



ESMO input to Virtual brainstorm session for NSA partners on the development of WHO's European Programme of Work 2 (EPW2), 16 January 2025, 11:00-12:30

With regard to the two questions shared by the Partnerships and Collaboration Team of WHO Regional Office for Europe, and in alignment with the WHO Fourteenth General Programme of Work 2025-2028 (GPW 14), ESMO notes the following:

Q1: What (mega)trends are shaping health in the European Region and should be considered in EPW2, and what are the implications of these trends for the Region's health agenda?

Trend 1) Cancer cases expected to grow by more than 20% in Europe by 2045¹ - driven by a combination of ageing populations and rapidly evolving behavioural and environmental factors.

Implications:

- Accelerate cancer prevention, including:
 - through tobacco control measures,
 - the labelling of alcoholic beverages and unhealthy food products,
 - tackling hesitancy and eliminating the obstacles that limit Human Papillomaviruses (HPV) and Hepatitis B virus (HBV) vaccination coverage,
 - legislating ambient air pollution levels,
 - legislating to reduce the risk of melanoma from ultraviolet radiation (UVR) caused by the use of sunbeds, with a special focus on the adolescent and young adult (AYA) population, and
 - reducing occupational exposure to asbestos other occupational carcinogens and environmental pollutants such as endocrine disruptors and benzene

- Ensure equitable access to cancer care across the region (Universal Health Coverage); and address workforce shortages and burnouts in oncology through education and training and retention measures.

- Implement urgent regulatory reforms to safeguard clinical cancer research and patient access to innovative cancer diagnostics and treatments. Currently, cancer clinical trials are delayed due to fragmented processes, lack of harmonisation, and incomplete infrastructure across countries; e.g. in the EU, due to the In Vitro Diagnostic Medical Devices Regulation (IVDR). To address the challenges, there should be:
 - harmonised processes and timelines for performance study authorisations across EU Member States and beyond,
 - simplified regulatory pathways for innovative technologies addressing unmet medical needs, and
 - targeted legislative revisions to reduce administrative burdens and mitigate delays in patient access.

¹ International Agency for Research on Cancer 2022. <https://gco.iarc.fr/tomorrow/en/dataviz/tables>



Trend 2) Climate crisis accelerates the risks of emerging infectious diseases, extreme weather events and related large-scale migration of populations, with severe consequences to health systems.

Implications:

- Strengthen health systems resilience for emergencies and crises to ensure continuance of care at secondary and tertiary care levels where patients with cancer are predominately treated, including:
 - ensuring that essential cancer services – screening, early detection, diagnosis, treatment, follow-up and palliative care - remain accessible to patients and uninterrupted during pandemics, and
 - prioritising the well-being of healthcare workers by ensuring decent working conditions, and providing mental health support services and ethical guidelines for decision-making in situations when resources are scarce, to enhance their capacity to deliver quality cancer care in challenging circumstances.

Q2: How can we (as NSA, WHO and other stakeholders) collectively support health action in these areas to accelerate progress towards SDGs and future proof our systems for the decades to come?

Trend 1)

ESMO's cancer resources can support Member States in their efforts to reduce burden of cancer and advance the three dimensions of Universal Health Coverage:

- [Global Curriculum in Medical Oncology](#) supports training the necessary workforce to increase population coverage.
- Evidence-based [ESMO Clinical Practice Guidelines](#) supports decisions to optimally expand essential health services.
- [ESMO-Magnitude of Clinical Benefit Scale](#) and [ESMO Scale of Clinical Actionability of Molecular Targets \(ESCAT\)](#) helps to prioritise the use of cancer medicines, improve health outcomes, reduce the financial burden of health services, and support health technology assessment processes.

[ESMO Resilience Task Force recommendations](#) guide institutions to manage psychosocial risks, optimise well-being, and reduce burnout in oncologists.

Trend 2)

Member States should be supported in the implementation of Preparedness 2.0 - the World Health Organisation Regional Office for Europe Strategy for Health Emergency Preparedness, Response, and Resilience (2024–2029), specifically to:

- Ensure national emergency preparedness, response and recovery plans include clearly defined actions to maintain, restore and strengthen health systems and essential health services including **cancer** prevention, diagnosis, treatment, rehabilitation and palliative care; and
- Ensure that the occupational health and welfare needs of **oncology workforce** are met, including mental, social and psychosocial support during health emergencies.