

MEP Adam Jarubas
Chair
European Parliament SANT Subcommittee

Members of the European Parliament's SANT Subcommittee

October 15, 2024

Re: Confirmation hearing of Health Commissioner-designate

Dear Chair,
Dear Honorable Members,

[Lung Cancer Europe](#) (LuCE) is the voice of Europeans impacted by or at risk of lung cancer. Our organisation represents members from 27 WHO European region countries, including 21 EU member states. Ahead of the upcoming confirmation hearings for Commissioner-designate Olivér Várhelyi, we are writing to you to call for urgent attention to the lung cancer situation across Europe.

Driven by multiple factors, including socio-economic deprivation, lung cancer has the highest [incidence and mortality rate](#) of all cancers. Nearly as many people in Europe die from [lung cancer](#) as from breast and colorectal cancers combined. Moreover, European countries like Hungary and Turkey have the worst outcomes not just in Europe, but in the world.

We recall that on 13 October 2021, the European Respiratory Society (ERS) sent an open letter to the European Parliament's Special Committee on Beating Cancer (BECA) urging attention on the matter of early diagnosis of lung cancer. LuCE co-signed this letter together with 55 other European stakeholders. Following this, we were encouraged to see the updated Council of the European Union recommendations in 2022 that invited member states to consider implementing lung cancer screening, albeit in considerably weaker

language than we anticipated. The EU-funded project SOLACE is another positive step in addressing systemic bottlenecks in access to screening. Despite this progress, and growing evidence showing that an [early diagnosis](#) of lung cancer increases the likelihood of 5-year survival by more than [10-fold](#), **we are still far from the notion of equitable access to lung cancer screening in Europe.**

For every 10 individuals dying from lung cancer in Sweden, over 24 do so in Hungary. This two-fold differential in lung cancer mortality within the EU is clear from the European Commission's own [data](#). Such disparity is painful, and frankly unacceptable for those living with and at risk of lung cancer, as well as those in caregiver capacity. Despite calls from various scientific societies and the lung cancer community, **a measurable EU target for 2030, along with a concrete strategy for the early detection of lung cancer in high-risk populations** is still missing from Europe's Beating Cancer plan and its Implementation Roadmap.

Progress in lung cancer screening, however, is not only a matter of scientific consensus. Meaningful improvements in screening rates of high-risk groups will also require **political mobilization at national and community levels, including GPs and the primary health care system so that people from socioeconomically disadvantaged backgrounds can be prioritized and reached** with effective, efficient, and equitable lung cancer screening programs that are adapted to local contexts.

We believe that a late diagnosis of lung cancer – far too prevalent in Europe – is ultimately a policy failure that not only costs lives, but also places a significant burden on the European economy and our healthcare system. The [Netherlands](#), for example, spent €433 million more on lung cancer care in 2021 compared to 2016, without seeing significant improvements in outcomes over those 5 years. LuCE's own [survey of the lung cancer community](#) across 28 countries in the WHO European region showed that about half of the participants experienced more than a 30% reduction in household income while facing growing healthcare expenditures. Projections published by the American Medical Association indicate that lung cancer is on track to cost the global economy over [3 trillion Euros by 2050](#). Europe will bear a significant portion of this cost as 21.6% of all cases and 21.3% of all deaths from lung cancer in the world currently occur here. Faced with the poorest outcomes, and a growing lung cancer care bill, Europeans at risk of, and impacted by lung cancer deserve the urgent attention of policymakers responsible for the EU's health portfolio.

The Commissioner-designate Olivér Várhelyi has an opportunity to reinvigorate Europe's Beating Cancer Plan with a particular focus on lung cancer. During the upcoming

confirmation hearings, we urge you to ask him how he plans on doing exactly that: What specific plans does the Commissioner-designate have to address the geographical and socioeconomic disparities in outcomes associated with lung cancer, not least in his home country?

We stand ready to discuss these issues with you anytime. As a patient-driven organization we would welcome an opportunity to share our lived-experiences with policy makers like yourselves and to call on the incoming commissioner to build a clear and measurable plan to deliver meaningful improvements in the EU's lung cancer landscape.

Sincerely,



Anne-Marie Baird
President



Maeve O'Sullivan
Executive Director