



EU Health Agenda



- Europe Against Cancer Programme
- European Cancer Code http://www.cancercode.org/code.htm
- Pass Tobacco control laws
 - Advertising ban
 - Anti Smoking Campaign
- Council Recommendation on Cancer Screening

1. to help co-operation between Member States

- to share and promote best practice in health across the European Union
- to learn from each other
- to look at successes in one part of the Union and to examine how this success can be replicated somewhere else

2. To analyze the impact that other policy areas may have on health:

- environment policy
- enterprise policy and its pharmaceutical legislation
- regional policy and the Union's structural fund which rather than to focus on traditional infrastructure project should include greater scope for investment in the health infrastructure because health is a vital component of economic success
- the internal market rules which apply to health. services, etc.

"Europe Against Cancer Program"

The long term objective was to decrease by 15% the number of cancer deaths by the year 2000 in Europe.

Objective was not reached — BUT

Between 1987 and 2000 the annual cancer mortality decreased by 10 %

Open method of coordination demographic ageing accessibility of care for all high quality of care long term financial sustainability of care



MAKING CANCER PREVENTION A PRIORITY FOR EUROPE:

- epidemiological surveillance
- screening
- prevention
- exchange of good practices

European Cancer Registries network

- > to improve the quality, comparability and availability of cancer incidence data
- ▶ to create a basis for monitoring cancer incidence and mortality in the European Union
- ▶ to provide regular information on the burden of cancer in Europe
- ► to promote the use of cancer registries in cancer control, health-care planning and research

Council recommendation on cancer screening:

- Pap smear screening for cervical cancer starting not before the age of 20 and not later than the age of 30
- mammography screening for breast cancer in women aged 50 to 69 in accordance with the European guidelines on quality assurance in mammography
- faecal occult blood screening for colorectal cancer in men and women aged 50 to 74

Many aspects of general health can be improved, and certain cancer avoided, if you adopt a healthier lifestyle

- 1. Do not smoke
- 2. Avoid obesity
- 3. Undertake some brisk, physical activity every day
- 4. Increase your daily intake and variety of vegetables and fruits. Limit your intake of foods containing fats from animals sources



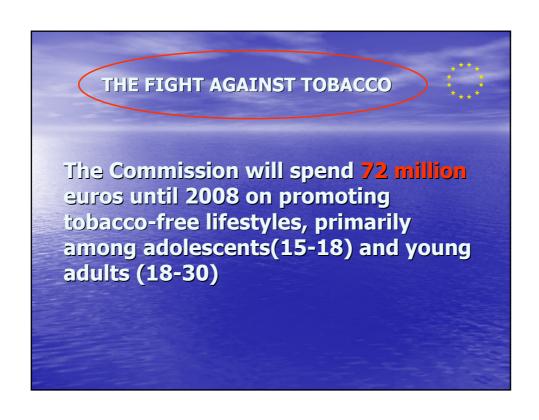
There are public health programs that could prevent cancer developing or increase the probability that a cancer may be cured

3. In cervical screening

9. Breast screening

10. Colorectal screening

11 Vaccination programmes against Hepatitis B





But all these initiatives do not represent a guarantee for all Europeans to profit from the best cancer programmes.

For example, while screening programmes can help reduce deaths from certain cancers, in some Member States these programmes are poorly implemented or non-existent despite the Council recommendation.

SO WHAT CAN WE DO?

- Cancer is the second biggest cause of mortality in Europe and accounts for four out of ten deaths in the 35-65 age group
- o In 2004, 2 millions of new cancer cases have been diagnosed, and 1.2 million deaths have been monitored in the 25 EU member states
- Every day, 5214 Europeans are diagnosed with cancer and 3185 die from their disease
- Cancer will affect 1 in every 3 Europeans and will kill 1 in 4
- The number of Europeans with cancer will increase dramatically over the next 20 years due to the ageing of the European population





This is the duty of each national Health Authority to develop a campaign to inform its citizens. Europe may help on developing a broad campaign, but in any case it will have to be adapted/tailored by individual governments for national implementation.

2.CANCER SCREENING/IMPLEMENTATION OF THE COUNCIL RECOMENDATIONS

The last 4 points of the code against cancer are dealing with the screening of cervical, breast and colorectal cancer, as well as with the vaccination against Hepatitis B.



We have to work very hard at national level to ensure that governments will put in place the Council recommendations.

- Investments

- 25% of the difference in the mortality rates

- The New Member states can have access to EU Structural Funds

Healthcare professionals, citizens and patients groups should campaign for mobilizing EU funds to set up cancer screening programmes and to improve cancer treatment services in their country. National authorities have to be lobbied in order to make sure that they will develop an explicit national framework for health improvement, without which they will never be able to be selected for any EU funding for health









