

SPEECH**"CANCER IS EVERYBODY'S BUSINESS"**

Ladies and Gentlemen,

Many thanks for inviting me to speak here today. I would like to begin by congratulating the conference organisers, who have done a great job. And of course I would like to thank those who took the initiative of arranging this conference in Slovenia.

Why are we all here today? Simply because, cancer is everybody's business. Nobody can say it has nothing to do with them.

When I look at who is here today, I am struck by the diversity of people. This "United Against Cancer Summit" has - among others - politicians, scientists, and interest groups.

But it also has some people who bring a special knowledge – cancer survivors. We need to make sure that we learn as much from them, as they have learnt about cancer.

We are a diverse group here today, and this diversity will take hopefully come out in the day's discussions.

Diversity is what the European Union is all about. We stand for strength in diversity. Next year is the 50th birthday of the establishment of the first European institutions.

I think that we need the unified spirit showed by Europe's pioneers 50 years ago when we tackle diseases like cancer. They came together to overcome a major problem facing their people. We must do the same again.

One motto describing the European Union is that it brings "Competition which stimulates, cooperation which reinforces, and solidarity which unites".

All of those values will help us face the challenge that cancer poses to our people. In fact, we need them more in matters of public health than many other fields and policies.

Cancer is a European issue. It affects about 2.9 million people in Europe each year, costing the lives of 1.7 million.

Lung, colorectal and breast cancers are Europe's most common forms of cancer.

With the current and future ageing of the European population, cancer rates are expected to continue to increase.

Cancer can be addressed in a European way, at European level and in a European framework.

The "Europe against cancer" initiative was an all encompassing action, addressing cancer in Europe in all its dimensions: prevention, research, information, regulation, and fight against tobacco addiction.

Its implementation across the EU is estimated to have averted 92,000 cancer deaths each year. The European Commission dedicated more than €165 million to the initiative between 1986 and 2002.

This led to real results, such as the European Code against Cancer - the first EU document on cancer prevention. It recommended 10 ways in which the most common cancers could be avoided.

Other Commission initiatives include producing EU guidelines for breast cancer screening, to help detect cancers earlier. These have been implemented by several EU countries and were updated in April this year.

But I imagine that I was invited here to talk about the research aspect of cancer.

Research needs to provide those on the frontline with the weapons they need to fight cancer.

Who is on this front line? As well as patients and their families, it includes doctors, governments, health public authorities, companies - and researchers.

This is where Europe working together can give a clear added value. European collaboration in both people and facilities can bring more answers - sooner.

Cancer is one of the major research priorities of EU health and medical research policy and programmes.

We are targeting it along with other major diseases affecting Europeans, such as cardiovascular and brain diseases.

Cancer was first identified as a specific research area in European research in 1988. Some €18 million was dedicated to cancer research in the Fourth Medical and Health Research Programme between 1988 and 1991.

We have gradually increased the funding for cancer. In the current Framework Programme €450 million was attributed between 2002 and 2006. We managed to increase this funding thanks to strong support from the European Parliament.

For this reason, I cannot but praise members of both the European and Slovenian Parliaments to have fully taken their responsibilities in that respect. They have been leading forces in helping European research and researchers in the fight against cancer.

So how does EU research approach cancer? It has four main aspects:

- It works on a European scale, making comparisons between different EU countries and combining complementary resources;
- It has a holistic approach, linking research issues, prevention, diagnosis and treatment;
- It attempts to create better coordination of national research efforts, such as linking the research in national action plans against cancer;
- It has a strong emphasis on "translational" research – meaning that basic research results are turned into clinical applications;

These four aspects were key in researching cancer in the current EU Framework Programme, which ends this year. They will play a similar role in the Seventh Framework Programme, dubbed FP7, to be launched in January.

Research into health issues will be allocated over €6bn in FP7, which runs from 2007 to 2013.

During this time, FP7 will promote world-class collaborative research in health issues. We need to better understand how to promote good health and how to prevent and treat major diseases.

Concretely, we will be looking into the

- development of new methods for detection, diagnosis and monitoring of cancer (and other diseases),
- assessment of new innovative therapeutic approaches, and
- identification of best clinical practices.

As part of FP7's first call for proposals, a network¹ will be launched on the "optimisation of the use of cancer registries for cancer research purposes". This is designed

¹ ERAnet

to network all national and regional screening programmes in the EU. It will:

- help exchange of best practices
- improve data collection, and
- support epidemiological (and clinical) research in EU countries.

The Framework programme's research efforts will be complemented by other new initiatives fighting cancer.

For example:

- a new Innovative Medicines Initiative will be launched to address bottlenecks in drug development and facilitate new therapies. Cancer is one of its targets,
- and "Clinical Infrastructures" (clinical trials and bio-banks) will provide the first basis for a harmonised approach to clinical trials at EU level.

A major message from today's initiative is that, regarding cancer, Eastern European and new EU countries are facing specific and serious problems.

Cancer rates in the new EU countries are high. This is particularly true for lung and other tobacco-related cancers, but also for stomach and intestinal cancers.

And survival rates are lower. In the EU, men's survival rate can be up to 47% - in Central and Eastern European EU countries, it is just 25%. For women, the difference is the rate is up to 47% compared to up to 58% in the EU.

More work is needed in these countries on raising awareness of prevention measures and healthier lifestyles in reducing the risk of cancer.

Earlier diagnosis is also important. I am pleased to see reinforced national screening programmes designed to address this.

Ladies and Gentlemen,

I call - and the new Framework programme calls - for increased participation of new EU countries in FP7. This will allow us to continue Europe's momentum fighting cancer.

I look forward to the proposals coming out of this summit. These initiatives, and others such as "MEPs against Cancer" or the "European cancer patient coalition", can provide a united, European front to tackle cancer.

I hope that as we celebrate the 50th birthday of the European Community next year, we can point to the progress we have made, as Europeans, fighting cancer. That surely would be one of our biggest achievements.

Thank you.