



Brussels, 18 February 2022

All.Can feedback on the EU Cancer Screening Recommendation update

All.Can welcomes the opportunity to respond to the European Commission's call for evidence to update the EU Cancer Screening Recommendation.

All.Can is a global, non-profit, and multi-stakeholder organisation aiming to drive measurable improvements in cancer care efficiency, to ensure equitable access to quality care for patients while contributing to healthcare systems' sustainability.

For All.Can, efficient cancer care delivers the best possible health outcomes using the human, financial, infrastructural and technological resources available, with a focus on what really matters to patients and to society. Efficiency is driven by promoting early and accurate diagnosis through 2 levers:

- Primary care, evidence-based screening, diagnostic capacity, effective referral
- Personalised risk grouping and screening

Accordingly, All.Can fully supports the Europe's Beating Cancer Plan and the new EU Cancer Screening Scheme to reinforce Member States' diligent screening of European citizens who would benefit from it. We appreciate the Commission's ambition to extend screening to other types of cancers including lung, prostate and gastric cancers. Screening programmes may be considered efficient if they help reach populations at highest risk of cancer, enable earlier diagnosis and improve outcomes – therefore, it is crucial to develop a robust evidence base to inform which population groups should be targeted, and refine the methodology and technology to deliver them.

In our 2019 patient survey¹, around 1/4 respondents singled out initial diagnosis as the area of cancer care where they experienced most inefficiency. 32% of respondents whose cancer was detected outside of a screening programme reported that it was first misdiagnosed as something else: this rate was 41-51% for gastric, sarcoma, head and neck, colorectal/bowel and gynaecological cancers.

Late diagnosis and misdiagnosis can delay or limit treatment, causing poorer outcomes, a lower likelihood of survival, and higher care costs.^{2,3,4} A delay as short as 4 weeks increases mortality from various common cancers, with longer delays being increasingly detrimental.⁵ Rare forms of cancer are particularly likely to be diagnosed late or misdiagnosed.⁶

Prompt and accurate diagnosis is thus pivotal to efficiency, and we recommend that decision-makers focus particularly on:

- strengthening evidence-based screening programmes that play a vital role in the early detection of some cancers (especially cervical, breast and colorectal cancer), while noting that patients' access to these measures varies and COVID-19 has disrupted many programmes⁷

¹ All.Can International. Patient insights on cancer care: opportunities for improving efficiency, Findings from the international All.Can patient survey. 2019. Available at <https://www.all-can.org/what-we-do/research/patient-survey/>

² Laudicella M, et al. Cost of care for cancer patients in England: evidence from population-based patient-level data. *Br J Cancer* 2016;114:1286–92

³ World Health Organization. Guide to Cancer Early Diagnosis. 2018. <https://apps.who.int/iris/handle/10665/254500>

⁴ Hanna T P, et al. Mortality due to cancer treatment delay: systematic review and meta-analysis *BMJ* 2020;371:m4087

⁵ Hanna T P, et al. Mortality due to cancer treatment delay: systematic review and meta-analysis *BMJ* 2020;371:m4087

⁶ DeSantis, Carol E et al. "The burden of rare cancers in the United States." *CA: a cancer journal for clinicians* vol. 67,4 (2017): 261-272. doi:10.3322/caac.21400

⁷ IQVIA Institute for Human Data Science. Cancer won't wait. Building resilience in cancer screening and diagnostics in Europe based on lessons from the pandemic. 2021. Available at <https://www.iqvia.com/-/media/iqvia/pdfs/institute-reports/cancer-wont-wait/cancer-wont-wait-web.pdf>



- extending the EU Cancer Screening Recommendation to lung cancer in light of the substantial impact of late and misdiagnosis and the evidence of benefit,^{8,9} as advocated by the European Respiratory Society, All.Can and other major cancer organisations^{10,11}
- investing in technologies and diagnostic capacities, including relevant primary care services, mobile units, tests, imaging, laboratories, and staff
- investing in research exploring other innovative and promising approaches, including the use of artificial intelligence and machine learning to improve the early detection of cancers
- improving cancer health literacy among the public through campaigns at the national level that involve healthcare professionals to communicate the benefits of screening to patients.

Ultimately, decision-makers must also address socioeconomic factors that can contribute to late diagnosis (e.g. out-of-pocket costs). Making screening more accessible also means addressing inequities among countries and regions, and ensuring, for example, equal access to prevention opportunities for women affected by cancer. There should be synergy among all European Commission initiatives addressing inequalities, and coordinated action across Member States is needed to prioritise access and allocate adequate funds to cancer screening in national cancer plans.

⁸ IQVIA Institute for Human Data Science. Cancer won't wait. Building resilience in cancer screening and diagnostics in Europe based on lessons from the pandemic. 2021. Available at <https://www.iqvia.com/-/media/iqvia/pdfs/institute-reports/cancer-wont-wait/cancer-wont-wait-web.pdf>

⁹ Fricker, J. (2022, January 14). *Lung cancer screening: 2022 could be a turning point for Europe*: Cancer world magazine.

Cancer World Magazine]. Available at <https://cancerworld.net/lung-cancer-screening-2022-could-be-a-turning-point-for-europe/>

¹⁰ Kauczor H-U, Baird A-M, Blum TG, et al. ESR/ERS statement paper on lung cancer screening. *Eur Respir J* 2020; 55: 1900506 [https://doi.org/10.1183/13993003.00506-2019]

¹¹ ERS open letter to the European Parliament Special Committee on Cancer (BECA). Increasing the early diagnosis of lung cancer in Europe: an essential milestone to tackle the biggest cancer killer. 2021. Available at: https://www.ersnet.org/wp-content/uploads/2021/07/Open-letter_ERS_Final_PDF_14.7.2021-2.pdf