

*Data extracted in July 2024.
Planned article update: August 2025.*

" In 2022, at least 80% of women (within the age range of screening programmes) in Denmark (2021 data), Finland and Sweden had been screened for breast cancer (using a mammography) within the previous 2 years. "

" In 2022, around three quarters of women (within the age range of screening programmes) in Sweden, Czechia and Ireland had been screened for cervical cancer within the previous 3 years. "

" In 2022, over half the people (within the age range of screening programmes) in Belgium, Denmark, Estonia, the Netherlands, Slovenia, Finland and Sweden had been screened for colorectal cancer within the previous 2 years. "

This article presents an overview of [European Union \(EU\)](#) statistics related to [cancer](#) screening for breast cancer, cervical cancer and colorectal cancer. This is 1 of several articles on cancer statistics, for information on [cancer statistics](#) and [Cancer statistics - specific cancers](#) , please refer to the respective articles. This article is one of a set of statistical articles concerning healthcare activities in the EU which forms part of an online publication on [Health in the European Union – facts and figures](#) .

Breast cancer screening

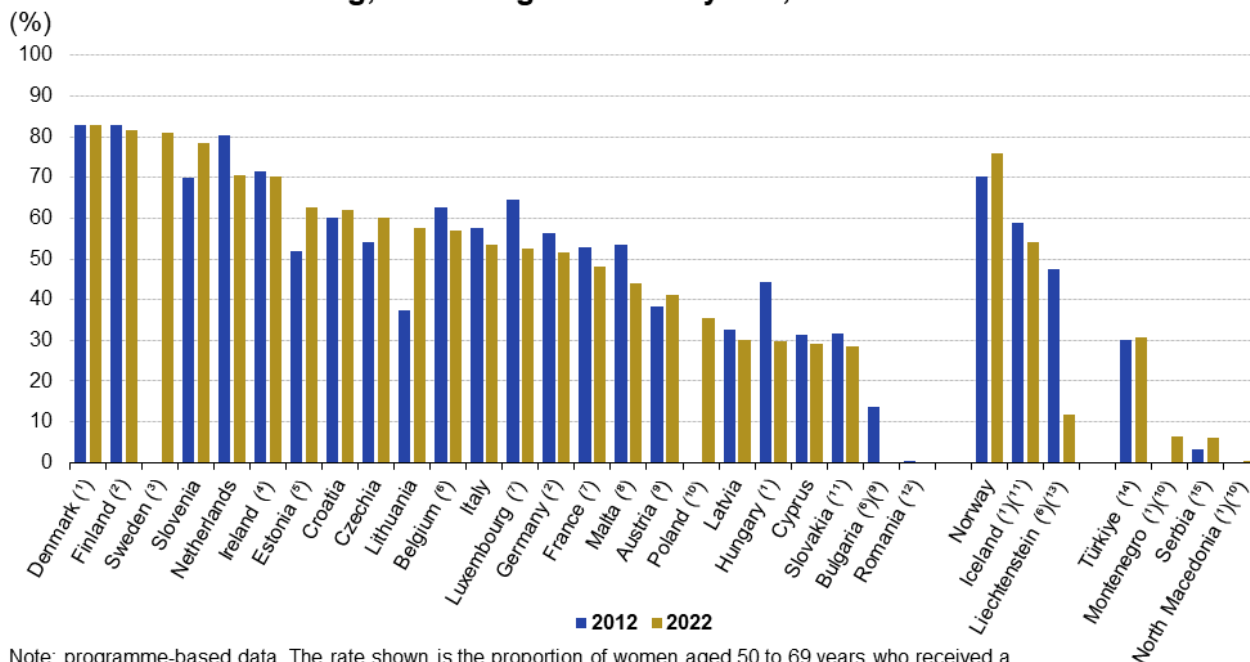
The indicator covering breast cancer screening as presented in Figure 1 is defined in line with the 2003 [Council Recommendation on cancer screening](#) (2003/878/EC).

The information presented for breast cancer screening is administrative data from screening programmes. The standard analysis is the proportion of women aged 50 to 69 years who had received a mammography within the previous 2 years; in practice, some countries use different age ranges. Overall, the rates for breast cancer screening across EU countries are somewhat higher than those reported for cervical cancer screening (see Figure 2) and much greater than those for colorectal cancer screening (see Figure 3).

Data on breast cancer screening rates are available for 23 EU countries, generally for 2022 (2021 data for Denmark and Hungary); see Figure 1 for footnotes, in particular concerning the age coverage. Among these EU countries, screening rates were below 40.0% in 5 countries, with the lowest share of 28.5% reported in Slovakia. Denmark (2021 data), Finland and Sweden reported screening rates of over 80%, while Slovenia also had a rate that was above 75%.

A comparison of data for the 2 years shown in Figure 1 indicates that breast cancer screening rates increased in 6 of the EU countries for which data are available. Data for Bulgaria are only available for 2015. The largest increases (in [percentage point](#) terms) were observed in Lithuania (up 20.1 points) and Estonia (up 10.6 points; note that the age range changed over time). In the 13 EU countries where screening rates fell between the 2 years shown, the decreases were generally less than 10.0 percentage points. Larger decreases were observed in Hungary (14.5 percentage points)(2012–21) and Luxembourg (-12.3 percentage points). See Figure 1 for footnotes, in particular concerning the age coverage.

Breast cancer screening, women aged 50 to 69 years, 2012 and 2022 (%)



Note: programme-based data. The rate shown is the proportion of women aged 50 to 69 years who received a mammography within the previous 2 years (or according to the specific screening frequency recommended in each country). This is shown as a proportion of women eligible for an organised screening programme. Greece, Spain and Portugal: not available.

(1) 2021 instead of 2022.

(2) 2022: estimate.

(3) Women aged 23–64 years. 2012: not available.

(4) Age group has changed from 50–64 years to 50–69 years. 2022: provisional.

(5) 2012: women aged 50–62 years.

(6) Break in series.

(7) 2022: provisional.

(8) 2012: women aged 50–59 years.

(9) 2015 instead of 2012.

(10) 2012: not available.

(11) Women aged 40–69 years.

(12) 2014 instead of 2012.

(13) As of 2014: women aged 23–65 years old.

(14) 2011 instead of 2012.

(15) Women aged 40–69 years. 2013 instead of 2012.

Source: Eurostat (online data code: hlth_ps_prev)

eurostat

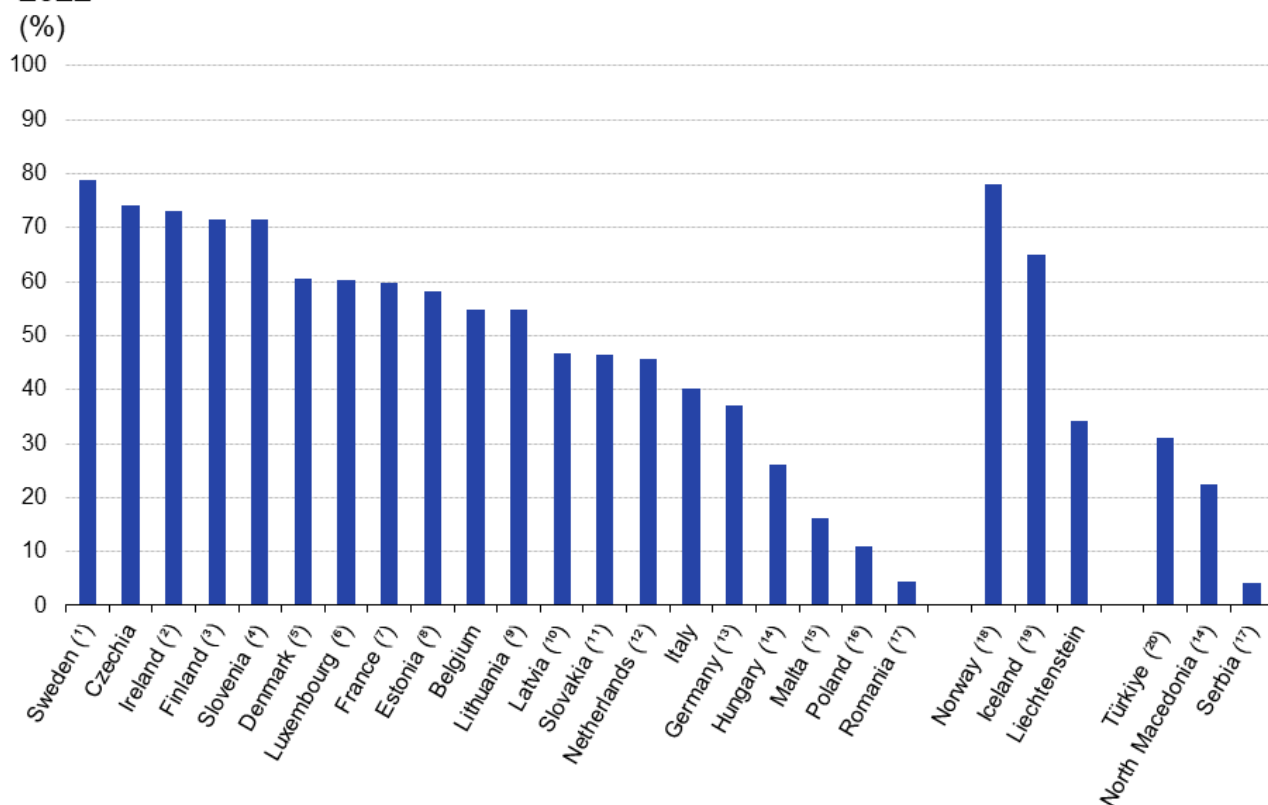
Figure 1: Breast cancer screening, women aged 50 to 69 years, 2012 and 2022 (%) Source: Eurostat (hlth_ps_prev)

Cervical cancer screening

The indicator covering cervical cancer screening as presented in Figure 2 is defined in line with the 2003 [Council Recommendation on cancer screening](#) (2003/878/EC). It concerns the population of women aged 20 to 69 years having been screened for cervical cancer within the previous 3 years (or according to the specific screening frequency recommended in each country). The data presented are administrative data from cervical cancer screening programmes.

Data are available for 20 EU countries, generally for 2022 (2021 for Denmark, France and Hungary); note that the age coverage and screening frequency vary for several EU countries – see Figure 2 for more details. Among these countries, cervical cancer screening rates peaked above three quarters (78.8%) in Sweden and nearly reached three quarters in Czechia (74.1%) and Ireland (73.1%). At the other end of the range, the proportion of women who had been screened for cervical cancer was 10.9% in Poland, 4.5% in Romania.

Cervical cancer screening rate, women aged 20 to 69 years, 2022



Note: programme-based data. The rate shown is the proportion of women aged 20 to 69 years who have been screened for cervical cancer within the previous 3 years (or according to the specific screening frequency recommended in each country). This is shown as a proportion of women eligible for an organised screening programme. Bulgaria, Greece, Spain, Croatia, Cyprus, Austria and Portugal: not available.

(¹) Women aged 23–64 years.

(²) Share of women aged 25–65 years screened within the previous 5 years. Provisional.

(³) Share of women aged 30–65 years who received an invite and were screened during the year. Estimate.

(⁴) Women aged 20–64 years.

(⁵) Share of women aged 23–64 years who received an invite and were screened during the year. 2021.

(⁶) Provisional.

(⁷) Share of women aged 25–65 years screened within the previous 3.5 years. 2021.

(⁸) Share of women aged 30–65 years who received an invite and were screened during the year.

(⁹) Women aged 25–60 years.

(¹⁰) Share of women aged 25–70 years who received an invite and were screened during the year.

(¹¹) Women aged 19 years or older who were screened during the year relative to those aged 19–69 years who received an invite during the year.

(¹²) Share of women aged 30, 35, 40, 45, 50, 55 or 60 years who received an invite and were screened during the year.

(¹³) Estimate.

(¹⁴) 2021.

(¹⁵) Women aged 25–42 years.

(¹⁶) Women aged 25–59 years.

(¹⁷) Women aged 25–64 years.

(¹⁸) 2019.

(¹⁹) Share of women aged 23–65 years screened within the previous 3.5 years. 2021.

(²⁰) Women aged 30–65 years.

Source: Eurostat (online data code: hlth_ps_prev)

eurostat

Figure 2: Cervical cancer screening rate, women aged 20 to 69 years, 2022 (%) Source: Eurostat (hlth_ps_prev)

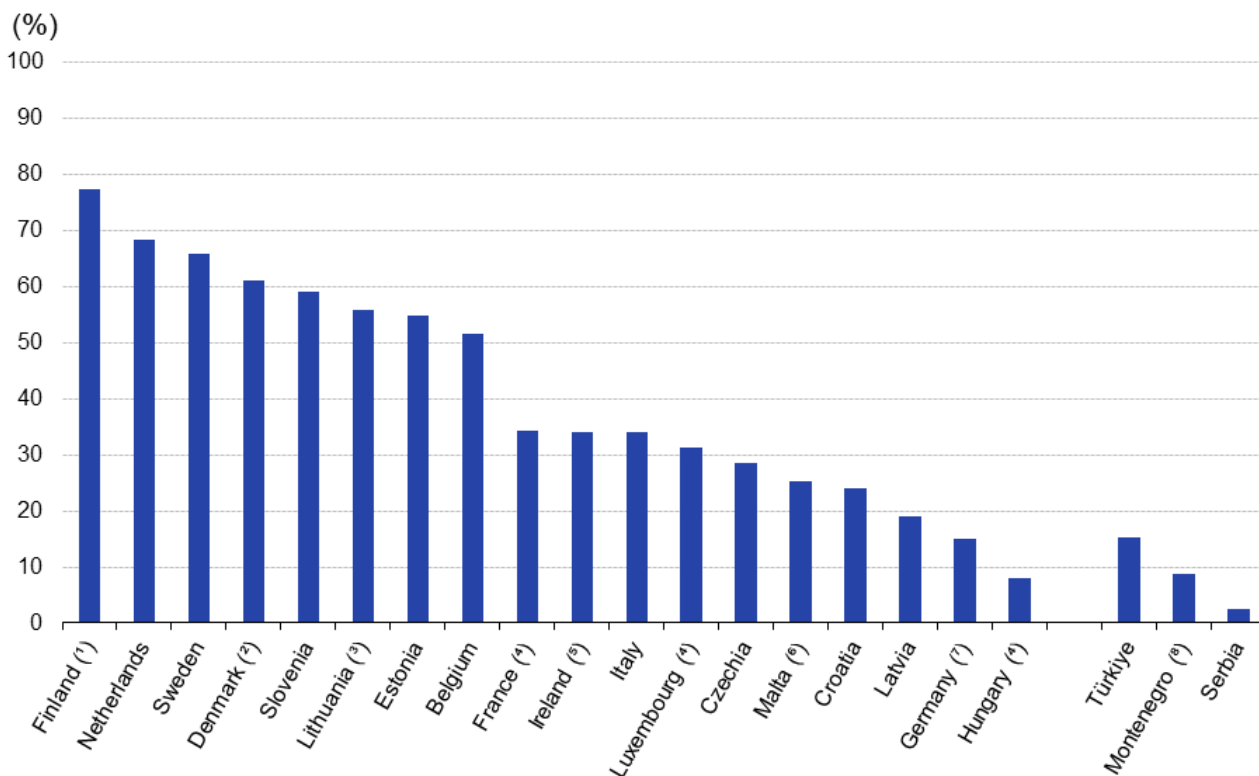
Colorectal cancer screening

Administrative data on colorectal screening are also from screening programmes and are presented in Figure 3. The indicators covering colorectal screening are also defined in line with the 2003 [Council Recommendation on](#)

[cancer screening](#) (2003/878/EC).

Data on colorectal cancer screening rates for 2022 are available for 18 EU countries (2021 for Denmark and 2019 data for Germany); note that the age coverage and type of screening vary for several EU countries – see Figure 3 for more details. Screening rates were above 50.0% in 8 of these countries, reaching 77.3% in Finland and 68.4% in the Netherlands. Rates below 20.0% were observed in Latvia (19.1%), Germany (15.0%; 2019 data) and Hungary (8.1%).

Colorectal cancer screening rate, people aged 50 to 74 years, 2022



Note: programme-based data. The rate shown is the proportion of people aged 50 to 74 years who have been screened for colorectal cancer within the previous 2 years (or according to the specific screening frequency recommended in each country). This is shown as a proportion of people eligible for an organised screening programme. Bulgaria, Greece, Spain, Cyprus, Austria, Poland, Portugal, Romania and Slovakia: not available.

⁽¹⁾ Estimate.

⁽²⁾ 2021.

⁽³⁾ Also includes people who underwent follow-up colorectal cancer tests based on the positive result of initial testing.

⁽⁴⁾ Provisional.

⁽⁵⁾ People aged 60–69 years. Provisional.

⁽⁶⁾ People aged 55–73 years.

⁽⁷⁾ People aged 50–55 years. Faecal occult blood test only. 2019. Estimate.

⁽⁸⁾ 2020.

Source: Eurostat (online data code: hlth_ps_prev)

eurostat

Figure 3: Colorectal cancer screening rate, people aged 50 to 74 years, 2022 (%) Source: Eurostat (hlth_ps_prev)

Source data for tables and graphs

- [Cancer screening statistics: tables and figures](#)

Data sources

This article presents data on preventive services from administrative data.

Healthcare resources and activities

Statistics on healthcare resources and healthcare activities (such as cancer screening) are documented in the background article [Healthcare non-expenditure statistics – methodology](#) which provides information on the scope of the data, its legal basis, the methodology employed, as well as related concepts and definitions.

Programme data

Breast cancer screening rates show the proportion of women (eligible for screening) that have been screened. This is based on the number of women aged 50 to 69 years who had received a bilateral mammography within the 2 years prior to the reference date (or according to the specific screening frequency recommended in each country) as a share of women eligible for an organised screening programme.

Cervical cancer screening rates show the proportion of women (eligible for screening) that have been screened. This is based on the number of women aged 20 to 69 years who have been screened for cervical cancer within the 3 years prior to the reference date (or according to the specific screening frequency recommended in each country) as a share of women eligible for an organised screening programme.

Colorectal cancer screening rates show the proportion of people (eligible for screening) that have been screened. This is based on the number of people aged 50 to 74 years who have been screened for colorectal cancer within the 2 years prior to the reference date (or according to the specific screening frequency recommended in each country) as a share of people eligible for an organised screening programme.

Administrative data on cancer screening is based on national cancer screening programmes. For 2022 data on cancer screening is not available for the following countries:

- Breast cancer screening: Bulgaria, Greece, Spain, Portugal, Romania
- Cervical cancer screening: Bulgaria, Greece, Spain, Croatia, Cyprus, Austria and Portugal
- Colorectal cancer screening: Bulgaria, Greece, Spain, Cyprus, Austria, Poland, Portugal, Romania and Slovakia

This may be due to the fact that some countries do not have official screening programmes, screening may be performed by general practitioners, or because countries are not able to collect programme data.

For country specific notes on these data collections, please refer to the annexes at the end of the national metadata reports accessible from links at the beginning of the [European metadata report](#).

The [Healthcare non-expenditure statistics manual](#) provides an overview of the classifications, both for mandatory variables and variables provided on a voluntary basis.

Legal basis

Health care non-expenditure statistics [Regulation \(EC\) No 1338/2008](#) on Community statistics on public health and health and safety at work, implemented through Commission [Regulation \(EU\) 2294/2022](#) as regards statistics on healthcare facilities, healthcare human resources and healthcare utilisation.

Context

Primary prevention offers the most cost-effective, long-term strategy for reducing the burden of diseases across the EU. It involves tackling major [health determinants \(see Chapter 3 of Health in the European Union – facts and figures\)](#), such as [smoking](#), [unhealthy diets and physical inactivity](#). The [European Commission](#) has supported many projects related to health determinants and health promotion in general.

Secondary prevention aims to reduce mortality by early detection, for example, the detection of cancer through screening. In December 2003, a [Council Recommendation on cancer screening](#) was adopted, setting out principles of best practice. This invited EU countries to take common action to implement national population-based screening programmes for breast, cervical and colorectal cancer, with appropriate quality assurance at all levels.

In 2014, the European Commission released a [report on the implementation of the 2009 Communication on action against cancer: European partnership and the 2nd implementation report on the 2003 Council Recommendation](#).

A proposal to update the 2003 Recommendation to reflect the latest available scientific advice was adopted by the European Commission in September 2022 and in December 2022, the Council of the European Union adopted a [new approach on cancer screening](#). This aims to improve early detection throughout the EU. This new approach is a key element of the EU supported cancer screening scheme. The scheme is 1 of the flagship initiatives of the Europe's [Beating Cancer Plan](#), a key pillar of a stronger [European Health Union](#).

Indicators on breast, cervical and colorectal cancer screenings are included in the health services chapter of the [European core health indicators \(ECHI\)](#).

Other articles

Online publications

- [Health in the European Union – facts and figures](#)
- [Disability statistics](#)

Health status – selected diseases and related health problems

- [Cancer statistics overview](#)
- [Specific cancers](#)

Healthcare activities

- [Hospital discharges and length of stay](#)

Methodology

- [Healthcare non-expenditure](#)

General health statistics articles

- [Health statistics introduced](#)
- [Regional health statistics](#)

Database

- [Health \(hlth\)](#), see

Health care (hlth_care)

Preventive services (hlth_prev)

Preventive cancer screenings - programme data (hlth_ps_prev)

Self-reported last breast examination by X-ray among women by age and educational attainment level (hlth_ehis_pa7e)

Self-reported last cervical smear test among women by age and educational attainment level (hlth_ehis_pa8e)

Self-reported last colorectal cancer screening test by sex, age and educational attainment level (hlth_ehis_pa5e)

Dedicated section

- [Health](#)

Publications

Atlas

- [Health statistics – Atlas on mortality in the European Union](#)

News releases

- [Preventive care: 6% of EU's health expenditure in 2021](#)
- [Breast cancer screening rates across the EU](#)

Methodology

- [Health care resources](#) (ESMS metadata file – hlth_res)

External links

- [European Commission – Public health](#) , see
 - [European core health indicators \(ECHI\)](#)
 - [Non-communicable diseases](#)
- [OECD – The future of health systems](#)
- [World Health Organization \(WHO\)](#)
 - [WHO – Global Health Observatory \(GHO\)](#)
 - [WHO – Health system governance](#)