The LungAmbition Alliance

Open letter

To:

Members of the Special Committee on Beating Cancer (BECA)

European Union governments must invest in lung cancer screening now

Dear Members of the European Parliament,

We are writing to urge you to prioritise lung cancer screening in the finalisation of the Special Committee on Beating Cancer (BECA) report. Lung cancer causes more deaths in the European Union (EU) than any other cancer.[1] Without urgent action, it will continue to have an unacceptable impact on patients and their loved ones. The Lung Ambition Alliance (LAA), a global coalition formed with the ambition to eliminate lung cancer as a cause of death, with partners in over 50 countries, remains extremely concerned that the implementation of lung cancer screening is not given sufficient priority in the EU. The LAA recently published the report *Lung cancer screening: the cost of inaction*,[2] which emphasises the urgency of implementing targeted lung cancer screening and summarises the substantial supporting evidence.

Europe's Beating Cancer Plan rightfully recognises the importance of early detection in general, but falls short on prioritising or setting clear objectives for lung cancer screening implementation.[3] Given the maturity and strength of evidence, lung cancer screening should be prioritised in upcoming cancer screening programmes. The time to act is now.

Earlier detection through screening could transform lung cancer from a fatal to a treatable condition,[4] with considerable impact on quality of life.[5] More than 40% of cases of lung cancer are detected at stage IV, when patients' likelihood of surviving five years from diagnosis is under 10%; if diagnosed at stage I, five-year survival rises to 68–92%.[6-8] Early detection of lung cancer can thus save lives.

There is now indisputable evidence that lung cancer screening of high-risk individuals using low-dose computed tomography scans offers a safe and effective tool to shift diagnosis to an earlier stage.[4 9] Lung cancer screening for high risk individuals also compares favourably with other screening programmes in terms of cost-effectiveness and potential benefits;[10] data suggests fewer people need to be screened for lung cancer to prevent one death compared with breast or colorectal cancer screening.[2] Furthermore, the benefits of lung cancer screening extend beyond lung cancer and can contribute to achieving key European health priorities, such as reducing the burden of non-communicable diseases, improving the sustainability of our health systems through reduced costs of advanced disease, and reducing socioeconomic disparities in health.[11 12] In light of these benefits, lung cancer screening should be considered the next big opportunity in cancer detection.

Time is everything for people with lung cancer**.** As a consequence of the COVID-19 pandemic, the risk of late presentation of lung cancer has been exacerbated across the EU due to several factors, including a backlog of cases.[13] This makes the need to invest in screening and early detection all the more urgent.

As the BECA Committee considers amendments to its report regarding the European Parliament's position on Europe's Beating Cancer Plan, we urge you to consider the following issues to ensure the opportunities presented by lung cancer screening are not missed:

- Recognise the importance of targeted lung cancer screening and the weight of evidence supporting its implementation
- Prioritise lung cancer screening by including it in the upcoming EU Cancer Screening Scheme
- Provide support to Member States for the implementation of targeted lung cancer screening by including lung cancer in the Council Recommendations on cancer screening
- Make specific recommendations to tackle lung cancer screening inequalities in the EU, for example as part of guidance published by the Knowledge Centre on Cancer.

The LAA remains at your disposal to discuss this letter and provide any additional information.

We thank you for your consideration.

Kind regards,

The Lung Ambition Alliance

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References

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