

Implementing Europe's Beating Cancer Plan means turning goals for improved chronic disease prevention into reality

ECDA statement for the European Week Against Cancer 2021

May 31, 2021

On the occasion of the [European Week Against Cancer](#) and [World No Tobacco Day](#), the European Chronic Disease Alliance (ECDA) reiterates its support for the prevention targets and measures set out in Europe's Beating Cancer Plan; and outlines how important it is to implement actions towards their achievement without delay.

Activating Prevention Measures with Urgency

The Plan rightly places prevention at the heart of the EU's fight against cancer, which is expected to significantly help to improve the health of all EU citizens and prevent major chronic diseases. In particular, goals for a tobacco-free generation and commitment to action in the areas of food and alcohol labelling are much required; and their swift implementation is a must.

Cancer and co-morbidities present a significant challenge across Europe. In 2020, 2.7 million EU citizens were diagnosed with cancer and 1.3 million died from it, accounting for the second cause of death in the EU after cardiovascular diseases. Over 40% of cancers are preventable and could be avoided by addressing key modifiable risk factors. Among the major modifiable risk factors are smoking, harmful alcohol consumption, unhealthy diets, lack of physical activity, and air pollution, all of which are common to the majority of chronic diseases.

Prevention is central to protecting and improving people's health and well-being. It is the most cost-effective way of addressing the growing prevalence of chronic diseases in the EU¹. Investing in prevention and in people's health and wellbeing as a long-term goal pays off².

Helping Europeans 'Commit to Quit'

ECDA supports the vision for a "tobacco-free generation" proposed in the Plan. Tobacco use is the cause of around one fourth of all cancers and a major risk factor for all main chronic diseases. Second-hand smoking is also a main cause of mortality in the EU³.

Alignment with UN and WHO tobacco reduction targets is essential, but the EU should firmly strive for reaching the ambition of less than 5% of the EU population using tobacco by 2040. This would be a major achievement for public health across Europe and would save the lives of millions of Europeans. Tackling tobacco in Europe has the potential to unlock enormous progress in Europe's agenda of disease prevention and the EU has a critical role to play in supporting citizens "[Commit to Quit](#)".

¹ European Commission (2020). Roadmap for Europe's Beating Cancer Plan. Available from: <https://ec.europa.eu/info/law/better-regulation/have-your-say/initiatives/12154-Europe-s-Beating-Cancer-Plan>

² Dyakova M, Hamelmann C, Bellis MA, Besnier E, Grey CNB, Ashton K et al. Investment for health and well-being: a review of the social return on investment from public health policies to support implementing the Sustainable Development Goals by building on Health 2020. Copenhagen: WHO Regional Office for Europe; 2017 (Health Evidence Network (HEN) synthesis report 51).

³ European Commission. Health Promotion and Disease Prevention Knowledge Gateway. EU burden from non-communicable diseases and key risk factors: Tobacco use. Available from: <https://ec.europa.eu/jrc/en/health-knowledge-gateway/societal-impacts/burden>

This involves adopting robust legislation that enhances tobacco control, but also addresses novel tobacco and emerging products like e-cigarettes and heated tobacco products; and ensures proper enforcement at national level.

The review of the EU Tobacco Products Directive should be a unique opportunity to embed provisions in that regard, and activate the goals of the Europe's Beating Cancer Plan.

There is consensus among the health community that novel tobacco products pose a substantial threat to health, notably lung health⁴. ECDA strongly recommends to address novel tobacco products in the same way as known tobacco products, and to focus prevention frameworks on long-term consequences by clearly conveying the risks of prolonged exposure.

Achieving the Culture Change Required: Action on Alcohol

Alcohol consumption is a well-known risk factor for all major chronic diseases⁵. Approximately 268,000 deaths and almost 8 million DALYs (Disability Adjusted Live Years) estimated to be attributable to alcohol consumption in the EU in 2019 are related to chronic diseases⁶. Alcohol consumption is associated with increased mortality among young adults.

The highest numbers of deaths associated with drinking alcohol are from cardiovascular diseases, followed by injuries (especially unintentional injuries), gastrointestinal diseases (mainly liver cirrhosis) and cancers⁷. Drinking alcohol increases the risk of at least 7 different types of cancer, including: breast, colorectal, liver, mouth and some types of throat cancer such as oesophagus (food pipe), larynx (voice box), and pharynx (upper throat).

However, there is a low level of knowledge in Europe on these links and the WHO European region has the highest rate of alcohol consumption in the world.

Any successful Europe's Beating Cancer Plan must help drive improved awareness of risks associated with alcohol consumption and more generally the detrimental impact on health and on the onset of major chronic diseases, and of behaviours towards alcohol. Future proposals by the European Commission, envisaged as part of the Plan, to achieve new mandatory requirements for alcoholic beverages to indicate the list of ingredients, and provide nutrition declarations and health information labelling, should be implemented in full and without dilution.

Further, the Court of Justice of the European Union judged minimum unit pricing (MUP)⁸ to be more effective than comparable measures, as it was highly targeted at harmful and extreme drinkers and was likely to reduce health inequality. The introduction of excise taxes and other pricing policies, such as minimum unit pricing, is needed to decrease the affordability of alcohol. Increased harmonisation of these rules throughout EU countries should be promoted; notably as alcohol is the most dangerous commodity marketed in Europe, second only to tobacco, where marketing is more heavily regulated⁹.

⁴ European Respiratory Society (2020). Scientific Committee on Health, Environmental and Emerging Risks (SCHEER) Preliminary Opinion on electronic cigarettes: ERS Comments.

⁵ European Commission. Health Promotion and Disease Prevention Knowledge Gateway. Alcohol consumption: effects on health. Available from: https://knowledge4policy.ec.europa.eu/health-promotion-knowledge-gateway/alcoholic-beverages_en#nav_Tocch7

⁶ European Commission. Health Promotion and Disease Prevention Knowledge Gateway. Health and economic burden related to alcohol consumption. Available from: https://knowledge4policy.ec.europa.eu/health-promotion-knowledge-gateway/alcoholic-beverages_en#nav_Tocch7

⁷ European Commission. Health Promotion and Disease Prevention Knowledge Gateway. Effect of alcohol consumption on general/multiple health outcomes. Available from: https://knowledge4policy.ec.europa.eu/health-promotion-knowledge-gateway/alcoholic-beverages_en#nav_Tocch7

⁸ European Court of Justice. The Scotch Whisky Association and Others v The Lord Advocate, The Advocate General for Scotland. 2015.

⁹ Monteiro MG, Babor TF, Jernigan D, Brookes C. Alcohol marketing regulation: from research to public policy. *Addiction*. 2017;112:3–6

In particular, stronger regulatory policy action to tackle the exposure to alcohol marketing and advertising is needed on broadcast media, digital media and through the sponsorship of events, particularly those aimed at young people.

Protecting Now Europe’s Current and Future Generations

The specific needs of children and youth groups together with their increased vulnerability to key risk factors are addressed in the Plan. Implementation of these measures should be a priority to protect the health of future generations.

Europe needs to turn to a swift implementation of initiatives aimed at putting a halt to the promotion of unhealthy food, drinks and other consumer products such as alcohol and (novel) tobacco. These include targeted actions on taxation, all forms of marketing and advertising (including online), cross border sales and mandatory harmonised labelling with evidence-based easy-to-understand information.

Europe also needs to step up in the fight against other, environmental, risk factors cancer and other chronic diseases, such as occupational agents. Urgent action is required too in order to elevate protection offered to Europe’s health professionals against the health threats they face at work. The promised update of the EU Strategic Framework for Health and Safety at Work should be used as an opportunity to clearly recognise their needs and take action.

Measuring Success and Progress of Prevention Measures

Finally, alongside rapid implementation of the Beating Cancer Plan’s Prevention measures, the ECDA also recommends their implementation and progress be well charted via such mechanisms as the Inequalities Registry to be developed as a part of the Plan. A distinct Prevention section could help to trace progress on reduced tobacco consumption (and towards the tobacco-free generation goal), alcohol consumption, and other relevant measures, as well as give attention to some of the socio-economic aspects pertinent to this area, including health literacy.

Implementing Europe’s Beating Cancer Plan means working in collaboration with all relevant actors within and beyond the cancer community, in an inclusive mindset, to maximise the benefits and impact of the Plan in other disease areas and co-morbidities.