



# Colorectal Cancer Health Check Barometer 2013

**Contributing countries: Belgium, Bosnia, Cyprus, Czech Republic, Finland, Germany, Greece, Hungary, Latvia, FYR Macedonia, Netherlands, Poland, Portugal, Romania, Serbia, Slovakia, Slovenia, Spain, England plus additional research.**



**EuropaColon**

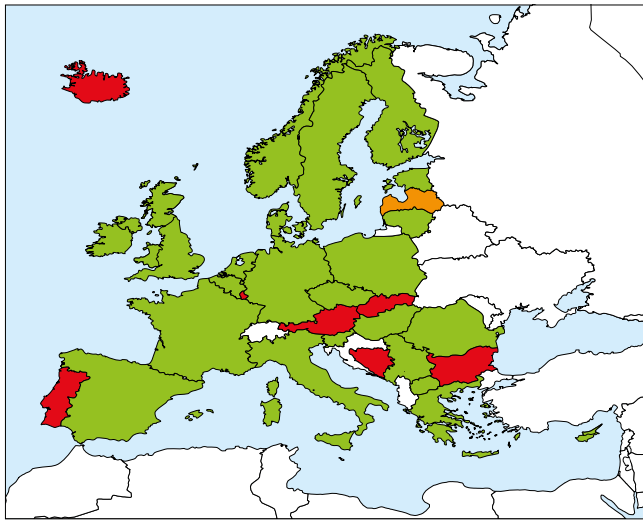
*... because life matters*

## Introduction

EuropaColon was established in 2005 and is Europe's leading umbrella colorectal cancer patient organisation.

We used the information provided by our members as a guide to understand the state of colorectal cancer in each country. It is not based on scientific analysis but we hope it reflects the situation in Europe to help understand where changes could be made. The data provided is open to interpretation; this is ours. We will publish this review annually with new members expanding the information every year.

## National Cancer Plans/Strategies



■ Full cancer plan ■ Some form of cancer plan  
■ No Plan

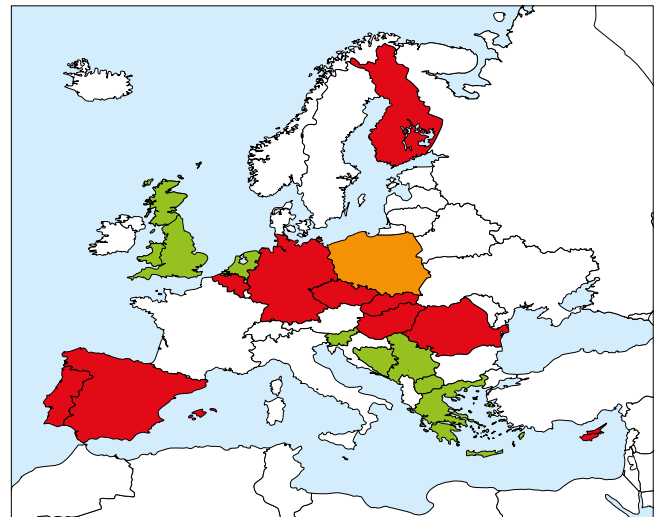
Not all countries in this survey have published a Cancer Plan or Strategy. However amongst those who have a 'Plan' there is wide variation in approach<sup>1</sup>. It would be in the interests of all citizens if there were more consistency amongst these 'Plans'.

It is very rewarding to note that a majority of countries have published a Cancer Plan as this provides a template for good practice for the provision of cancer care in that country. More importantly it provides a transparency that enables all citizens to clearly understand their options if diagnosed with cancer and for the clinical community to know their discipline is suitably reflected in the 'Plan'.

Without a 'Plan', managing cancer and delivering best care is clearly more difficult. People in management positions are less able to deliver good quality and more importantly improve the level of the care offered against clear benchmarks.

**Conclusion: EuropaColon believes that without a Cancer Plan or clear Government Strategy for cancer it is difficult to provide a level playing field and ensure equity for all citizens within the country.**

## Colorectal Cancer Implementation



■ Implemented ■ Partly implemented  
■ Not implemented

We asked our partners to comment on their perception of the success of the National Cancer Plan/Strategy in their country in delivering the stated objectives regarding colorectal cancer.

Whilst the response for Cancer Plans, above, looks very positive, that for implementing colorectal cancer initiatives and outcomes does not fair as well. Many countries show a disappointing recognition of the importance of clear measures and action within their 'Plan' to manage the growing tide of colorectal cancer diagnoses across Europe<sup>1</sup>. Currently around 450,000 new cases of colorectal cancer are diagnosed in Europe every year, making it one of the largest of all cancers.

It is universally recognised that if diagnosed early colorectal cancer is the most highly treatable of all the gastro-intestinal cancers and data shows that over 90% of those diagnosed at an early stage are still alive after 5 years whilst less than 10% are still alive after 5 years if diagnosed at a later stage. These are compelling reasons for a new approach to colorectal cancer in every country in Europe

All these new cases can be avoided each year in Europe by relatively simple interventions:

- 1. Prevention:** Raising awareness of healthy food or diet, along with a small amount of exercise every day
- 2. Formal population screening:** National interventions could prevent or identify up to 30% of colorectal cancer cases

**Conclusion: EuropaColon would like to see governments recognise and implement simple public health strategies that could save thousands of lives every year.**



## Health Awareness

It was of concern to EuropaColon that in many of our partner countries there is very little public promotion of the risks of cancer.

Promotion of healthy living amongst the citizens of Europe is one of the cheapest means of saving lives and should be embraced by all governments. This will not only save lives and reduce costs of healthcare through early diagnosis, but helps keep the nation healthy and going to work every day.

Hours lost to poor health across Europe are on the increase and we suggest that many hours could be saved if better policies and strong public health initiatives were put in place in every country.

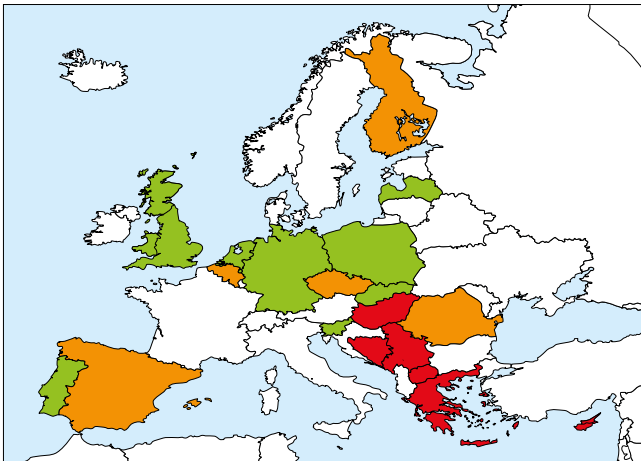
With regards to colorectal cancer the risk factors are clear:

- understanding the ingredients that make up a healthy diet
- importance of regular exercise
- being aware of your family medical history
- limited daily alcohol intake

Obesity is the main proven link to colorectal cancer and this condition is affecting societies across Europe and could explain the increasing rate of colorectal cancer diagnoses.

**Conclusion: EuropaColon would like to see greater collaboration between all stakeholders and governments to address this major health issue. We all have a responsibility to help those around us and those in positions of influence could make a significant contribution that is urgently called for today.**

## Biomarker Testing



■ Routinely available ■ Partly available  
■ Not available

Individualising or personalising treatment for patients, whether a medicine or a pathway, is increasingly recognised as the way forward for cancer patients. EuropaColon welcomes these developments as we move away from one-size-fits-all treatment.

This leads to an important opportunity for patients to embrace health empowerment. We encourage patients to acknowledge these important developments and to

become more empowered and accept that every patient needs an enquiring approach to their treatment and care. After all it is your life and therefore your responsibility to look after it as best you can.

In colorectal cancer we only have one clearly defined bio-marker for treatment. Every colorectal cancer patient should know its relevance and what it could mean for their care. We recommend each patient enquire of their clinician whether they have been tested for this marker and if the outcome has influenced the medicine chosen.

It was clear from our survey that availability of testing for this biomarker varies considerably in our partner countries, not only between countries but also within the country. It further showed that even in countries where testing is available, some clinicians fail to appreciate the benefit that this test could offer in clinical practice.

Access to and funding for national testing facilities for bio-markers is going to become an increasingly important in cancer care and countries will need to adopt a more professional approach towards the setting up of national testing centres. Without a national commitment to testing of biomarkers patients will suffer inequalities of care, national standards will not be established nor will it be possible to maintain them.

**Conclusion: EuropaColon believes strongly that a national resource for the testing of bio-markers should be available so that this becomes standard clinical practice across the health service within each country.**

## Call to Action

**We call on all stakeholders to identify and implement initiatives to reduce the incidences of colorectal cancer in Europe**

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### References

1. [www.epaac.eu/national-cancer-plans](http://www.epaac.eu/national-cancer-plans)
2. <http://bookshop.europa.eu/en/european-guidelines-for-quality-assurance-in-colorectal-cancer-screening-and-diagnosis-pbND3210390/>

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