

Our position

Europe's Beating Cancer Plan

AmCham EU's response to the European Commission's Roadmap



AmCham EU speaks for American companies committed to Europe on trade, investment and competitiveness issues. It aims to ensure a growth-orientated business and investment climate in Europe. AmCham EU facilitates the resolution of transatlantic issues that impact business and plays a role in creating better understanding of EU and US positions on business matters. Aggregate US investment in Europe totalled more than €2 trillion in 2018, directly supports more than 4.8 million jobs in Europe, and generates billions of euros annually in income, trade and research and development.

Executive summary

The American Chamber of Commerce to the EU (AmCham EU) welcomes the recently published Roadmap on Europe's Beating Cancer Plan. Health is an important driver for wealth and economic growth and we support the EU agenda towards affordable, sustainable and innovative health systems. With a member base from across the various industries, beyond healthcare, AmCham EU is well positioned to have input on health in all policies and to help ensure that new healthcare-related legislation and policies add value to, and benefit, the entire healthcare ecosystem.

Cancer contributes 20% of the total disease burden in Europe. The share of the health expenditure dedicated to cancer stayed a constant 4-7% of health spend in the past 25 years. Every country should have an effective National Cancer Control Plan to highlight the disease's importance, align efforts to fight it, encourage scientific innovation, research and development and allocate enough funding for prevention, diagnosis, treatment and rehabilitation.

To support these efforts, the EU should:

- Address health and cancer literacy to help patients navigate an increasingly complex healthcare system;
- Develop supportive policies on cancer prevention and timely diagnosis;
- Invest in implementation of screening programmes, guidelines and campaigns, quality biomarker discovery, development and uptake to allow for early and accurate diagnosis as they can make a significant contribution in improving cancer survival rates;
- Maintain a stable, competitive innovation system with strong IP incentives for research and development – advances in cutting-edge research are increasing our understanding of cancer and how it develops and allowing us to create medicines that are enhancing patient outcomes;
- Ensure flexible and adapted regulatory, HTA and payer frameworks to allow patients faster access to innovative treatments and to benefit from the full potential of personalised oncology;
- In the context of reducing waste and inefficiencies in the healthcare systems, invest in supportive care interventions that tackle cancer related symptoms such as malnutrition, fatigue, stress and pain;
- Provide the necessary support for cancer patients and survivors to deal with discrimination and psychosocial challenges and allow them to maintain or return to work;
- Ensure that structural and cohesion funds are fully utilised to support the goals of the action plan, in particular as regards improving healthcare infrastructure (including molecular diagnostic capacity that is essential for Europe to optimise precision medicine advances), training of HCP and targeted educational campaigns to improve the implementation of existing treatment guidelines, screening programmes and develop new, evidence-based recommendations on screening guidelines for other cancer types outside breast, colorectal and cervical cancers;
- Develop an ambitious health data governance framework that will foster trust and the ability to connect new and existing data sets (e.g. real-life care data in combination with genomics, clinical and patient data) in a reliable way, to inform research, innovation and more patient-centred care. It is important that health data is accessible to all research entities, private or public, to boost innovation in the development of new approaches to the cancer care pathway, including enabling the use of artificial intelligence (AI) in medical research, imaging, patient monitoring and preventative and self-monitoring measures.

We should however not lose sight of existing inequalities in access to treatments in order to find solutions – in a cooperative manner involving all stakeholders – that will make sure existing and new therapeutic solutions become a reality for all patients across Europe: this will necessitate looking into novel payment approaches and finding ways to streamline access.

Prevention

- According to WHO, between 30-50% of all cancers are preventable¹, making prevention a long-term strategy for the control of cancer. Tobacco control, a healthy diet, sufficient exercise are just some of the elements that are important to prevent cancers.
- AmCham EU is supportive of actively implementing policies that are favourable to prevent cancer such as vaccination (in the instance of HPV) or proactively pursuing the WHO 2030 viral hepatitis goal as a means to prevent hepatocellular carcinoma.

Early detection and diagnosis

- Screening, early and accurate diagnosis can make a significant contribution in improving cancer survival rates and reducing costs linked to test and treatments.
- The European Commission currently has screening guidelines issued for breast, cervical and colorectal cancer. The Cancer Plan presents the opportunity to look into the development of EU screening guidelines for additional types of cancer such as lung or prostate cancers, as well as into measures fostering better implementation of existing guidelines for cancer related symptoms to improve patient outcomes.
- Council recommendations for cancer screening programmes exist, but implementation varies between Member States. This is linked to a number of factors, including healthcare infrastructure, socio-economic status, patient behaviour, etc. A means to improve adherence would be to make sure implementation is monitored via the bi-annually published 'State of Health in Europe' report.
- Communication campaigns on screening and early diagnosis as well as a strategic utilisation of structural funding could be measures implementable in the short term. Efforts to support earlier diagnosis should be complemented with actions to ensure accurate diagnosis, supported by molecular diagnostics that can predict risk, prognosis and response to treatment, as indicated by treatment guidelines. Differences in capacity in this area across the EU are contributors to patient access barriers to novel treatments that improve survival and quality of life.

Treatment and care

- According to the [Cancer Comparator Report for Europe](#), advances in cutting-edge research are increasing our understanding of cancer and how it develops. Novel treatments and diagnostics are being explored for countless newly-identified molecular targets. As a result, there has been a distinct increase in the number of cancer medicines and indications over recent years, helping to stop cancer in its tracks and in some cases even reverse it. Treatments for 160 indications have been approved since 1995. Not only has there been an increase in quantity, but also a shift in the approach of these treatments: we have moved from chemotherapies to more targeted treatments, such as immuno-oncology (i.e. using the body's immune system to track and destroy cancer cells), or cell or gene therapies. Highly personalised form of cell therapies already demonstrated promising results in patients suffering from a range of blood cancers, and the ability to induce 'complete response' (no detectable cancer) in patients with few or no other treatment options available. Such breakthrough innovation holds the potential to pave the way for an exciting journey for future scientific developments. The possibility for a treatment which cures diseases could not only dramatically change the lives of cancer patients but also significantly enhance the efficiency of healthcare systems.

¹ Hofmarcher, T., Brådvik, G., Svedman, C., Lindgren, P., Jönsson, B., Wilking, N. (2019) Comparator Report on Cancer in Europe 2019 – Disease Burden, Costs and Access to Medicines. IHE Report 2019:7. IHE: Lund, Sweden

- The scientific advances achieved to date were made possible through a stable and favourable innovation ecosystem. Yet, for this to continue and for industry to remain capable to strive for further scientific advances, some framework conditions need to continue.
- The current discussions in the European Commission that aim at altering the existing pharmaceutical incentives framework should not result in diminishing incentives that are critical to invest in future innovation. There is a high unmet need for cancer patients who do not have optimal treatments yet – including sufferers from rare cancers (which make up 24% of the cancer burden in Europe)². The orphan medicinal products regulation has led to tremendous results for patients over the last years, it and it should continue to be a key lever ensuring that innovation continues apace to realise its full potential to benefit human health.
- At the same time, AmCham EU acknowledges concerns around access to medicines, and inequalities therein. According to EFPIA's W.A.I.T indicator, patients in the Czech Republic wait seven times longer than patients in Denmark or Germany until a new cancer treatment is publicly reimbursed. No unilateral measure can solve this issue, particularly when the significant differences between Member States in their pricing and reimbursement processes and in levels of investment into health are taken into account. We call on the EU institutions to set up a High Level Forum on Access to Health Innovation that would bring together the key actors from the healthcare world to work cooperatively in order to find solutions that will make sure new therapeutic solutions become a reality for all patients.
- At the same time, we call for a holistic and coordinated approach to cancer management, including multi-disciplinary care teams, that provide cancer treatment, supportive, survivorship and palliative care services to patients. A holistic care approach would improve patient outcomes, while allowing for a more efficient allocation of healthcare resources.

Quality of life for cancer patients, survivors and carers

- Thanks to advances in prevention, screening, early diagnosis and treatment more and more people are surviving cancer. It is estimated that in Europe there are currently more than 10 million cancer survivors³. The more people survive, the more it becomes evident that survivorship has its challenges. These range from psychosocial challenges to economic challenges and discrimination in various aspects of survivors' lives. No matter the challenge, cancer survivors should not be stigmatised. They deserve to be supported in getting their lives back on track, reintegrating into society and – depending on their age – into work life.
- As highlighted by the recent [WHO Report on Cancer](#), patients at all stages of their disease require supportive care. 20- 50% of cancer patients can be affected by one or several cancer related symptoms, such as pain, fatigue and nutritional problems. Managing cancer related symptoms improves patient outcomes such as tolerability of tumour treatment, quality of life and survivorship.
- Survivorship should be looked at from a holistic, integrated patient-centred approach to long-term care. The European Commission should leverage learnings and best practices from other disease areas (e.g. HIV), to benefit the wider European patient community. The Europe's Beating Cancer Plan should consider actions on planning for post-survival and encourage Member States to tackle stigma and discrimination for survivors. Possible measures could be a review of the EU 27 laws to identify and ultimately lead to repeal discriminatory laws that affect patients, including those living with cancer. Additionally, a broad communication campaign should be considered, to address the general public misconceptions and prejudices about people living with chronic diseases (such as cancer or HIV).

² <https://www.ncbi.nlm.nih.gov/pubmed/22033323>

³ <https://ecpc.org/wp-content/uploads/2019/08/ECPC-White-Paper-Europe-of-disparities-EN-3.pdf>

Knowledge, data and scientific evidence

- Never before has the entire spectrum of healthcare been more empowered by digitalisation and the use of data. Increasingly, insights are driven by the development of AI in medical research, imaging, patient monitoring and preventative and self-monitoring measures. AI is allowing the development of innovative and personalised approaches to cancer treatments by simulating physiological and biochemical processes, such as immune system responses. AI solutions are also enabling the monitoring of real-time clinical trials conducted globally, accelerating product approvals and helping to reduce costs.
- Digital health can contribute to improving the collection of real-world data including data from electronic health records, core outcome sets and patient registries. This is a critical contribution to better inform HTA/payers about the use of highly innovative technologies, such as cell and gene therapies, thereby addressing the evidence gaps linked to their innovative nature and resulting in greater access for patients.
- The current lack of interoperability between the systems where data is held and the lack of an enabling governance framework for health data sharing, is preventing us from reaching this potential in Europe. Complementary EU policy objectives such as the creation of a European Health Data Space as well as initiatives at national level to encourage the uptake of standardised electronic health records, use of digital health solutions such as apps, digital health literacy and access to large scale patient data for the purposes of clinical research and decision-making by regulators and payers should be considered to boost the utilisation of digital and data to accomplish the objectives of the Cancer Plan.
- The World Health Organisation (WHO) estimates that 20% to 40% of all health spending is currently wasted through inefficiency.⁴ The cancer plan should support multi-stakeholder efforts (including patients, industry, academics, regulators and research foundations) to reduce waste and improve the efficiency of cancer care including the sharing of best practices⁵ across Europe.

⁴ World Health Organization. 2010. Health systems financing: the path to universal coverage. World health report 2010. Geneva: WHO

⁵ <https://www.all-can.org/efficiency-hub/>