Call to Action: Fighting lung cancer together as equals

Lung cancer is the leading cause of cancer death in the European Union¹, accounting for approximately 20% of all cancer deaths in Europe². However, given this burden and scope, lung cancer has not received the attention warranted in Europe's Beating Cancer Plan.

The European Commission has recently published a revised Council recommendation on cancer screening³, extending population-based screening to several new cancer types, including lung cancer. We believe Europe's Beating Cancer Plan,⁴ presents an unprecedented opportunity to improve lung cancer care, and other related cancers, including rare thoracic cancers, by reducing inequalities through the measurement of treatment rates and driving access to care across the entire disease pathway, from prevention, to diagnosis, treatment, and survivorship.

We are in a crucial phase of the Plan's implementation and ahead of the Plan's review in 2024, now is the time to act to ensure Europe turns the tide in the fight against cancer.

We call for:

Improving prevention, ensuring earlier diagnosis and driving health literacy:

Early diagnosis and screening may have a marked influence on the timing and effectiveness of getting treated. Therefore, we call on:

- European Commission and Member States to implement and build upon the existing prevention measures defined in Europe's Beating Cancer Plan with regards to tobacco consumption and air pollution (e.g. radon and asbestos).
- European Commission to deliver on the commitment to publish the revised European Code Against Cancer in 2024, as laid out in Europe's Beating Cancer Plan, encouraging European citizens to self-manage cancer risk factors and participate in cancer screening programmes for additional cancer types as proposed in the revised Council recommendation on cancer screening.
- **Member States** to adopt and implement the revised Council Recommendation on lung cancer screening as proposed by the European Commission with world-leading ambition, commitment and determination, building on the targets set and reducing geographical disparities both between and within EU countries and regions.
- European Commission to launch an initiative to develop European Guidelines and Quality Assurance schemes for lung cancer – drawing on the success of the breast and colorectal cancer initiatives – as considered in the report of the Special Committee on Beating Cancer "Strengthening Europe in the fight against cancer – towards a comprehensive and coordinated strategy" adopted on 16th February 2022.
- **Civil society** to establish lung cancer-specific patient groups in all Member States in order to address the specific needs of lung cancer patients, including rare thoracic cancers

Ensuring faster patient access to modern diagnostic tests and treatments:

The treatment of lung cancer has shifted from a one-size-fits-all approach to personalized treatment. However, state-of-the-art lung cancer medicines require prior diagnostic testing. We call on:

• The European Commission to encourage Member States to participate in the 'Cancer Diagnostic and Treatment for All' initiative, laid out in Europe's Beating Cancer Plan, to improve access and reimbursement to comprehensive genomic profiling through next-generation sequencing (NGS) technology well as PD-L1 testing.

¹ https://ec.europa.eu/eurostat/statistics-explained/index.php?title=Cancer_statistics_-_specific_cancers

² https://www.erswhitebook.org/chapters/lung-cancer/

³ https://health.ec.europa.eu/publications/proposal-council-recommendation-cr-strengthening-prevention-through-early-detection-new-approach_en

⁴ https://ec.europa.eu/commission/presscorner/detail/en/ip_21_342

- Member States to establish Rapid Care Pathways to guide the movement and referral of lung and rare thoracic cancer patients between primary, secondary and tertiary care and EURACAN European Reference Networks and European Commission to deliver on the commitment to provide programmes of the Inter-specialty training programme, to support interdisciplinary collaboration among lung cancer healthcare professionals, such as pulmonologists and medical oncologists.
- The European Commission and Member States to support the training and availability of specialised and dedicated nurses to guide lung and rare thoracic cancer patients through the treatment process and provide physical and psychological support.
- European Commission to advocate for inclusion in the European Guidelines a drug treatment rate⁵ target for advanced non-small cell lung cancer of 75%, as indicated through the benchmark based on guidelines by the European Society for Medical Oncology (ESMO)⁶.
- **Member States** to improve access to modern and effective lung cancer medicines by expediting reimbursement approval.
- Member States to work towards greater implementation of cross-border clinical trials for lung cancer patients with rare mutations, and for rare thoracic cancer patients, and supporting access to highly specialized centers from the EURACAN European Reference Network

Enhancing data collection on treatment rates and their inclusion in the Cancer Inequalities Registry:

Ensuring and coordinating European action on cancer care requires reliable and relevant data to guide initiatives and drive patient outcomes. In this regard, we call on:

- European Commission and Member States to collaborate in the identification of best practices for data collection, storing and processing of treatment rates through the establishment and expansion of robust regional and national cancer information systems across the European Union.
- **European Commission** to work towards the inclusion of drug treatment rates for lung cancer in the Cancer Inequalities Registry, by the publication of the 2nd country-specific assessment report in 2025.
- **Member States** to act with commitment and ambition on country-specific assessments on disparities in cancer care identified through the Cancer Inequalities Registry and forthcoming reports in February 2023.
- **European Commission** and **Member States** to collaborate on the establishment of National Comprehensive Cancer Infrastructures in all Member States, and establish an EU Network of these centres. This has been endorsed in the Czech Presidency's Call to Action on Modern Cancer Control, and by Ministries of Health at the Informal Meeting of Health Ministers on 6th-7th September 2022.

We call on:

- political leaders to commit to continuing the legacy of Europe's Beating Cancer Plan in the next Commission mandate with a view to the next European Parliament elections in 2024 and nomination of Spitzenkandidaten.
- the European Parliament to guide the Commission's mid-term review of Europe's Beating Cancer Plan, through a European Parliamentary report in 2024.
- future Presidencies of the Council of the European Union to build on the foundations of their predecessors, and to continue the fight against cancer throughout the Union building on the Council screening recommendation and setting early diagnosis and treatment targets as outlined in this Call to Action.

⁵ 'Drug treatment rate' is defined as the ratio of the number of patients treated with systemic therapy and the number of potentially eligible patients for such systemic therapy in Hofmarcher T, Lindgren P, Wilking N. *Diagnosed but not treated: How to improve patient access to advanced NSCLC treatment in Europe.* IHE Report 2022:2. IHE: Lund, Sweden.

⁶ Planchard D, Popat S, Kerr K, Novello S, Smit EF, Faivre-Finn C, et al. *Metastatic non-small cell lung cancer: ESMO Clinical Practice Guidelines for diagnosis,* treatment and follow-up (update 15 September 2020). Ann Oncool. 2018;29(Supll 4):iv192-iv237.

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More in the process of being confirmed.