



EUROPEAN COMMISSION

JOINT RESEARCH CENTRE
DIRECTORATE F - HEALTH AND FOOD

Subject: Contact persons for the EC Initiatives on Cancer Screening and Care

This note provides Member States with the state of play of the European Guidelines on Cancer Screening and Diagnosis and Quality Assurance Schemes, and asks to identify contact persons for the EC Initiatives on Cancer Screening and Care.

Background:

In 2003, the Council of the EU identified the adoption of European guidelines as key for ensuring the development of effective cancer screening programmes in the EU¹. The Council Recommendation on cancer screening recommended that Member States implement high quality population-wide screening programmes for breast, colorectal and cervical cancer, along with other principles of best practice in their early detection. In 2008, the European Parliament² and Council³ further invited the Commission to support Member States in their efforts to develop and update evidence-based guidelines for quality-assured screening and follow-up care for breast, colorectal and cervical cancer.

In response, the European Commission Initiatives on Breast (ECIBC), Colorectal (ECICC), and Cervical Cancer (EC-CvC) have been established⁴.

In December 2022, the Council Recommendation from 2003 was updated to include also gastric, lung and prostate cancer. To support the updated Council Recommendation, the Commission is now launching three new initiatives on Lung (EC-LuC), Gastric (EC-GaC) and Prostate Cancer (EC-PrC).

The objective of the EC initiatives on cancer is to provide essential levels of quality care that are equally accessible across Europe, by developing evidence-based guidelines extended to primary prevention, screening and diagnosis of cancer as well as a voluntary quality assurance scheme for cancer care services covering the entire care pathway. For breast cancer, the guidelines⁵ and the European quality assurance scheme for breast cancer services⁶ are already available for implementation in the Member States. To be implementable and serviceable, the quality assurance schemes must have the flexibility to adapt to widely differing healthcare infrastructures across Europe.

Contact persons for the EC Initiatives on Cancer

¹ Council Recommendation on cancer screening of 2003

² European Parliament resolution of 10 April 2008 on combating cancer in the enlarged European Union.

³ Council Conclusions on reducing the burden of cancer

⁴ <https://cancer-screening-and-care.jrc.ec.europa.eu/en>

⁵ <https://cancer-screening-and-care.jrc.ec.europa.eu/en/ecibc/european-breast-cancer-guidelines>

⁶ <https://cancer-screening-and-care.jrc.ec.europa.eu/en/ecibc/breast-quality-assurance-scheme>

To support the development of the guideline and quality assurance schemes, it is necessary to receive information, such as on organisational aspects of how healthcare services are delivered in Member States, and in turn to ensure that needs and concerns of the Member States are taken into account. Such information may be available from outputs of finalised or ongoing EU-funded project and Joint Actions.

For situations where information may not be yet readily available or be incomplete in the project deliverables, it is necessary to identify a contact person in each Member State who ***might*** be asked to provide feedback and/or advice regarding their national context on selected topics relevant for the initiatives, such as:

- organisation of screening programmes, e.g. regional or national,
- national legislation and/or procedures in place regarding cancer screening, diagnostic procedures, treatment options, etc.,
- certification and accreditation programmes in place for healthcare services,
- aspects regarding the implementation of the European cancer guidelines and/or quality assurance schemes (feasibility of recommendations and/or requirements).

In particular, the contact persons should function as a first point of contact to be able to reach out to the appropriate organisations, entities or others which could provide the EC initiatives on cancer with the needed information (see above). Furthermore, the contact persons could be asked to support the dissemination of the EC initiatives' main outputs and important activities, e.g. open calls for expression of interest to become members of the initiatives' working groups.

Description of engagement:

- The contact persons will be contacted via email and not regularly.
- Feedback will be collected mostly through ad-hoc online surveys using the EU Survey platform, which could also be forwarded by the contact persons to relevant players in the specific field relevant to the subject matter.
- In the upcoming year it is foreseen that three surveys concerning organisational aspects of how healthcare services are delivered in Member States will be launched, starting from lung cancer, followed by prostate and gastric cancer.
- The overall workload should not exceed three days per calendar year

➔ We are kindly asking the Sub-group on Cancer to identify, including possibly among the subgroups' members, the Contact Person(s) for the six EC Initiatives on Cancer Screening and Care, to support the initiatives in the above-described activities (one contact person per Member State). Please provide the names and contact details of the Contact Persons to JRC-CANCER-POLICY-SUPPORT@ec.europa.eu by the 11 July 2025.