

## Conclusions of the MAC Roundtable

### “Key Determinants of Inequalities in Cancer Survival across Europe”

(EP, 05 12. 2013)

Summary results of EUROCARE-5, the fifth cycle of the EUROCARE study of cancer survival in

Europe, were published by [The Lancet Oncology](#) on 5 December, 5th, 2013. The results were discussed at the EP at a MAC roundtable on 5 December ([Agenda](#) e Slides - Sant M.; De Angelis R.; Gatta G.; Berrino F.).

Population-based cancer survival research helps to identify inequalities in the outcome for each type of cancer by age, sex, socio-economic status (etc.). It enables international comparison of the overall effectiveness of health systems for cancer, and it contributes to assessment of national cancer control plans (24 out of 28 Member States have a national cancer plan). This type of research also suggests future cancer control strategies across Europe.

The entire EUROCARE database contains about 22 million records of patients diagnosed from 1978 to 2007 provided by 117 Cancer Registries in 29 European countries.

### Latest results from EUROCARE-5

- The number of [adults](#) surviving for at least 5 years after diagnosis has risen steadily over time in all European regions from 1999 to 2007 BUT cancer survival still varies widely between European countries
- Countries with lowest survival for most cancers (Bulgaria, Estonia, Latvia, Lithuania, Poland, and Slovakia) are in Eastern Europe. Here survival is below the European mean, particularly for good prognosis cancers like colon, rectum, lymphomas, and skin melanoma
- Nordic countries (with the exception of Denmark), central European countries such as Austria, Belgium, France, Germany, Switzerland, and Netherlands, and some countries in southern Europe (Italy, Portugal, and Spain), have the best survival for most cancer
- [Childhood cancer](#) remains a public health issue. Survival at 5 years from diagnosis for children (0-14 years) for all cancers combined is generally good, with 79% now surviving (2005-2007), up from 76% in 1999–2001. However, no progress has been achieved for paediatric malignancies with the poorest prognosis
- Even though we registered a promising increase in childhood cancer survival in Eastern Europe, there are still unacceptable disparities in survival of children and adolescents with cancer across the continent: survival in Eastern Europe is generally 10 to 20% lower than in Western Europe. Those disparities become larger for paediatric cancers with poor outcomes

As a conclusion, the roundtable participants ask Member States to ensure that public health research, specifically conducted on the basis of population-based disease registries, shall not be impeded by the new proposal on the General Data Protection Regulation. Public health research shall be granted with an exemption from consent for the patient registries, in order to permit the collection of complete, accurate and high quality data, which is needed to develop effective evidence-based policy decisions and to measure effectiveness of the latest. Therefore, we ask Member States to consider the following main points in future cancer health policy decisions:

- International studies on population-based cancer survival are vital to disclose inequalities across EU countries and are based exclusively on data from population cancer registries. In order to continue to provide high quality data, they need legislative and financial support, as well as recognition of their work by medical societies, patient organizations and policy makers. Mechanisms for such support need to have full endorsement at EU level and their importance to be stressed in the relevant EU documents - communications, programs, such as, for instance, Horizon 2020)
- Ad hoc-studies are necessary to investigate the reasons of such inequalities (e.g. access to early diagnosis and optimal treatments, organization of health care delivery)
- New studies are necessary to better address emerging issues related to the management of elderly patients and of survivorship including quality of life
- To reduce the childhood cancer survival gap in Europe, twinning programmes should be promoted i.e. pairing medical institutions in high-income countries with those in low/middleincome countries
- To ensure good clinical cancer care is important to follow evidence-based clinical guidelines covering the whole patient pathway: early detection, diagnosis, treatment, monitoring and palliative care. Preventive strategies are also vital phases of cancer care
- To address low survival, there is need for organizing cancer services to ensure that all patients received high quality cancer care strengthening the governance of cancer care and monitoring and benchmarking performance through better data

On December 17th,2013 Mr Alojz Peterle MEP has sent out a letter to his fellow MEPs to raise attention to the above conclusions, [click here](#) to access the document