

# WP5 Cancer screening

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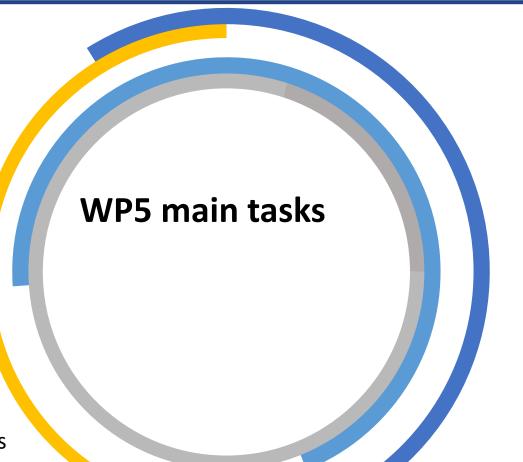
Strategies for early diagnosis of cancer



Effective solutions for population-based screening programmes

Cancer prevention & health promotion: implementation of the European Code Against Cancer

Inequality a **cross-cutting** theme integrated in above mentioned tasks





### MAIN OBJECTIVES OF WP5 INCLUDE:



- to identify barriers to early detection and its management
- to strengthen quality aspects of population-based screening policies by developing decision-making tools, including cost-effectiveness and analysis of harms and benefits
- to investigate the possibilities and barriers of risk-based cancer screening programmes
- to monitor and review **European Code Against Cancer** in the long-term perspective focusing on policy tools and guidance to the public
- to review and plan better endorsements of recommendations within the European Code Against Cancer and to increase aspects of health for all and in every policy for local, regional and EU-level



### WP 5.3 SCOPE AND WORKING MODE

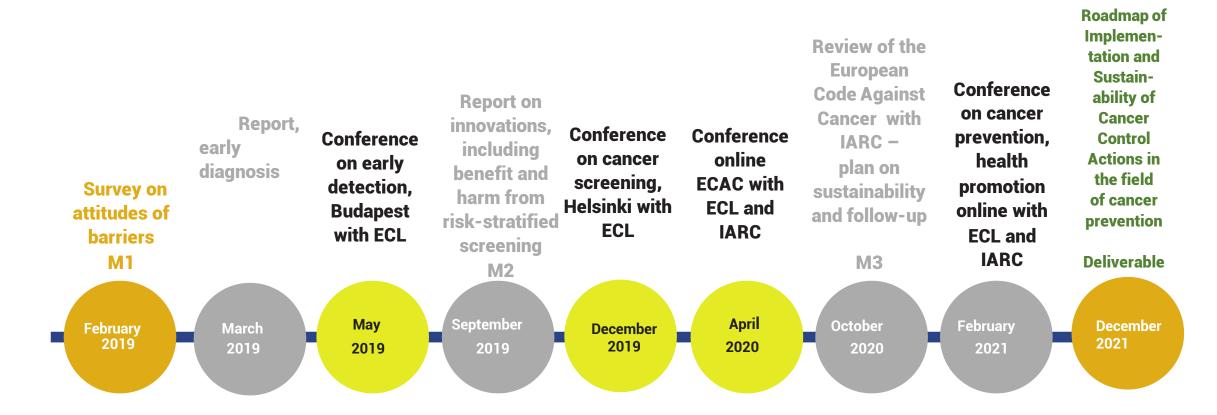


- Focus on implementation rather than recommending new areas > EU Council recommendation 2003/878/EC (2003) <u>https://ec.europa.eu/jrc/sites/jrcsh/files/2\_December\_2003%20cancer%20screening.pdf</u>
- Based on and continuing work from screening chapter of CANCON Joint Action
- Risk-stratification for modifying population based programmes
- Collaboration, co-creation, across Member States and with Association of European Cancer Leagues ECL and International Agency for Research on Cancer IARC
- Looking for bridges between prevention, early diagnosis and screening programmes
- Providing updates of two potential new programmes: lung cancer and prostate cancer









Conference reports early diagnosis and cancer screening from ipaac.eu>WP5





The WP 5 has 3 tasks addressing early diagnosis, cancer screening and health promotion and each task will end with a dedicated conference with **co- creation**. Co-creation aims at facilitating **discussion and dialogue**, increasing engagement across participants and fostering **problem solving and giving insights** to identify best policies. These specific events will be formulated into **comprehensive reports**, reflecting perspectives from all partners of the WP5.

- 2019 co-creational conference in Budapest: early diagnosis
- 2019 co-creational conference in Helsinki; cancer screening
- I online meetings 28 & 29.4.2020 (ECAC)
- Il online meeting 22.2.2021 (cancer prevention, health promotion)



### WP5 CANCER SCREENING REPORT



### The report includes

- Definitions and criteria for cancer screening
- Key elements for effective and innovative implementation of population-based cancer screening.
- Reducing social inequalities in cancer screening
- Risk-stratified screening: criteria and innovations
- On what basis can we decide to modify a screening programme with a risk-stratified approach? Case of breast cancer
- Potential of new cancer screening programmes: updated evidence on lung and prostate cancer screening
- Current status of cancer screening in EU and need to update
- Group work on new strategies for cancer screening
- Discussion and conclusions

1.1	AAC
New	openings of cancer screening in Europe
w	ork Package 5, task 5.2. Cancer Screening:
	Conference report
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### WHAT IS SCREENING AND OTHER QUESTIONS



- Is it a single test you take?
- Is it surveillance of a patient with a very high cancer risk?
- Is it personal screening or public health measure or both?
- How do you modify screening?
- How is screening implemented in the European Union?
- How can we further improve screening?
- How do we introduce new activities?
- What sort of legislation and data management is needed?
- Effects of pandemic to the screening programmes?





- Screening refers to the use of relatively simple medical tests across an apparently
   healthy population in order to identify individuals who have a clinically unrecognized
   disease or defect. Persons with a positive or suspicious finding must be referred for a
   confirming diagnosis and, if necessary, to treatment (Wilson & Jungner, 1968)
- Importance of evidence on an acceptable balance between benefit and harm, because death cause by the screened disease is rare, compared with clinical high-risk patient groups. Screening can turn an apparently healthy individual to a cancer patient
- Risk-stratified screening (=selective screening in a population-based approach, Wilson & Jungner, 1968) aims to improve the screening programme by modifying screening policies within the population-based programme based on individual-level disease or mortality risk





- Risk-stratified screening is an example of innovation and development in the domain of cancer screening, and it is important to develop further criteria for it from the policy-making perspective
- **Surveillance** as close and continuous observation of high-risk patient groups identified largely from their clinical environment or their close relatives.
  - The EU Council recommendation on cancer screening (2003): due account should be taken of specific needs of persons who may be at higher cancer risk for particular reasons (e.g. biological, genetic, lifestyle and environmental, including occupational reasons). No further advice was provided on this topic yet
  - EU level guidelines and policy advice
  - Technological possibilities to improve data management
  - Special focus on inequalities
  - Social innovations everyday inventions like flexible tools for changing invitation time, reminders
  - Governance is key to effective cancer screening (CANCON)



#### modify or discontinue

cerm evaluation urate communication feguard sustainability

- Continuous quality improvement
- Prospective evaluation of new methods
- Modification or stopping as indicated

#### 1. Consensus building and pre-planning

- Acquirement and synthesis of evidence
- Baseline conditions and capacity
- Health economics and prioritization
- Communication strategy

**IPAAC** INNOVATIVE PARTNERSHIP OR ACTION AGAINST CANCER

#### 4. National rollout

- Early evaluation of outcome and adverse effects
- Training
- Reducing barriers and social inequalities
- Modification or stopping as indicated

Good governance is key to effective cancer screening

#### 2. Planning, feasibility and policy

- Coordination, evaluation, QA teams
- Governance structure and legal frameworks
- Policy objectives and targets
- Planning and testing policy, protocols, indicators
- Information technology and systems
- Contracting and training staff and centres

https://cancercontrol.eu/archiv ed/guide-landing-page/guidecancer-screening.html#a4

#### 3. Piloting

- Testing all programme components
- Early indicators on performance and outcome
- Training
- Reducing barriers and social inequalities
- Rollout, modification or stopping as indicated



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