

ESMO RESPONSE TO THE ROADMAP FOR EUROPE'S BEATING CANCER PLAN

Representing over 25,000 members from over 160 countries, the European Society for Medical Oncology (ESMO) welcomes the consultation on the roadmap paving the way for Europe's Beating Cancer Plan. ESMO considers the following as priorities within the key pillars, as well as neglected areas we feel must be reflected in the Plan.

PREVENTION:





1. Cancer registries:

Using interoperable, population-based registries effectively will be crucial for creating Member State-specific prevention policies. They should be appropriately funded and General Data Protection Regulation (GDPR) should not be an obstacle to their work (see below).

2. Awareness:

ESMO will develop educational tools for patients & professionals, including teach the teacher initiatives; collaborate with the International Agency for Research on Cancer (IARC); work with disease-based societies & other organizations; and integrate prevention into ESMO's annual, tumour-specific and regional congresses to collectively aim to achieve the 40% reduction.

EARLY DIAGNOSIS:

ESMO supports the evidence-based development of screening programmes and provides guidance in its guidelines.

TREATMENT:





1. Harmonization of the standard of care:

ESMO currently has over 80 clinical practice guidelines, updated in real-time, and used by most oncologists globally. Given that in most EU countries there is no measure of the implementation of standard of care, it would be important to invest in implementation of guidelines, to ensure that national and local care pathways are in line with them. This assessment will reduce mortality and improve overall survival rates of cancer patients. It will also highlight the discrepancies in the availability of medicines, which also needs to be addressed.

2. Prioritizing cancer medicines:

The ESMO-MCBS is a tool, assessing EMA-approved medicines, for a rational and structured approach to derive a relative ranking of the Magnitude of Clinically Meaningful Benefit of anti-cancer treatment. It is being used by various countries across the world to prioritize cancer medicines. With the incoming wave of high-cost treatments in similar settings for cancer, there is a need to allow EU Member States to choose medicines appropriately, including the use of biosimilars. A concrete example of countries using the ESMO-MCBS: WHO cancer report 2020 (p. 45).



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Patient guides:

The ESMO Patient Guides are designed to assist patients, often in their own language, to better understand the nature of different types of cancer and evaluate the best available treatment choices. Eg: Patient Guide on Survivorship et al.



SPECIFIC AREAS FOR EU COOPERATION:

1. Medicines shortages:

Shortages of inexpensive, essential medicines are a growing public health emergency that require a concerted effort at EU level;

2. Health Technology Assessment:

Please see ESMO-MCBS above, regarding the joint-clinical assessment of medicines.

NEGLECTED AREAS?

1. Data Protection:

The harmonized implementation of the GDPR is crucial for health research. It would be vital to implement the principle of a one-time consent for retrospective clinical research and biorepositories, & the derogation from the consent requirement for population-based cancer registries across the EU 27.

2. Workforce:

ESMO provides recommendations for a global curriculum in medical oncology: a set of common guidelines to ensure that all patients have an equal chance of receiving treatment from well-trained physicians. ESMO is also collaborating with the WHO to develop a series of tools and resources including one on health workforce optimization for cancer care.

3. Rare cancers:

As 20% of all cancers are rare, their specificities make them closer to common cancers. In order to improve the quality of diagnosis and the standard of care, it is vital to rely on the expertise of the European Reference Networks (e.g. EURACAN) as well as on the successful multi-stakeholder initiative, Rare Cancers Europe and the Joint Action on Rare Cancers' overarching deliverable: the Rare Cancer Agenda 2030.