Geneva Convention compliance to biannual reporting.
- Lessons from COVID-19 and the war in Ukraine highlight the need for decentralised trials, telemedicine, and international collaboration.
- Strong advocacy and sustainable funding mechanisms are critical for integrating cancer care into humanitarian responses. The Emergencies and Crises Network is committed to uniting stakeholders to protect and support cancer patients during emergencies.
- Implement EU regulation to enhance access to advanced diagnostic tools, including liquid biopsies and precision medicine tests, ensuring that cancer patients can promptly benefit from innovative treatments and therapies.
- Establish a dedicated European Cancer Survivors Day to create awareness and policy opportunities.

FIND OUT MORE

- <u>Emergencies and Crises Network</u>
- Manifesto on Improving Cancer Care in Conflict-Impacted Populations



From left to right: Adam Jarubas MEP, Mark Lawler, and Klaus Meier

Pioneers of Change in Cancer Research

With co-chair Christine Chomienne, including speakers:

- Vlad Voiculescu MEP, Member, Subcommittee on Public Health
- Benedikt Westphalen, Member, EU Cancer Mission Board
- Winette van der Graaf, President, European Organisation for Research and Treatment of Cancer (EORTC) & ECO Board Member
- Matthias Löhr, President, United European Gastroenterology (UEG)
- Ricardo Ferreira, Chair, EULAR Committee of Health Professionals in Rheumatology
- Guillemette Jacob, Founder, Les Seintinelles
- Zsuzsanna Devecseri, Global Head, Medical Affairs Oncology, Novartis

The landscape of cancer research in Europe is undergoing a transformative shift, driven by collaborative networks, policy engagement, and innovative solutions. At the European Cancer Summit 2024, the session was chaired by Christine Chomienne, Vice-Chair of the EU Cancer Mission Board, who set the stage by emphasising the critical role of collaboration in addressing research challenges. Chomienne highlighted the need for a united approach to break down silos, accelerate innovation, and ensure equitable access to the benefits of research for all patients. The session showcased how research collaboration, pragmatic policy frameworks, and citizen engagement are essential to overcoming barriers and driving progress in cancer research. The session emphasised that clinical trials, academic partnerships, and patient inclusion are fundamental to ensuring that research outcomes translate into meaningful benefits for patients.

Clinical Trials: The Cornerstone of Innovation

Clinical trials remain the cornerstone of progress in cancer care, ensuring that new treatments are developed and delivered safely and effectively. However, the session underscored the growing challenges faced by European clinical research. Regulatory burdens, particularly around safety requirements and trial documentation, have significantly increased the complexity of clinical trials. While designed to enhance patient safety, these regulations often lead to unintended consequences, such as delayed trial approvals and reduced participation. Moreover, they can

even compromise patient safety by overwhelming investigators with excessive data, increasing the risk that critical safety signals go unnoticed.

Benedikt Westphalen Member, EU Cancer Mission Board





Clinical trials are not a question of luxury. They are a question of equity and access to innovation.'



Christine Chomienne, Vice Chair, EU Cancer Mission Board & Co-Chair, Research Policy Network



Panelists of the 'Pioneers of Change in Cancer Research: Networks and Initiatives that made the difference (from our Research Policy Network)' session

Europe risks losing its competitive edge as research sponsors and trial centres move operations to less restrictive regions. Streamlined regulatory frameworks that preserve safety without imposing unnecessary bureaucracy are needed to sustain Europe's leadership in clinical research. Simplified informed consent procedures and streamlined, harmonised adverse event reportingachievable through a unified EU platform to replace the fragmented sponsor-specific systems-are some key recommendations from the EHA-led Coalition for Reducing Bureaucracy in Clinical Trials, aimed at addressing the loss of efficiency and competitiveness in Europe's clinical trials. Reducing administrative complexity would make trials more accessible, benefiting underrepresented populations and ensuring equity and diversity in cancer research.



Guillemette Jacob Founder, Les Seintinelles



'We must think about the research experience for participants. A collaborative and reciprocal relationship is key to success.'

Academic research also emerged as a critical component in addressing gaps left by commercially driven studies. Investigator-initiated trials, which answer real-world questions about treatment duration, dose optimisation, and patient-centred outcomes, often suffer from insufficient funding. These trials are particularly important for rare cancers, where unmet needs remain high and commercial interest is limited.

Winette van der Graaf

President, European Organisation for Research and Treatment of Cancer (EORTC) & ECO Board Member



'Patients with rare cancers face a 15% lower five-year survival rate compared to common cancers. This gap is unacceptable.'

Sustained investment in investigator-led studies, alongside industry-sponsored trials, is necessary to foster a balanced, patient-centred research agenda.

Collaborative Networks: A Catalyst for Progress

Cancer research thrives on collaboration, and Europe's success depends on the ability to connect academia, industry, policymakers, and patients. Networks such as the European Organisation for Research and Treatment of Cancer (EORTC) play a central role in fostering these connections. By enabling cross-border trials and providing a platform for investigatorled studies, EORTC supports the generation of evidence that improves patient outcomes.

Collaborative efforts have demonstrated their impact through innovations in areas such as targeted therapies and precision oncology. The success of novel therapies exemplifies how sustained partnerships between academic researchers, industry, and policymakers can



Winette van der Graaf, President, European Organisation for Research and Treatment of Cancer (EORTC) & ECO Board Member

transform patient care. These partnerships are essential for ensuring that scientific advancements are not only developed but also implemented equitably across diverse healthcare systems.

In addition, collaborative research networks help address funding and knowledge gaps that disproportionately affect smaller regions and underserved populations, such as patients with rare cancers. Pragmatic clinical trials—designed to answer specific real-world questions—are critical for ensuring that treatments work effectively, without unnecessary harm, in diverse healthcare settings. However, these initiatives require dedicated funding and sustained political support to reach their full potential.

Engaging Patients and Citizens in Research

The importance of engaging patients and citizens in cancer research was a recurring theme throughout the session. Traditional research frameworks have often overlooked the value of patient contributions, focusing solely on scientific outcomes while neglecting participant experience. However, initiatives like Les Seintinelles, a citizen-driven research network, are challenging this paradigm by simplifying participation and fostering trust between researchers and patients.

Patient engagement goes beyond recruitment; it ensures that research remains relevant, inclusive, and patient-centred. Early inclusion of patient perspectives in trial design can improve feasibility and accelerate recruitment, leading to more robust and representative results. Moreover, initiatives that emphasise a positive participant experience foster a stronger connection between patients and research, making clinical trials more accessible, appealing, and efficient in answering patients' needs.

The session highlighted that patient-driven networks can play a pivotal role in closing gaps in recruitment, particularly for underrepresented groups such as older adults and rural populations. By simplifying processes and building trust, these networks contribute to both scientific advancements and a broader culture of research inclusivity.

Policy and Political Support: Unlocking Research Potential

Effective policy frameworks are essential to unlocking the full potential of cancer research in Europe. Policymakers must ensure that regulatory systems support innovation without stifling progress. Europe's Cancer Mission, the establishment of the Health Committee within the European Parliament, and continued investment in cancer research programmes were identified as significant steps towards achieving these goals. However, gaps remain in securing long-term funding and aligning research strategies across Member States.

Vlad Voiculescu MEP Member, Subcommittee on Public Health



'Evidence-based policymaking is essential to sustaining Europe's competitiveness in cancer research.'

Addressing workforce shortages and preventing brain drain, particularly in Eastern Europe, are also critical priorities. Many highly trained healthcare professionals and researchers leave for other regions due to a lack of funding and career development opportunities. Aligning training standards and fostering supportive environments for researchers will be key to retaining talent and sustaining Europe's research ecosystem.

Furthermore, policy decisions must reflect the needs of the cancer research community, balancing patient safety with the flexibility needed for innovation. Simplified, evidence-based policies can address existing barriers, ensure equitable participation, and provide the foundations for sustainable research progress.

A Call to Action: Sustaining Momentum

The session concluded with a strong call to action for all stakeholders to contribute to a united, forward-thinking, concrete research agenda. Networks like EORTC, Les Seintinelles, and others demonstrate that when academia, industry, patients, and policymakers work together, transformative change is achievable. Sustaining momentum requires continued investment, political commitment, and a shared united vision for advancing cancer research in Europe.

The forthcoming manifesto from the Research Policy Network will provide clear priorities and actionable recommendations to guide policymakers in addressing these challenges. By streamlining regulatory frameworks, fostering collaborative networks, and prioritising patient inclusion, Europe can build a robust, equitable cancer research ecosystem that delivers tangible benefits to patients.

Christine Chomienne

Vice Chair, EU Cancer Mission Board & Co-Chair, Research Policy Network





'We must speak with one voice as researchers, clinicians, and advocates. Only by working together can we accelerate innovation and deliver real benefits to patients.'

As Christine Chomienne aptly concluded, 'We must speak with one voice as researchers, clinicians, and advocates. Only by working together can we accelerate innovation and deliver real benefits to patients.'





From left to right. Ricardo Ferreira, Vlad Voiculescu MEP, and Zsuzsanna Devecseri

KEY POINTS FROM THE SESSION

- Clinical trials are essential for delivering innovation and improving patient outcomes, but regulatory burdens must be addressed to maintain Europe's competitiveness.
- Collaborative networks, such as EORTC and Les Seintinelles, play a vital role in fostering innovation, sustaining academic research, and engaging patients.
- Pragmatic clinical trials and increased funding for rare and poor-prognosis cancers are critical to addressing unmet needs.
- Policy engagement and evidence-based decision-making are essential for overcoming barriers in research funding and implementation.
- The Research Policy Network will deliver a manifesto to guide policymakers in advancing cancer research across Europe.

FIND OUT MORE

<u>Research Policy Network</u>

Building the Digital Future: from Legislation to Implementation

With co-chairs Wim Oyen, Annemiek Snoeckx, and Alex Eniu, including speakers:

- Tomislav Sokol MEP, Rapporteur for EU law on the European Health Data Space
- Konrad Korbiński, Head of Department for Co-ordinated Care, Polish Ministry of Health
- Victoria Leclercq, Scientist, Sciensano & eCAN Joint Action Representative
- Anita Kienesberger, Member, ECO Patient Advisory Committee
- Ben Newton, General Manager of Oncology, GE Healthcare
- Tomi Mäkelä, Flagship Executive Officer, iCAN

Digital transformation is reshaping cancer care in Europe, providing opportunities to address long-standing challenges, improve patient outcomes, and support healthcare systems under increasing pressure. The session, hosted by the Digital Health Network at the European Cancer Summit 2024, focused on the role of digital tools, artificial intelligence (AI), and the European Health Data Space (EHDS) in revolutionising healthcare. Co-chaired by Wim Oyen, Annemiek Snoeckx, and Alex Eniu, the session brought together policymakers, industry leaders, and patient representatives to explore how digital health solutions can be implemented effectively and equitably across Europe.

The European Health Data Space: Unlocking the Power of Data

The implementation of the European Health Data Space (EHDS) represents a significant step towards secure and interoperable exchange of health data across the EU. By creating a framework for both primary use (clinical care) and secondary use (research and innovation), the EHDS enables healthcare providers, researchers, and policymakers to access highquality, anonymised data while maintaining patient control over their information. Robust data protection measures ensure that patient privacy is safeguarded, fostering trust and encouraging participation in data-sharing initiatives.



Panelists of the 'Building the Digital Future: from Legislation to Implementation from the Digital Health Network' session On screen: Tomislav Sokol MEP, Rapporteur for EU law on the European Health Data Space

However, varying levels of digitalisation among EU Member States pose barriers to implementation. Addressing these disparities requires crossborder collaboration, targeted funding, and knowledge-sharing. The EHDS holds tremendous potential for cancer research by harmonising datasets across Europe, improving clinical guidelines, and accelerating personalised medicine breakthroughs. For example, integrated data sharing can help identify trends in treatment outcomes and patient demographics, enabling more precise interventions. Additionally, creating standardised data formats across Member States would facilitate cross-border research collaborations, driving innovation in cancer care. Furthermore, integrating patient-reported outcomes into the EHDS would enhance the depth and utility of shared datasets.



Tomislav Sokol MEP Rapporteur for EU law on the European Health Data Space



'We must strike the right balance between maximising the benefits of data use and protecting patient privacy.'

Digital Health in Practice: The eCAN Joint Action and iCAN Initiative

Digital health solutions such as the eCAN Joint Action and the iCAN initiative demonstrate the practical impact of integrating technology into cancer care. The eCAN project focuses on telemedicine solutions, including teleconsultation, telemonitoring, and tele-rehabilitation, improving access to care for patients in remote areas. Its recommendations for scaling up telemedicine across Europe highlight the importance of enhancing digital health literacy, streamlining hospital workflows, and engaging patients in tool design.

The Finnish iCAN initiative showcases the benefits of integrating real-world health data with advanced molecular profiling to improve cancer diagnosis and treatment. By combining real-world data and advanced analytics, iCAN identifies patterns in cancer diagnosis and enables targeted therapies. This initiative underscores the role of digital platforms in advancing precision oncology while enhancing decision-making at clinical and policy levels.

Victoria Leclercq Scientist, Sciensano & eCAN Joint Action Representative





'Scaling up telemedicine solutions will reduce inequalities and improve access to care for all cancer patients across Europe.'

Scaling these projects across Europe will require further investments in infrastructure, workforce training, and cross-sector collaboration. Lessons learned from pilot programmes, such as addressing interoperability challenges and ensuring patient engagement, can serve as blueprints for future initiatives. Moreover, leveraging telemedicine not only improves access to care but also reduces costs, making high-quality cancer care more sustainable in the long term. Expanding these solutions requires addressing legal and regulatory barriers to ensure smooth integration into healthcare systems.

Artificial Intelligence: Bridging Gaps in Cancer Care

Artificial intelligence (AI) plays a transformative role in addressing critical challenges in cancer care, particularly in diagnostics, treatment planning, and workforce support. AI-powered imaging tools, for instance, accelerate scan times, improve detection rates, and reduce false positives, enhancing clinical efficiency and patient outcomes. In addition, AI-driven analytics enable breakthroughs in biomarker discovery and clinical decision support, leading to more accurate



Alex Eniu, Co-Chair, Digital Health Network



diagnoses and personalised treatments.

The urgency of implementing these tools cannot be overstated, as they offer solutions to Europe's workforce crisis by automating routine tasks and reducing clinician workloads. Al also holds promise in automating administrative processes, freeing up healthcare professionals to focus on patient care. However, its implementation must be guided by frameworks ensuring transparency, explainability, and alignment with clinical workflows.

Al's role in analysing vast datasets is also critical for research, as it enables the identification of patterns that would be impossible to discern manually. This capability is particularly valuable in cancer research, where rapid advancements in genomics and proteomics demand innovative approaches to data analysis. Collaborative efforts between Al developers, clinicians, and researchers are essential to unlocking the full potential of these technologies while ensuring ethical standards are maintained. Education programmes aimed at training healthcare professionals in Al usage can further bolster integration efforts.



Anita Kienesberger Member, ECO Patient Advisory Committee



'Digital transformation must be inclusive. We cannot leave anyone behind in the shift to a digital future.'

The Patient Perspective: Ensuring Inclusivity and Trust

The success of digital health solutions depends on inclusivity, trust, and active patient involvement. Patient-centric approaches are essential for building trust and ensuring digital tools meet real-world needs. Addressing the digital divide, which leaves many patients unable to access or use technology due to literacy or social barriers, requires targeted initiatives to improve digital health literacy and provide technological support.

Equity must remain a guiding principle. Initiatives that ensure digital tools are accessible to underserved communities, such as those in rural or low-income areas, can help reduce disparities in care. Collaboration between healthcare providers, community organisations, and technology developers will be key to ensuring that no patient is left behind in the shift to digital health. Additionally, comprehensive public awareness campaigns can empower patients to actively engage with digital health solutions, fostering a sense of ownership and participation in their healthcare journey. Expanding patient advocacy groups' roles in the development and testing of digital solutions can also ensure tools are designed with patient needs in mind.

A Unified Approach: Moving from Vision to Implementation

Achieving the vision of digital health transformation requires collaboration among policymakers, industry leaders, clinicians, and patients. The implementation of the EHDS is central to enabling secure and interoperable data sharing across Europe. Expanding successful telemedicine projects like eCAN and iCAN will demonstrate the practical benefits of integrating digital solutions into cancer care, while addressing challenges such as interoperability and workforce readiness.

Al tools must be harnessed responsibly to improve diagnostics, support clinicians, and optimise care pathways. Addressing the digital divide is equally critical, ensuring that digital health solutions are inclusive and accessible to all. Sustainable funding and political commitment are essential to driving these efforts forward, as is fostering a culture of innovation that prioritises patient outcomes.

The digital health transformation also requires the development of policies that align with technological advancements, ensuring that regulations keep pace with innovation. Clear guidelines for data security, ethical AI use, and cross-border collaboration will enable the seamless integration of digital tools into healthcare systems. These efforts must be supported by investments in education and training for healthcare professionals, ensuring they are equipped to use these tools effectively and ethically.

As Wim Oyen concluded, 'The digital future is not a distant goal. It is within our reach if we act now, together.'



KEY POINTS FROM THE SESSION

- Supporting the implementation of the EHDS is essential to enable secure and interoperable data sharing, which will improve cancer care and research.
- Al technologies offer transformative potential for diagnostics and treatment but require clear frameworks to ensure responsible implementation.
- Addressing the digital divide is critical to ensure inclusivity, and sustainable funding and political commitment will drive the successful adoption of these technologies across Europe.
- Policymakers, healthcare providers, and technology developers must work together to ensure the promise of digital health becomes a reality for all.

FIND OUT MORE

Digital Health Network

Going Global: Eliminating HPV and Hep B in Europe and beyond

With moderators Alina Comănescu and Marko Gangur, including speakers:

- Antonio Parenti, Director, Public Health, Cancer and Health Security, Directorate-General for Health and Food Safety (DG SANTE)
- Tamar Khomasuridze, Regional Sexual and Reproductive Health Advisor, United Nations Population Fund
- Kim Hulscher, Co-Chair, European Network of Gynaecological Cancer Advocacy Groups (ENGAGe)
- Maria Butí Ferret, Professor of Medicine, Hospital Universitario Valle Hebron
- David Winterflood, Director, NOMAN is an Island
- Alexandra Smith, Advocacy and Engagement Manager, World Hepatitis Alliance
- Sofiat Akinola, Director, Health Policy and External Affairs, Roche

Vaccine-preventable cancers caused by human papillomavirus (HPV) and hepatitis B virus (HBV) represent a global public health challenge. However, with proven preventive measures, these cancers can be eliminated. The session, led by the HPV and Hep B Action Network, underscored the importance of vaccination, screening, and policy action. Moderated by Alina Comănescu and Marko Gangur, the discussion brought together policymakers, patient advocates, clinicians, and public health leaders to highlight progress, barriers, and opportunities in eliminating these cancers across Europe and beyond.



Antonio Parenti, Director, Public Health, Cancer and Health Security, Directorate-General for Health and Food Safety

Marko Gangur HPV Croatia Consultant, European Cancer Organisation





'Eliminating these cancers is not just a possibility; it is an imperative.'

Addressing the Hepatitis B Challenge: Prevention and Early Detection

Hepatitis B is a leading cause of liver cancer, responsible for an estimated 1.1 million deaths globally each year. Universal newborn vaccination, as demonstrated in countries like Taiwan, has proven to be a powerful tool in preventing liver cancer, with dramatic reductions in incidence among younger generations. Despite this success, the fight against HBV remains hampered by low global testing and vaccination rates. Currently, only 16% of people living with chronic hepatitis B are diagnosed, with marginalised and rural populations facing the greatest barriers to care.

Community-based testing and education initiatives are critical to overcoming these challenges. Health systems must prioritise accessible vaccination programmes alongside testing campaigns to identify individuals living with chronic HBV. Integrated approaches that combine HBV prevention with broader public health services, particularly in vulnerable regions, can help ensure



Panelists of the 'Going Global: Eliminating HPV and Hep B in Europe and beyond' session

that no population is overlooked. Sustained investment and political commitment are essential for expanding these programmes and preventing liver cancer on a global scale.

Beyond vaccination, improving early detection and treatment for chronic HBV infections remains critical. Scaling up screening programmes and linking individuals to care can drastically reduce the progression of HBV to liver cancer. Investments in healthcare infrastructure, including laboratory facilities and trained personnel, are essential to make testing and follow-up care widely available. Public health strategies must also address misconceptions about HBV to encourage greater participation in vaccination and testing programmes.



Alexandra Smith

Advocacy and Engagement Manager, World Hepatitis Alliance



'We have the tools to eliminate hepatitis B. What we need is political will and funding to implement these solutions at scale.'

HPV: A Preventable Cause of Multiple Cancers

HPV remains one of the most significant contributors to the global cancer burden, responsible for nearly 5% of all cancers worldwide, including cervical, anal, penile, and oropharyngeal cancers. Yet, with timely vaccination and routine screening, HPV-related cancers are preventable. A comprehensive approach to HPV elimination requires addressing disparities in vaccination coverage. While some countries, particularly in Western Europe, have achieved over 90% vaccine uptake, others in Eastern Europe and the Balkans continue to lag far behind. For instance, vaccine coverage remains below 10% in Serbia and Bosnia and Herzegovina. These stark regional gaps highlight the need for policies tailored to local contexts, supported by targeted education and awareness campaigns.

Screening is equally vital in preventing cervical cancer, the most common HPV-related malignancy. Innovations such as self-sampling for cervical cancer screening can play a transformative role in improving access. Selfsampling allows women to collect their own samples for HPV testing, overcoming logistical and cultural barriers that often limit screening participation. Expanding these programmes across underserved regions can significantly reduce cancer incidence and mortality.

Additionally, the integration of HPV vaccination into routine adolescent immunisation schedules, combined with sustained public education, is crucial for ensuring broad uptake. Comprehensive strategies must engage parents, schools, and healthcare providers to build confidence in the safety and efficacy of the vaccine. Outreach efforts should focus on addressing misinformation, particularly in communities with cultural or religious concerns about vaccination.

Progress Through Collaboration: The PROTECT-EUROPE Project

The HPV and Hep B Action Network has been instrumental in advancing vaccination and screening through collaborative initiatives like PROTECT-EUROPE. This project has driven substantial progress in countries with historically low vaccination rates, such as Romania, Bulgaria, and Croatia. By mobilising policymakers, healthcare providers, and advocacy groups, PROTECT-EUROPE has demonstrated that targeted interventions can lead to measurable improvements in vaccination uptake and public awareness.

The network's advocacy for gender-neutral vaccination has been particularly impactful. Five years ago, few European countries vaccinated



David Winterflood Director, NOMAN is an Island



'Gender-neutral vaccination is essential to protect everyone and eliminate HPV-related cancers for future generations.'

both boys and girls against HPV. Today, all EU Member States have committed to genderneutral vaccination policies, an essential step in eliminating HPV-related cancers for future generations. The success of these policies underscores the importance of political leadership, sustained funding, and cross-sector collaboration.

The new Council Recommendation on vaccinepreventable cancers, adopted in 2024, further reinforces the commitment to eliminating HPV and HBV-related cancers. Antonio Parenti, Director at DG SANTE, emphasised that these recommendations provide a clear blueprint for Member States to implement evidence-based solutions. From vaccination to screening and treatment, the recommendations encourage comprehensive, coordinated action to reduce the burden of preventable cancer.

Tackling Stigma and Barriers to Access

Eliminating HPV and HBV cancers requires addressing not only logistical and economic barriers but also the stigma that often surrounds these diseases. HPV, in particular, is frequently misunderstood, leading to hesitancy around vaccination and screening. Educational campaigns that normalise HPV vaccination as a standard preventive measure, similar to childhood vaccines, are essential for overcoming misinformation and stigma.

Stigma also prevents open discussions about cervical cancer screening, particularly in communities where cultural norms discourage conversations about reproductive health. Programmes that emphasise empowerment and choice, such as self-sampling initiatives, can help women take control of their health while respecting cultural sensitivities. These approaches are critical to reaching populations that might otherwise be excluded from routine care.

Addressing health inequities remains a central priority. Marginalised groups—including rural populations, migrants, and low-income communities—face systemic barriers to accessing vaccines and screening services. Integrated public health strategies, combined with targeted outreach, are needed to ensure these groups are not left behind in the effort to eliminate HPV- and HBVrelated cancers.

A Call for Global Action

The session concluded with a unified call to accelerate efforts to eliminate vaccinepreventable cancers through coordinated action, funding, and advocacy. The HPV and Hep B Action Network outlined key priorities:

Kim Hulschere

Co-Chair, European Network of Gynaecological Cancer Advocacy Groups (ENGAGe)





'HPV is not a mark of shame; it is a virus that most people will contract. Education and vaccination are our most powerful tools.'

- Increasing vaccine uptake through genderneutral programmes, education campaigns, and accessible immunisation services.
- Scaling up screening and early detection with innovative tools like self-sampling and community-based testing.

- Targeting health inequities to ensure vaccination and screening reach marginalised and underserved populations.
- Securing political leadership and sustainable funding to implement proven, evidencebased solutions across regions.

Eliminating HPV and HBV cancers is achievable with the tools and knowledge available today. By fostering collaboration between governments, healthcare providers, and advocacy groups, and by addressing disparities in access and education, these diseases can become a preventable tragedy of the past. As moderator Marko Gangur emphasised, eliminating these cancers is no longer a distant vision but a realistic and necessary goal for Europe and the world.

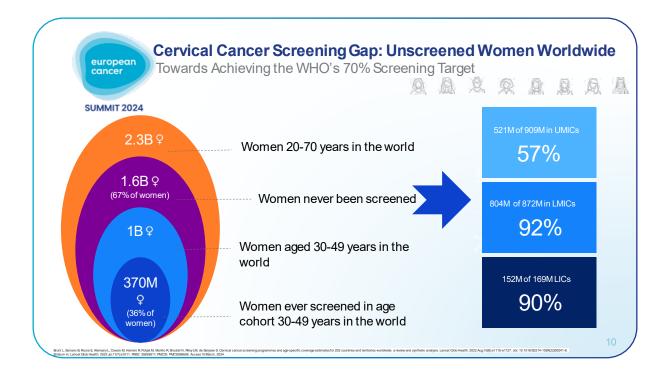
Tamar Khomasuridze

Regional Sexual and Reproductive Health Advisor, United Nations Population Fund





'We must address structural, economic, and societal barriers to ensure no one is left behind in the fight against HPV-related cancers.'



KEY POINTS FROM THE SESSION

- Hepatitis B is a leading cause of liver cancer, but universal vaccination can significantly reduce its burden.
- HPV causes multiple cancers, including cervical, anal, and head and neck cancers, yet is preventable through vaccination and screening.
- Disparities in vaccine uptake and screening persist across Europe, particularly in Eastern and Balkan regions.
- Innovations like self-sampling and community-based testing can overcome barriers and improve access.
- Collaboration, advocacy, and evidence-based policies are essential to eliminating HPV and HBV cancers worldwide.

FIND OUT MORE

- HPV and Hep B Action Network
- PROTECT-EUROPE
- HPV Protect: Working Together for the Elimination of HPV in Europe.
- Raising Awareness and Promoting Equity in Head and Neck Cancer Care
- New Council Recommendation on Vaccine-Preventable Cancers



From left to right: Alexandra Smith, Tamar Khomasuridze, Sofiat Akinola, Kim Hulscher, Marko Gangur, Alina Comănescu, Antonio Parenti and David Winterflood

Quality of Life: the pre-eminent outcome measure

With moderators Alina Comănescu and Marko Gangur, including speakers:

- Kateřina Konečná MEP, Member, Committee on the Internal Market and Consumer Protection
- Patrice Forget, Chair, Advocacy and Liaison, European Pain Federation
- Josephine Hegarty, Lead Applicant, Implementation Network Europe for Cancer Survivorship Care
- Fatima Cardoso, President, ABC Global Alliance & Director of Breast Unit, Champalimaud Clinical Center
- Jan Geissler, Member, ECO Patient Advisory Committee
- Michael Zaiac, Head of Medical Affairs Oncology Europe and Canada, Daiichi Sankyo

Survivorship and quality of life (QoL) are critical components of the cancer care continuum and a key pillar of Europe's Beating Cancer Plan. As advancements in treatment enable more people to live longer after a cancer diagnosis, the focus must expand beyond survival to address the physical, emotional, and psychosocial challenges faced by survivors and their families. The session Quality of Life: The Pre-eminent Outcome Measure, co-chaired by Andrew Davies and Luzia Travado, explored the importance of improving QoL across all phases of the cancer journey, including survivorship, metastatic disease, and end-of-life care. The session emphasised the urgent need to integrate QoL as a central pillar in cancer care policy, research, and practice. It must be measured, prioritised, and acted upon to ensure comprehensive care for all patients, regardless of their prognosis or stage of disease.

Jan Geissler Member, ECO Patient Advisory Committee





'Survival is just the first step. What matters most is how we live with and beyond cancer.'



Panelists of the 'Quality of Life – the pre-eminent outcome measure from our Survivorship and Quality of Life Network' session

Defining Quality of Life for Cancer Patients

Quality of life encompasses more than physical health; it includes emotional well-being, social functioning, and the ability to lead a fulfilling life despite the challenges of cancer. Cancer and its treatment often create a 'new normal' for survivors, marked by ongoing symptoms, side effects, and emotional challenges that require continuous support. For many survivors, living well with and beyond cancer becomes the primary concern, shifting the focus from survival alone to overall well-being.

A significant issue in current cancer research is the lack of robust QoL data in clinical trials. Despite its importance, QoL outcomes remain underreported or inadequately measured. Reliable data on toxicity, patient preferences, and outcomes is essential for informing clinical decisions, developing patient-centred treatments, and ensuring that survivors' evolving needs are addressed effectively.

Challenges for Metastatic Patients

The specific needs of metastatic cancer patients highlight inadequacies in current QoL measurement tools. While survival rates for some metastatic cancers have improved, patients often face ongoing treatment, persistent side effects, and considerable emotional and financial burdens. Tools designed primarily for early-stage cancer do not adequately reflect the experience of metastatic patients, who require tailored solutions.

Improving QoL for metastatic patients demands an emphasis on supportive care, palliative care, and emotional well-being. Comprehensive QoL frameworks must include effective pain management, integrated mental health services, and equitable access to care. Families and carers also require targeted support, as they experience significant emotional and practical challenges alongside patients..



Fatima Cardoso

President, ABC Global Alliance & Director of Breast Unit, Champalimaud Clinical Center





Luzia Travado, Co-Chair, Survivorship and Quality of Life Network

Pain Management and Psychosocial Care

Patrice Forget

Chair, Advocacy and Liaison, European Pain Federation





'Pain must be included as a quality indicator in cancer care to ensure it is properly addressed.'

Effective pain management remains a cornerstone of QoL improvement. Pain is one of the most common and debilitating symptoms for cancer patients, yet it is often underreported and inadequately addressed in clinical care. Recognising pain as a core quality indicator ensures it is systematically assessed and treated alongside other physical and psychosocial outcomes.

Psychosocial care is equally essential for addressing emotional distress, anxiety, and depression. Emotional well-being must be integrated into routine care plans to ensure a holistic approach to treatment. Distress should be recognised as a critical factor requiring equal attention, as unaddressed emotional suffering undermines patient outcomes and recovery.

Addressing these challenges requires comprehensive training for healthcare providers in the assessment and management of both pain and emotional distress. In addition, healthcare systems must provide access to mental health professionals as part of routine cancer care. The inclusion of psychosocial care metrics in qualityof-life frameworks can drive improvements in how emotional well-being is prioritised across healthcare systems.

The Role of Policy and Advocacy

Improving QoL requires systemic changes driven by policy and advocacy. Kateřina Konečná MEP, a member of the Committee on the Internal Market and Consumer Protection, highlighted legislative efforts to protect cancer survivors from financial discrimination. The Right to Be Forgotten ensures that survivors are not unfairly penalised by their medical history when applying for loans or insurance. While progress has been made in countries like France and Belgium, significant gaps remain across Europe, underscoring the need for harmonised legislation to ensure equal opportunities for all survivors.

The EU Beating Cancer Plan has introduced several initiatives aimed at enhancing survivorship care. Programmes such as the Cancer Survivor Smart-Card and the European Cancer Patient Digital Centre empower survivors by providing access to their health data, resources, and support systems. These tools facilitate care coordination and enable a patient-centred approach, helping survivors manage their health more effectively. Continued investment and implementation across Member States remain vital to realising the full potential of these initiatives.



Kateřina Konečná MEP Member, Committee on the Internal Market and Consumer Protection



'Survivors deserve a fair chance to rebuild their lives without facing unnecessary financial barriers.'

A Comprehensive Approach to Survivorship

Improving QoL for cancer survivors requires a comprehensive, systems-level approach that prioritises long-term well-being. National frameworks must standardise survivorship care pathways, ensuring all patients have equitable access to rehabilitation, pain management, psychosocial care, and long-term follow-up services.

Digital health solutions are increasingly central to survivorship care, offering scalable tools to address gaps in access and care delivery. Platforms such as smartCARE and EUonQoL provide innovative ways to measure QoL, facilitate care coordination, and empower patients to actively manage their health. Virtual clinics and telehealth tools have further demonstrated their ability to connect survivors with critical support, particularly in underserved regions.

Tailored approaches are essential for metastatic patients and those in palliative care. Addressing their unique challenges, including emotional, physical, and financial burdens, ensures that QoL improvements reach all individuals impacted by cancer, regardless of prognosis.

A Call to Action

The session delivered a clear call to prioritise quality of life as a fundamental pillar of cancer care and policy. QoL must be measured systematically to inform clinical decisions and ensure patientcentred outcomes. Tailored care pathways, comprehensive pain management, and integrated psychosocial care are essential to addressing the evolving needs of cancer survivors.

Legislative initiatives, such as the Right to Be Forgotten, play a key role in eliminating financial discrimination, ensuring survivors have equal opportunities to rebuild their lives. National



Jan Geissler, Member, ECO Patient Advisory Committee

frameworks and digital health solutions must standardise survivorship care, creating equitable access to services across Europe.

Improving quality of life is a shared responsibility for healthcare providers, policymakers, and advocates. By adopting patient-centred strategies, prioritising supportive care, and addressing systemic barriers, the cancer community can ensure that patients not only survive but also thrive in their post-diagnosis journey.

'Quality of life is not a luxury—it is a fundamental right for every cancer patient and survivor,' concluded Andrew Davies.

Jan Geissler

Member, ECO Patient Advisory Committee





'A systems-level approach is essential to ensure all cancer survivors receive the care and support they need.'



From left to right: Josephine Hegarty, Kateřina Konečná MEP; Speaking: Fatima Cardoso

KEY POINTS FROM THE SESSION

- Quality of life must become a priority in cancer care and policy to ensure patient-centred outcomes.
- Effective QoL measurement is critical for improving clinical decisions and developing tailored survivorship pathways.
- Pain management and psychosocial care must be integrated systematically to address physical and emotional challenges.
- Legislative initiatives like the Right to Be Forgotten are essential for eliminating financial discrimination against survivors.
- National frameworks and digital health solutions will standardise survivorship care, ensuring equitable access to services for all cancer survivors.

FIND OUT MORE

- Survivorship and Quality of Life Network
- <u>smartCARE</u>

Acknowledgements

We would like to thank the following organisations for their support and cooperation which made the European Cancer Summit 2024 such a success. We look forward to continuing these partnerships to achieve our common goals.



Save the Date: The next European Cancer Summit takes place on 19 & 20 November 2025



As the not-for-profit federation of member organisations working in cancer at a European level, the European Cancer Organisation convenes oncology professionals and patients to agree policy, advocate for positive change and speak up for the European cancer community.

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