

Tonio Borg

Member of the European Commission, responsible for Health

**Commissioner Borg delivers speech on
"Harnessing action on cancer as an EU
priority"**

*Check Against Delivery
Seul le texte prononcé fait foi
Es gilt das gesprochene Wort*

Tonio Borg, European Commissioner for Health, attends a European Parliament event "We care with love" on Harnessing action on cancer as an EU priority.

Brussels, Belgium, 14 February 2014

"WE CARE, WITH LOVE"

HARNESSING ACTION ON CANCER AS AN EU PRIORITY

EVENT HOSTED BY

MS CLAUDETTE ABELA BALCACCHINO, MEP (S& D MALTA)

14 FEBRUARY: 9:30 HRS

EUROPEAN PARLIAMENT, ASP A1G-2

SPEECH

Honourable Members of Parliament,

Ladies and Gentlemen,

Valentine's Day is a good day to talk about love and care for our loved ones.

Sadly, there can be very few amongst us who have not been affected by the news of a loved one being diagnosed with cancer – be they family or friends.

So I am grateful for the opportunity to speak at this important event and congratulate and thank our host – Ms Abela Baldacchino – for bringing us together to discuss cancer and care.

Just 10 days ago (4 February) was World Cancer Day – which this year was marked by a WHO report forecasting a dramatic rise in the number of people who will get cancer worldwide over the next two decades.

This report serves to underline the need to beef up our fight against cancer and in particular to strengthen prevention.

We have seen tremendous progress in the field of cancer in recent years – progress on which we can and must build for the future.

The number of people surviving cancer has steadily increased over recent years across Europe, according to the recent "EUROCORE 5" study.

About half of these people will be alive 5 years after their initial diagnosis of cancer. Increasingly, there is a life after cancer.

Cancer has been a central feature of European Union action on public health for many years, and much has been achieved.

Just this week, we concluded the Joint Action for a European Partnership for Action against Cancer.

One of the results of the Partnership is that today 24 out of the 28 Member States have implemented national cancer plans – including Malta, I'm very pleased to say.

But above and beyond the immediate results, Member States and partners have entered into a dialogue for better coordination at European level.

Such coordination promotes the exchange of information, avoiding duplication and overlaps, as well as providing mutual assistance.

National cancer programmes vary greatly in their scope, according to national resource availability, systems capacity, organization of services, geography, epidemiology and past experience.

However, all Member States face similar challenges in terms of the cancer burden and the need for sustainable, effective and responsive policies for patients and citizens.

Our Joint Action brought together Member States, stakeholders, experts, leaders, patients and citizens; and enabled them to share experience and knowledge on cancer services and policy. As such, this partnership approach has opened up new opportunities.

Our role at European level is indeed to assist and support Member States in this regard.

Building on the achievements of the first joint action, we will launch a new Joint Action on Comprehensive Cancer Control next month.

This will support Member States by providing a European benchmark as well as a roadmap to optimize cancer care, spanning from cancer prevention to palliative care.

Our goal is to develop a European Guide on Quality Improvement in Comprehensive Cancer Control.

The new Joint Action will also provide a Platform for Member States to discuss cancer topics and best practices. Improving the quality of cancer control will help us to address the persisting inequalities within the European Union.

An important further step in this direction relates to improving the quality of cancer screening.

The prospect of cure for cancer greatly increases if the disease is detected early. Well organized, nationwide screening programmes hold huge potential to save lives.

In 2003, the Council adopted a Recommendation on cancer screening, which set out principles of best practice in the early detection of cancer.

The Recommendation called on Member States to implement high-quality population-based screening programmes for breast, cervical and colorectal cancer.

To assist the Member States with screening, the Commission has produced European guidelines for quality assurance in cervical, breast and colorectal cancer screening and diagnosis.

The various activities at EU level in the field of screening demonstrate the EU added-value in overcoming inequalities.

Considerable achievements in cancer screening have resulted from coordinated work at EU level to support Member States in the implementation of national cancer screening programmes.

For example, a survey by the Commission's Joint Research Centre showed that in the field of breast cancer, screening in Europe has led to a clear improvement: 22 countries (out of the 25 who responded) now have in place population based screening programmes for breast cancer.

The Joint Research Centre is taking forward the development of a new edition of the breast cancer guidelines which would be linked to a voluntary system of accreditation for breast cancer services.

Before I conclude, one issue that is sometimes raised is whether there will be guidelines for screening of other types of cancer in addition to cervical, breast and colorectal cancer.

To be suitable for population-based screening, malignant tumours must meet certain scientific criteria. The disease must be common, sensitive to safe and uncomplicated detection, and more easily and effectively treated when diagnosed at an early stage.

Breast, cervical and colorectal cancers all meet these criteria. However, current evidence does not yet point to an appropriate balance between benefit and harm of population-based screening as regards prostate cancer.

Another area I would like to highlight is awareness raising and information to citizens.

More than one third of all cancers are preventable (the WHO estimates nearly half). Prevention offers the most cost-effective, long-term strategy for reducing the disease burden in Europe.

This is why primary prevention by tackling smoking, alcohol, unhealthy diets and physical inactivity is such a priority.

We will update the European Code against Cancer – a set of recommendations to help citizens avoid cancer - as a centrepiece in our efforts to raise awareness about prevention.

Of course in tackling risk factors, we go well beyond awareness-raising. The EU is just about to adopt strong legislation on tobacco products; and we are taking forward our strategies on nutrition and physical activity, and on alcohol-related harm.

All this is underpinned by our work to bring together cancer registries in a cancer information system hosted by the Joint Research Centre, as well as our considerable research investment in this area.

Finally, in order to strengthen the overall governance of our cancer work, I plan to examine options to revitalise the European Union Experts Group on Cancer.

Ladies and Gentlemen,

I hear your call loud and clear – your call for co-operation, for action, for fighting cancer as a top EU priority.

Let me take this opportunity to thank the European Parliament for its continuous support and encouragement.