

Lung Cancer Europe (LuCE) strongly supports the upcoming WHO resolution "Promoting and prioritising an integrated lung health approach", scheduled for adoption at the 78th World Health Assembly (19–27 May, Geneva). As the voice of people impacted by or at risk of lung cancer across Europe, LuCE urges Member States—especially in the EU—to turn the resolution's commitments into concrete national actions. This includes prioritising equitable access to early detection and treatment of lung cancer, which the resolution explicitly reinforces by: acknowledging the impact of stigma on access to early diagnosis and treatment; calling for integrated national policies that incorporate lung cancer within primary healthcare systems; urging the development of evidence-based guidelines for early detection and diagnosis; and highlighting the need for access to affordable, quality-assured diagnostics, medicines and technologies for both communicable and noncommunicable lung diseases. These elements are essential to closing the gap in lung cancer outcomes across Europe.

Europe accounts for just 10% of the world's population but <u>over 21.6% of global lung cancer cases</u>: Lung cancer is Europe's deadliest cancer, and yet early detection - the most powerful intervention for saving lives - remains vastly underdeveloped. Within the EU-27, lung cancer incidence and <u>mortality rates vary more than two-fold</u>, with the lowest rates observed in Sweden (rate of 32.5 deaths per 100 000 inhabitants) and the highest in Hungary (rate of 77.9 deaths per 100 000 inhabitants). These disparities are reflective of systemic inequities in access to screening, diagnosis, and treatment.

### A call for screening targets and implementation support

LuCE calls on European governments to commit to national lung cancer screening strategies that:

- Include minimum population-level targets adapted to national risk profiles
- Ensure access to low-dose computed tomography (LDCT) screening for all high-risk individuals,
  regardless of geography, income, or education
- Support integration with primary care, as outlined in the WHO resolution
- In lower-capacity regions, Al-enabled chest X-rays may support triage where LDCT is not yet feasible, though they are less sensitive for lung cancer detection.
- Include pathways to timely diagnosis, specialist referral, and quality treatment, including appropriate management of incidental findings, because screening without follow-up is not quality care.
- Embed evidence-based tobacco cessation services as a standard component of lung cancer screening, to improve health outcomes and support long-term risk reduction.



#### Why the EU Must Lead

Increased spending on diagnosis, treatment and care without improved survival is unsustainable: Between 2013 and 2021, a Dutch study showed that monthly expenditures for <u>treating lung cancer rose by 55% in initial care and 148% in continuing care</u>, while mortality remained largely unchanged. In 2021, €433 million more was spent on lung cancer care compared to 2016 in the Netherlands alone. Risk reduction and early diagnosis not only save lives, but also reduce long-term health system strain. Lung cancer is projected to cost the global economy <u>over €3 trillion between 2020 and 2050</u>, and with Europe accounting for approximately 21.6% of global lung cancer cases, its share of this burden is both substantial and preventable.

Tackling this burden also requires action on environmental determinants of lung cancer. The WHO resolution highlights the role of outdoor and indoor air pollution and radon exposure as major preventable risk factors. However, EU policy responses—such as the Ambient Air Quality Directive (Directive EU 2022/2284) and the Basic Safety Standards Directive (Council Directive 2013/59/Euratom)—often operate in parallel to health policies without strategic coordination. LuCE calls for greater integration across these frameworks, to ensure that environmental regulations are explicitly aligned with lung health goals and cancer prevention strategies.

Notably, while the EU Council updated its recommendations on cancer screening in 2022 to include lung cancer, and EU support has backed important initiatives such as the SOLACE project, the recommendation still lacks specific targets, detailed implementation plans, and enforcement tools. As emphasised by the Lung Cancer Policy Network, the evidence base for low-dose CT (LDCT) screening is strong, and Member States should be supported to move beyond pilot projects toward full national rollouts. Without clearer milestones and review mechanisms, this inclusion risks remaining symbolic. The WHO resolution provides a timely opportunity to refocus on implementation—through actionable commitments, dedicated funding, and equity-driven national strategies.

This resolution gives Europe the opportunity to lead by example—by using the proposed WHO framework to accelerate and reinforce the lung cancer objectives already embedded in Europe's Beating Cancer Plan, the EU HTA Regulation, and national strategies. With this alignment, Member States can scale screening and actively reduce health inequities.

Although Europe bears a disproportionate share of the global lung cancer burden, only Romania has joined the co-sponsorship of the WHO resolution on integrated lung health. Particularly given the resolution's alignment with Europe's Beating Cancer Plan, LuCE calls upon EU Member States to actively support the resolution and reflect its priorities in national policy and practice, regardless of formal sponsorship.



#### Putting People First

In line with the resolution's call for multisectoral and participatory approaches, LuCE emphasizes the inclusion of people living with or at risk of lung cancer in the design, implementation, and evaluation of lung health strategies. Tackling stigma, ensuring trauma-informed communication, and involving patients in national program governance are essential to achieving truly equitable care.

As a pan-European alliance representing people impacted by lung cancer in over 26 countries, LuCE has long championed equity through both policy and practice. Its *Get Checked!* Campaign, now in its fifth year, promotes education and awareness across the patient journey, from symptom awareness to diagnosis and testing, with content available in 17 languages and endorsed by major European associations. The campaign also actively challenges stigma by confronting harmful stereotypes in language and imagery, and positions LuCE at the forefront of efforts to shift public perceptions and promote a more compassionate, informed understanding of lung cancer. This focus on increasing awareness, and empowerment also underpins LuCE's wider work on access to treatment and patient-led advocacy. LuCE's *ATLAS* project maps real-world access to innovative treatments across the EU, highlighting disparities that must inform policy. Through its educational programme, LuCE has delivered 29 webinars and an education and capacity building programme that has helped to strengthen patient leadership and cross-border collaboration.

LuCE is actively promoting health equity through participation in EU-funded projects and IHI programmes that address key barriers across the lung cancer care continuum. SOLACE, focused on advancing equitable lung cancer screening across diverse European populations, stands out for its emphasis on underserved communities and geographic inclusivity. Complementing this, LuCE contributes to initiatives such as I3LUNG (AI for personalised lung cancer care), GUIDE.MRD (peoplecentered precision oncology), IDERHA (an open, disease-agnostic, federated data space for health), and SPACETIME (biomarker discovery and cancer prevention). Together, these projects tackle critical gaps in early detection, diagnostics, and personalised treatment—while integrating patient perspectives to shape inclusive and future-oriented policy frameworks.

These initiatives position LuCE not just as an advocate, but as a practical partner in achieving equitable lung cancer care across Europe.



#### Conclusion

LuCE urges European governments to seize the momentum of this WHA resolution and place **early detection and equitable access to care** at the centre of lung health strategies. With clear targets, sustained investment, and community-led implementation, we can shift the trajectory of lung cancer in Europe - and ensure no one is left behind.