

Putting prostate cancer in the political spotlight

An analysis of the political prioritisation of prostate cancer compared to breast cancer across Europe between January 2015 and January 2020

This comparison has been undertaken not to compete with, or take away from, the political focus on breast cancer. Instead it aims to support the call for increased political action to improve prostate cancer treatment and care, raise awareness and remove the stigma associated with this disease.

The reasons behind the current low political profile of prostate cancer are multi-faceted. Men are known to be less likely to speak openly about their symptoms and disease.³² The stigma associated with prostate cancer and its treatment further increases the barrier for more active political engagement.



Prostate cancer is the most frequently diagnosed cancer in men¹ and the number of new cases is rising^{2,3}

In the EU, more than two million people are living with prostate cancer, the most frequently diagnosed cancer among men.¹

Diagnosis rates for prostate cancer are increasing with around 450,000 new cases diagnosed in Europe in 2018, compared to an estimated 345,000 new cases in 2012.^{2,3}

Each year, prostate cancer accounts for around 25% of all new male cancers and 10% of male cancer deaths, with over 107,000 people estimated to have died from the disease in 2018.^{2,4} In comparison, breast cancer contributes to 16% of female cancer deaths and is estimated to have led to 138,000 deaths in 2018.²



Despite the high disease burden of prostate cancer, there has been comparatively little political attention



Prostate cancer

10%
of all **male** deaths
107,000
deaths in 2018²



Breast cancer

16%
of all **female** deaths
138,000
deaths in 2018²

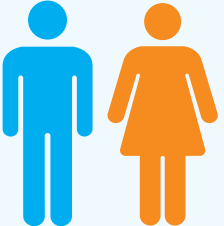
Despite this high disease burden on those affected and their families, research carried out by the *Let's Talk Prostate Cancer* campaign shows that comparatively little political attention is given to the needs of the community at EU level as well as across European countries.

Breast cancer has been used for comparison given that it is a disease mostly affecting women, while prostate cancer affects men. It is also one of the most prevalent cancers among women, in the same way prostate cancer is one of the most prevalent cancers among men. While these two cancers are mostly gender specific, we can learn from the accomplishments of the breast cancer community in putting breast cancer high on policy agendas. This exercise uses breast cancer as an example to inspire us to improve the way prostate cancer patients are diagnosed and treated in the EU.

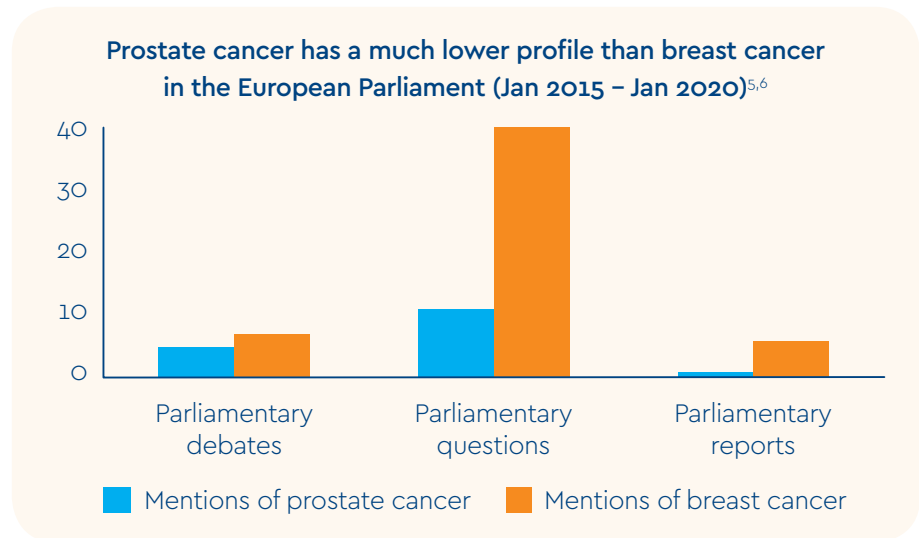
This project has been organised and funded by Astellas Pharma Europe Ltd.

Low political profile of prostate cancer at EU level

Less emphasis is given to prostate cancer at EU level, when compared to breast cancer. An analysis of the number of mentions of both conditions in political debates illustrates the difference in political attention between the two types of cancer. Breast cancer was mentioned **53 times⁵** in debates, questions and reports within the European Parliament between January 2015 to January 2020, compared to only **17 mentions⁶** of prostate cancer.



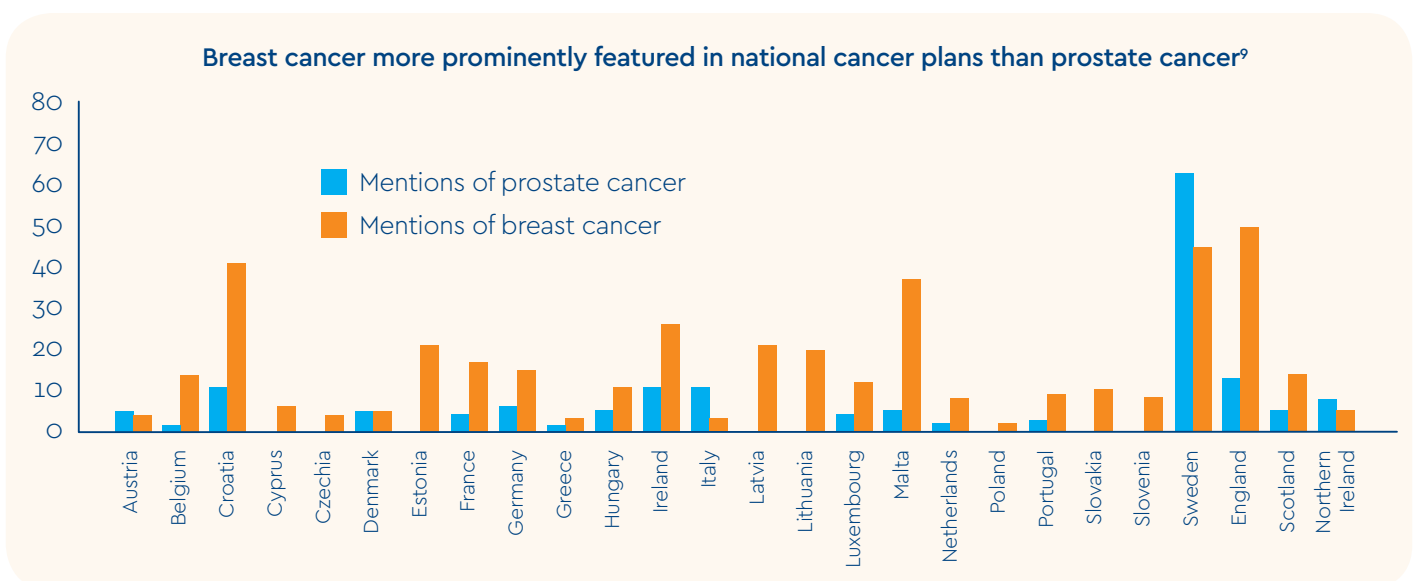
The EC's 2017 report on cancer screening only mentions prostate cancer **twice** whilst breast cancer is mentioned over **100 times⁷**



This is also true for the work of the European Commission (EC). The EC's 2017 report on cancer screening only mentions prostate cancer **twice** whilst breast cancer is mentioned **over 100 times⁷**. The EC has implemented its 'Initiative on Breast Cancer' (ECIBC) and issued specific guidelines for the condition,⁸ whilst equivalent programmes for prostate cancer do not exist. **Europe's Beating Cancer Plan and the work by the Cancer Mission provide a unique opportunity to strengthen the political focus on the needs of the prostate cancer community across Europe.**

The profile of prostate cancer in political debates across European countries

Analysis of national cancer plans across Europe further confirms that prostate cancer does not receive the political attention that would be expected given the scale and impact of the disease. Out of the 28 European countries, 16 mention prostate cancer in their national cancer plan.⁹ However, commitments to other cancers such as breast cancer are featured much more prominently.



Only four countries – Austria, Estonia, Germany and the UK (England) – have put in place specific, tracked targets on prostate cancer, for example to increase the proportion of patients surviving with prostate cancer beyond five years over a certain threshold.^{10,11,12,13}

As with political debates at EU level, male cancers such as prostate cancer are less prominently featured in political debates across the five main European countries:



The profile of prostate cancer in political debates in France

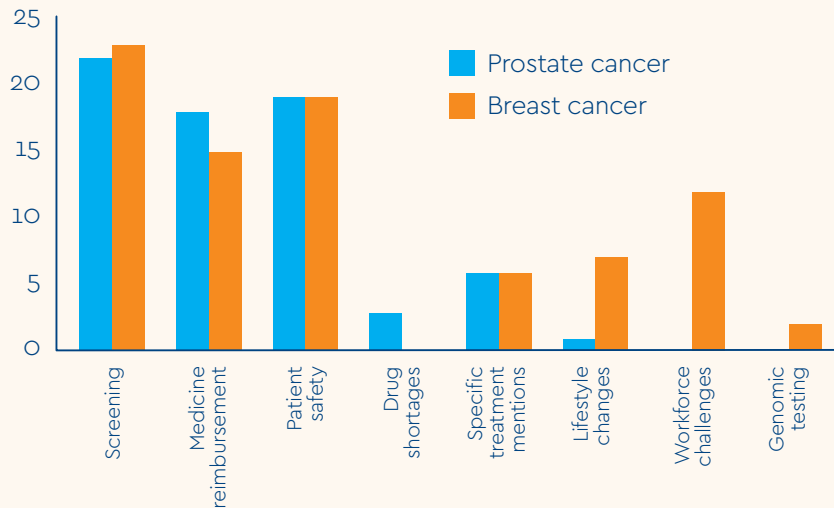
20 VS 3

There were **20** ministerial statements on breast cancer compared to only **3** on prostate cancer¹⁴

25 VS 4

The French National Cancer Plan mentions breast cancer **25 times**, including a dedicated section, compared to only **4 mentions** of prostate cancer¹⁵

Between Jan 2015 and Jan 2020, 95 parliamentary questions on breast cancer were asked, compared to 63 on prostate cancer¹⁶



Prostate cancer has a comparatively low profile within political debates in France, illustrated by the number of parliamentary questions, ministerial statements and commitments made on the condition in the national cancer plan. The lack of political attention is further reflected in patient care with no screening programme in place for prostate cancer whilst equivalent programmes exist for other tumour types, including breast cancer.¹⁷



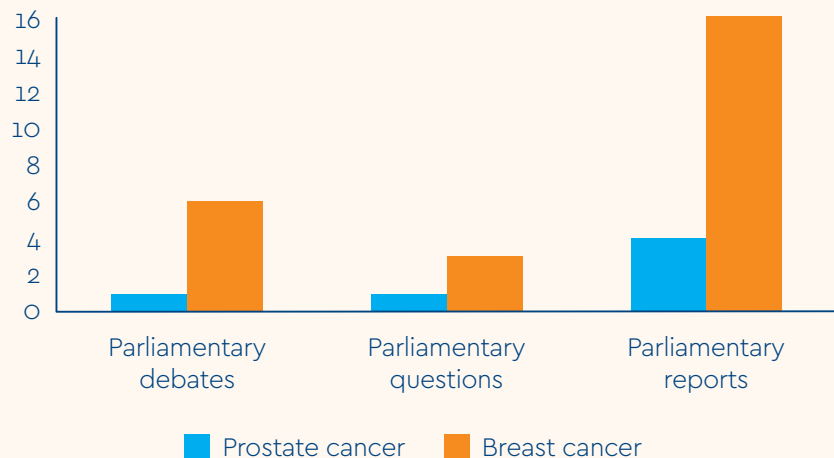
The profile of prostate cancer in political debates in Germany



Prostate cancer was mentioned **3 times** in publications by the Ministry of Health versus **6 references** to breast cancer¹⁸

The German National Cancer Plan mentions breast cancer almost **3 times more often** (14x) than prostate cancer (5x)¹²

Between Jan 2015 and Jan 2020, prostate cancer is significantly less featured in parliamentary activity than other comparable cancers¹⁹



As is the case in France, there is comparatively little political attention to prostate cancer in Germany. While it is mentioned in the National Cancer Plan, it is much less featured than breast cancer. However, there are concrete commitments to better data collection and the launch of a patient outcomes registry for prostate cancer.¹²



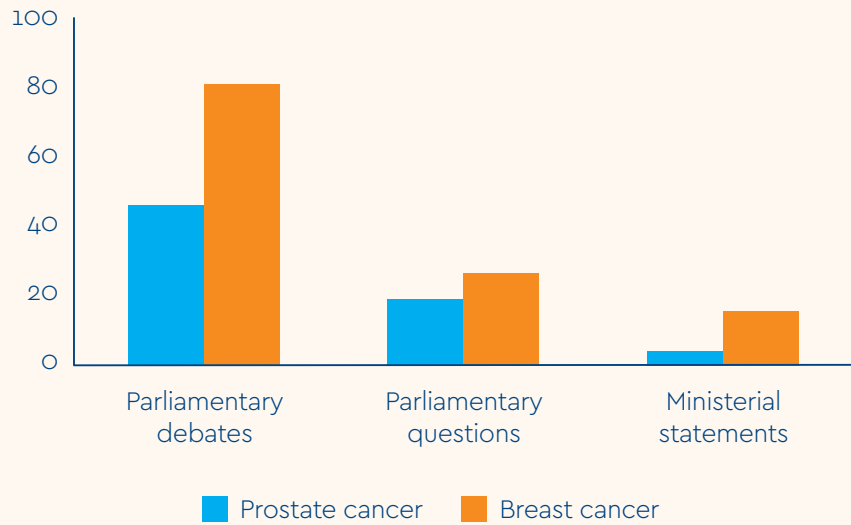
The profile of prostate cancer in political debates in Italy



Breast cancer was mentioned **41 times** in dossiers by the Italian Health and Hygiene Committee, compared to only **17 times** for prostate cancer²⁰

In its "We can beat cancer together" campaign the Italian Government mentioned breast cancer **4 times** and prostate cancer **twice**²¹

Breast cancer was mentioned twice as much (140x) as prostate cancer (76x) in political activities²²



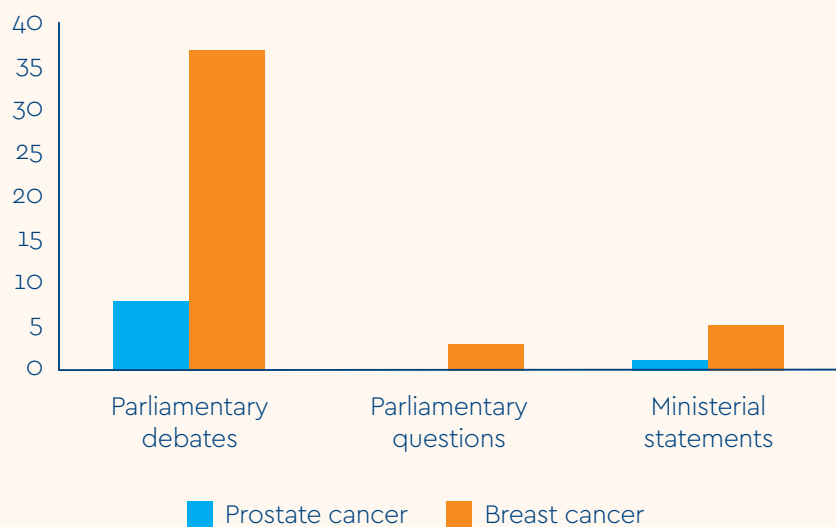
Prevention and screening are the most debated topics related to breast cancer in the Italian Parliament and the Ministry of Health. Incidence and mortality are the most common themes associated with prostate cancer.²²



The profile of prostate cancer in political debates in Spain

There are regular events to raise awareness of **World Breast Cancer Day** in the Spanish Senate²⁴ but none for **World Prostate Cancer Day**

Breast cancer was mentioned 37 times in political debates in Spain compared to 8 mentions of prostate cancer²³

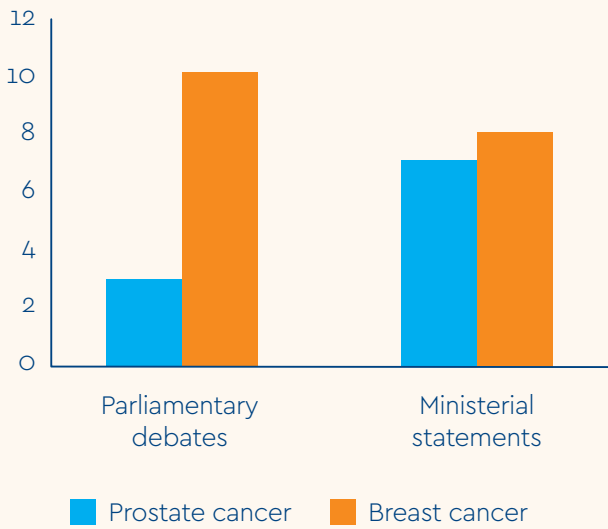


Spain's National Cancer Strategy does not include any specific metrics related to prostate cancer, although it does for breast cancer.²⁵ It should be noted that each of the 17 autonomous regions in Spain follows its own health service and regional strategy for prostate cancer. Prostate cancer is included in the strategic lines of the cancer plan for Galicia, Comunidad Valenciana and Andalusia.²⁶

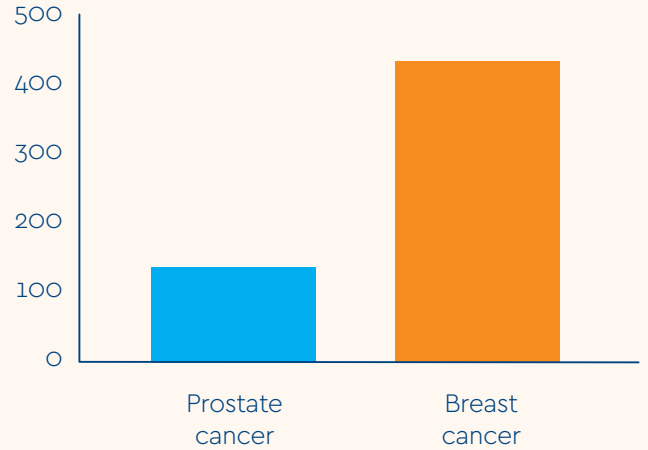


The profile of prostate cancer in political debates in the UK

Prostate cancer less prominently featured in political debates in the UK²⁷



There were 431 PQs on breast cancer between Jan 2015 and Jan 2020 compared to only 136 mentions of prostate cancer²⁸



The **English** National Cancer Strategy mentions prostate cancer **20x** compared to **60x** for breast cancer¹³



The **Scottish** National Cancer Strategy mentions prostate cancer **10x** compared to **30x** breast cancer²⁹



The **Welsh** Cancer Strategy mentions breast cancer **once** and prostate cancer **not at all**³⁰



The Cancer Strategy for **Northern Ireland** mentions breast cancer **24x** and prostate cancer **12x**³¹



The *Let's Talk Prostate Cancer* campaign has been developed to raise political awareness of the needs of men with prostate cancer, their families and carers. It has developed a number of concrete recommendations targeted at all parts of the prostate cancer community

Prostate cancer patient community

Increase the voice of the prostate cancer patient community to share the existing unmet needs of the community with policy-makers, for instance by organising stakeholder awareness events at the EU and national parliaments

Prostate cancer clinical community

Increase active engagement with policy-makers to share ways in which the care for those affected and their families can be improved, for instance by developing a clinical consensus paper to ensure that every patient receives the right treatment at the right time

Policy-makers at EU level

Ensure that prostate cancer is adequately recognised in the EU Beating Cancer Plan, including clear metrics on how patient outcomes will be improved

Policy-makers at national level

Proactively engage with the national prostate cancer patient and clinical community to identify the political action needed to better support the community in the country and ensure that prostate cancer receives the same political focus as other cancer types with a similar high disease burden

Campaigners, clinicians, industry and patients all have a role to play in highlighting the challenges faced by prostate cancer patients and how these can be better addressed, but support must also be present in the political system, which has the means to address those issues.

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