

Press release European Parliament event: “Putting Pancreatic Cancer on the Map – what we have and what we need”



Key stakeholders and Members of the European Parliament gathered for two hours in Brussels to share their views on the “neglected cancer”, pancreatic cancer

On 10 October 2018, the event entitled “Putting Pancreatic Cancer on the Map – what we have and what we need” took place in the European Parliament in Brussels, hosted by Pavel Poc MEP and co-organized with United European Gastroenterology and Pancreatic Cancer Europe.

Today, when diagnosed with pancreatic cancer, your chances to survive might not be the same whether you live in one country or another. It is not that grass looks greener on the other side – it is because pancreatic cancer healthcare is highly unequal in Europe.

“Pancreatic cancer has the lowest survival rate of any other cancer in Europe. The number of deaths from pancreatic cancer has almost doubled in the past three decades and it now claims the lives of over 90,000 EU citizens every year.”

MEP Pavel Poc

Europe has large discrepancies in the incidence and prevalence of pancreatic cancer. These discrepancies are the result of genetic differences, as well as unequal exposure to environmental risk factors, itself the result of cultural differences. Levels of smoking, alcohol consumption, and also diabetes and obesity are different across Europe, which contribute to the variation in the incidence of pancreatic cancer. Moreover, it seems that pancreatic cancer has been neglected for decades at the political level. National cancer plans seldom mention pancreatic cancer, and research funding is incredibly low for such a lethal cancer. Gathering Members of the European Parliament, representatives from patient organisations, medical doctors and key experts, the event focused on presenting the inequalities across Europe and inside countries when it comes to pancreatic cancer care.



Alison Stunt giving her presentation in presence of members of the European Parliament and pancreatic cancer experts

During a keynote she gave at the event, Lydia Makaroff, director of the European Cancer Patient Coalition, presented the PCE Heatmap, an interactive tool aiming to present the situation of pancreatic cancer care in different countries and fill the lack of awareness on this neglected cancer. Alison Stunt,

a pancreatic cancer survivor, founder of Pancreatic Cancer Action, and chairman of the board of Pancreatic Cancer Europe, presented the inequality report, analyzing the heatmap results, identifying the main gaps in policies, and what should be done to address them.

Prof. Miroslav Ryska, from the Charles University and Central Military Hospital in Prague presented population data on the incidence and prevalence of pancreatic cancer in Czech Republic as well as trends of epidemiology of malignant tumors, with a special focus on pancreatic cancer. Patients with pancreatic cancer are treated mostly when they are at an advanced stage of the disease: resection can only be provided in only about 15 - 20 % of cases. Management and treatment of patients with pancreatic cancer should respect clinical practice guidelines.

Participants also addressed the need to promote a better diagnosis to help detect pancreatic cancer earlier and prevent many patients from going through a late-stage diagnosis, oftentimes translating into a death sentence. Best practices were also presented, to demonstrate that there are initiatives to make progress in the fight against this horrendous disease.

“We need an EU targeted policy for Pancreatic Cancer, which will provide research funding, to find efficient early diagnosis methods and more efficient treatment”

MEP Marian-Jean Marinescu

There is an urgent need to develop policies addressing the issue of pancreatic cancer, both at European and national levels, to bridge the gap between the policy prioritization and the mortality of the disease. The Members of the European Parliament present on 10 October all agreed: Member States must cooperate and work together towards increased survival chances and equality in access to care.