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Cancer prevention policy in the EU: Best practices are now well recognised; no reason for countries to lag behind



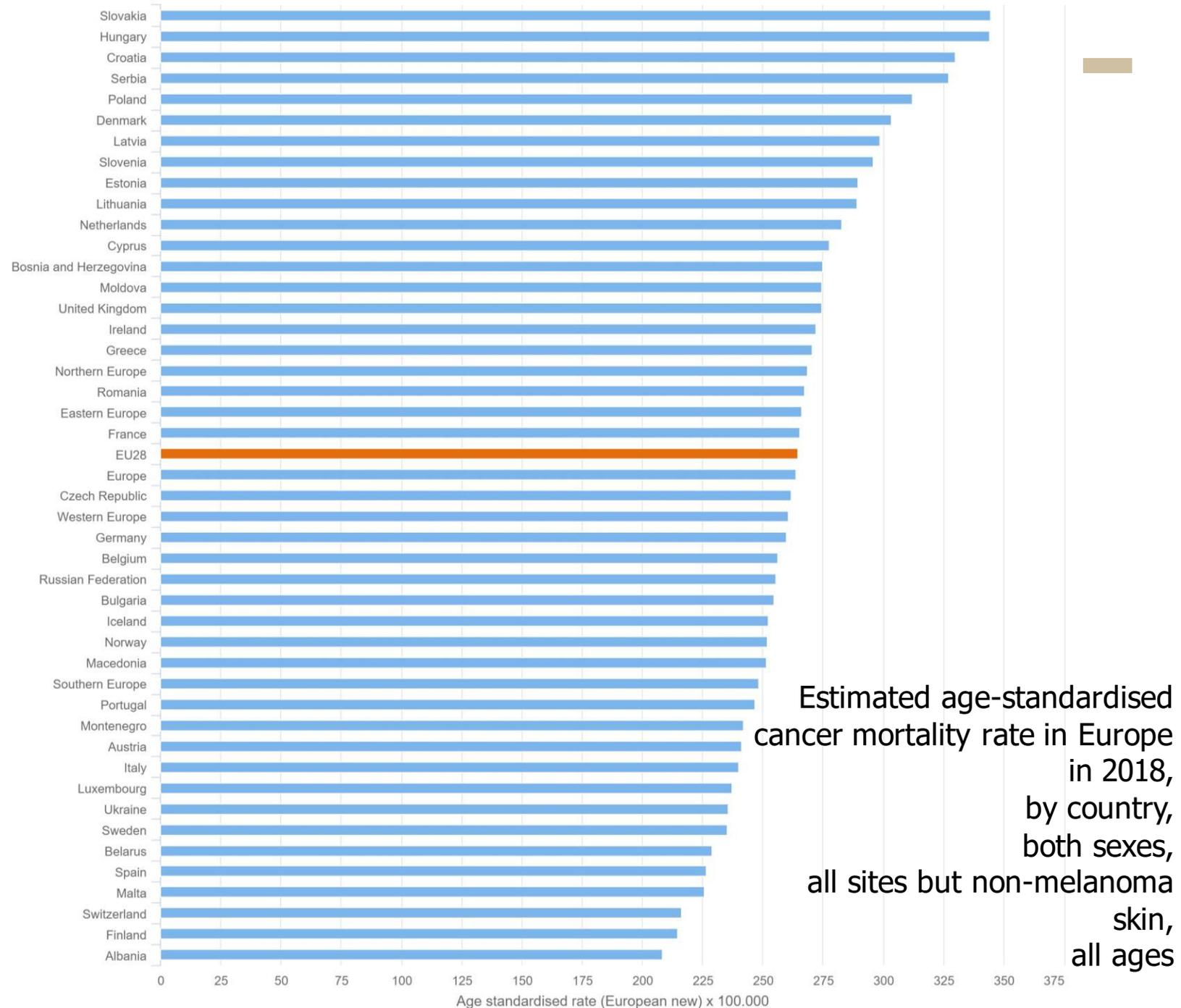
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BACKGROUND

- Cancer is a major public health problem in the EU
 - About 3 mill new cancer cases in 2018 (1.7 mill cases in men and 1.5 mill in women)
 - Over 1.4 mill cancer deaths (800,000 in men and 600,000 in women) --> **26% all deaths**
 - Most common: prostate, lung and colorectal cancers in men; and breast, colorectal and lung in women
- Around 40% cancer cases can be prevented through practices and actions targeted towards risk prevention at the individual and population levels
 - Prevention offers the most cost-effective long-term strategy for the control of cancer
 - The European Code against Cancer stands out among other initiatives for its clarity and accessibility as a short set of recommendations for the general public
 - It also acts as a guide to aid development of national health policies in cancer prevention and provides an important basis for health promotion

➤ Large regional differences in cancer burden within Europe

➤ Wide international heterogeneity in the extent to which cancer control structures had been implemented in Europe



NATIONAL CANCER CONTROL PROGRAMME

- National Cancer Control Programme (NCCP) is a public health programme that, by implementing systematic, equitable and evidence-based strategies for prevention, early detection, diagnosis, treatment and palliation, will reduce the number of cancer cases and deaths and improve quality of life of cancer patients [WHO 2002]
- NCCP offers the most rational means of achieving a substantial degree of cancer control, even where resources are severely limited, by identifying and implementing priorities for action and research
- Most NCCPs, Plans or Strategies include as main elements:
 - primary prevention (health promotion and environmental protection),
 - secondary prevention (screening and early detection),
 - integrated care and organization of services,
 - and palliative care
- Research, training and quality control elements are also frequently mentioned

- Definitions of programme, plan and strategy varies among countries (plan and programme are often interchangeably) --> **NCCPs = all programs, plans or strategies**

- Searched for the most recent and comprehensive NCCPs in:
 - International Cancer Control Partnership (ICCP)
 - European Partnership for Action Against Cancer (EPAAC) and the Cancer Control (CanCon) Joint Actions
 - With EPAAC, EC called upon the Member States to set up National Cancer Plans or Strategies by the end of 2013
 - 2 surveys performed to inform EU policymakers about the extent to which this goal has been achieved
 - WHO Non-communicable Disease Document Repository
 - Analysis published in 2009 based on 19 publicly available NCCPs (12 of the countries studied had yet to formulate NCCPs)

- *No internationally agreed format for a NCCP nor any commonly accepted framework for analysis of their impact*

RESULTS

- For all the 28 EU countries, at least one of the most recent documents was identified except for Bulgaria, Croatia and the Slovak Republic
- 8 countries have NCCPs; 11 countries have Cancer Control Plans; 6 countries have Cancer Control Strategies
 - Cyprus has a Strategy as well as an Action Plan;
 - UK: Northern Ireland has a NCCP, Scotland and Wales have a Cancer Control Plan, and England has a Cancer Control Strategy
 - Romania has announced in 2016 the launch of an Integrated Multi-Annual National Cancer Control Plan for 2016–2020 (document not found by the authors)
- Different timelines and number of editions of NCCPs
 - Denmark, England, France and Malta are acting on the basis of a 3rd or 4th NCCP

European Code Against Cancer

12 WAYS TO REDUCE YOUR CANCER RISK

- The ECAC offers an exceptional public health tool to support governments to inform policy formulation, in the implementation of their cancer control strategies and policies, as well as feeds into public awareness campaigns on cancer prevention
- Malta and Slovenia have recently launched their comprehensive National Cancer Plans for 2017–2021 following the structure proposed by the ECAC, stressing preventive actions to reduce the increasing number of cancer burden in the country
- Spain, Poland, Cyprus, Hungary and Ireland also mention the ECAC in their NCCPs

- *Little research comparing the effect of national preventive policies on cancer incidence and mortality*
- Evaluations focused on very specific interventions, such as tobacco control or screening
- Only 2 quantitative studies on the direct impact of NCCPs on national cancer burden found
 - England: little evidence of direct impact of the effectiveness of the 2000 NHS Cancer Plan and related national cancer policy initiatives, on one year cancer survival
 - France: 2003–2007 Cancer Plan included behavioural changes & environmental risk factors; additional objectives (e.g. sedentary lifestyle, prevention of infections)



→ none of these objectives can be considered achieved (evaluation report)

- Mackenbach *et al.* 2013: compared quantitatively the performance of 43 European countries in 11 areas of health policy (including some cancer policies)
 - Substantial differences between implementation and intermediate and final health outcome (e.g. tobacco and alcohol control)
 - Wealthier countries had higher levels of fruit and vegetable consumption, but also a higher proportion of fat in their diets
 - Higher mortality from cervical and breast cancer in countries without a population-based screening programme (in comparison to neighbouring countries)
 - **Gaps in information about policies implementation and intermediate and final health impact**

→ *Existing comparative analyses of health policies mostly based on policymakers' reports*

CONCLUSIONS

- Prevention offers the greatest public health potential and the most cost-effective long-term cancer control strategy
- Still important differences in health in the EU (i.e. cancer incidence and mortality) partly due to deficits in the implementation of best practices
- Need to formulate sustainable, effective and responsive policies for patients and citizens
- Effective and efficient NCCP implementation needs competent management in:
 - planning: to identify priorities and resources
 - implementation, monitoring and evaluation: to organize and coordinate those resources to guarantee sustained progress to meet the planned objectives

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- No simple relationship between adoption or implementation of a plan and beneficial public health outcomes
 - Despite Denmark, UK, France or the Netherlands being earliest adopters of comprehensive plans, they have incidence and mortality above the EU average
 - Time-lag: effective implementation → behavioural change → impact on outcome
 - The lack of an accepted framework to aid formulation of NCCPs
 - Hamper the analyses of the degree of implementation of policies
 - + scarce evidence on policies effectiveness
 - + the population health impact
 - *The ECAC provides a solid backbone, based on evidence, for supporting NCCPs by giving two clear messages*
 - (1) *cancers can be avoided*
 - (2) *cancers can be cured*



THANK YOU!



GO RAIBH MAITH AGAT



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hvala dank u danke mulțumesc
paldies aitäh köszönöm merci obrigado
grazie tak kiitos efharisto
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