

BECA call for contributions:

Impact of the COVID19-pandemic on cancer prevention, health services, cancer patients and research

Introductory remarks

Please note:

- The below nine questions each relate to a particular aspect of cancer: Primary and secondary prevention, patients and caregivers, treatment, shortages of medicines, product and equipment, cancer workforce, availability and deployment of data, research and innovation, and long-term policies on lessons learnt.
- It is not necessary to answer every question.
- Answers should be accompanied by relevant data, evidence and examples, where available
- A maximum of 1800 characters (approximately one A4 page) applies to each answer.

Questions

1. Impact on lifestyle-related behaviours

- What is the impact of the COVID19-induced lockdowns and quarantines on dietary habits, physical activity, alcohol consumption, smoking and stress and anxiety levels among the European population?
- What measures could the EU take to prevent and to mitigate the negative consequences of lifestyle-related behavioural changes due to the COVID19-pandemic?
- Please support your answer with data, evidence and/or concrete examples where available.

2. Impact on cancer prevention measures

- What is the impact in the short -, middle - and long-term on patients, and health systems of:
 - the suspension or cancellation of campaigns promoting a healthy lifestyle
 - the disruption in (routine) cancer screening services and vaccination programmes
 - the non-referral of persons with suspected cancer symptoms
 - the suspension of diagnostic services for cancer
- What measures could the EU take, and how should EU policies and legislation contribute to addressing these challenges?
- Please support your answer with data, evidence and/or concrete examples where available.

3. Impact on wellbeing of patients with cancer and their caregivers

- What are the experiences of cancer patients related to the COVID19-pandemic? In challenged health care systems, are patients with cancer informed about additional sanitary measures and changes in cancer-specific care? Does the current COVID-19 pandemic discourage patients from undertaking preventive, diagnostic or therapeutic actions?
- What recommendations are needed to address long-term care challenges and help improve quality of life for patients, their family members and friends or carers? What measures could the EU take, and how should EU policies and legislation contribute to addressing these challenges?
- Please support your answer with evidence and/or concrete examples where available.

4. Impact on cancer treatment

- How does the COVID19-pandemic effect the availability and timeliness of cancer treatments?
- Can you provide data on surgery postponements or cancellations, changes or cancellations in radiation therapy and systemic anticancer treatments and the consequences of a (partial) transition to telemedicine?
- What concrete EU-initiatives could significantly help to address the cancer-related backlog created by the COVID19 pandemic and ensure continued access of citizens to healthcare services for all their cancer-related needs during the current (or future) health crisis?

- Please support your answer with details on the data source and methodology used for the collection and validation of data, and indicate the concerned EU Member State, the concerned period and the (estimated) number of people affected.

5. Impact on shortages of medicines, product and equipment.

- Does the current COVID-19 pandemic have an effect on the shortages of medicines used in cancer care? If yes, which medicines are affected? What measures should be taken, including at EU-level, to prevent and tackle the causes of shortages of medicines and medical equipment and mitigate the impact on patients, clinicians, pharmacists and other stakeholders?
- What initiatives should the EU take to ensure an effective response and equal access to optimal cancer care for all cancer patients when this situation occurs again?
- Please support your answer with data, evidence and/or concrete examples.

6. Impact on the EU cancer workforce.

- What examples of the negative impact of the COVID-19 pandemic on healthcare professionals working in oncology can you provide? What measures should be taken, including at EU-level, to **better safeguard healthcare professionals' safety at work during the current (or future) health crisis**?
- What durable solutions are needed to address cancer workforce shortages in and across the EU?
- Please support your answer with data, evidence and/or concrete examples.

7. Availability and deployment of data

- What is the concrete impact of the COVID-19 pandemic on cancer data availability? What measures, including EU initiatives, could significantly help to improve the availability and deployment of data related to cancer care Please support your answer with data, evidence and/or concrete examples.
- Have you been informed/are you aware of guidelines issued by EU Member States, regional or local authorities for the systematic collection of data concerning the impact of the COVID19-pandemic on cancer care services? If so, please provide data, details and/or examples.
- What initiatives should the EU take to improve access to and sharing of data (including real-time data) on cancer? How should relevant stakeholders collaborate to create a robust and functional European Health Data Space (EHDS) for better healthcare, innovative research, as well as more data-informed policy-making and regulatory activities in health? Please support your answer with evidence and/or concrete examples.

8. Impact on research and innovation

- Do you see any innovative solutions or technologies that arise from the COVID19-pandemic that could help in strengthening cancer care services?
- What innovative technologies and solutions should be deployed to strengthen cancer systems and provide optimal care to cancer patients?
- Please support your answer with data, evidence and/or concrete examples.

9. Long-term policies

- In the aftermath of the COVID19 pandemic, and its impact on cancer care particularly, what long-term policies should the EU roll out/implement to address identified problems and make health systems more resilient in case of any future health crises?
- Do you see it justified (and if so, how) to change the EU's roles and remits to better combat those problems?
- Do you foresee the need for an EU plan to prevent and to manage of any health crises on Cancer stages or more broadly on non-communicable diseases?