



**Hearing of the European Parliament's Special Committee on Beating Cancer (BECA)  
Facilitating a healthy lifestyle: how to reduce cancer related lifestyle risk factors?  
Wednesday 2 December, 09:00-12:00**

Welcome and opening remarks by [Bartosz Arlukowicz MEP, BECA Chair](#)

In his opening statements, BECA Chair **Bartosz Arlukowicz** voiced his hopes that, in the context of the postponement of the presentation of Europe's Beating Cancer Plan to January, some of the recommendations from the Special Committee can be incorporated in the Plan. He also underlined the impact of the ongoing COVID-19 pandemic on cancer, and the need for the European Union to get prepared to the increased cancer burden expected as a consequence of this impact.

Mr. Arlukowicz emphasised that 40% of cancers are preventable in European and that prevention is the most effective way of combatting cancer.

[Part 1: Lifestyle risk factors for cancer: Tobacco, alcohol and nutrition](#)

The role of tobacco control in cancer prevention: **Prof. Dr. Ute Mons**, Professor of Cardiovascular Epidemiology of Aging at Heart Centre Cologne, University of Cologne and German Cancer Research Center (DKFZ), Germany:

- Tobacco cigarettes are the most dangerous consumer product on the EU market.
- The implementation of strong tobacco control policies is still unequal across the EU.
- There is a scope for the EU to act to strengthen tobacco control measures, such as by introducing mandatory plain packaging within the Tobacco Products Directive.
- Implementation of tobacco control policies at highest level in Europe would prevent the onset of around 1.65 million lung cancer cases over a 20-year period. → Vast potential for prevention and need to act now, prevention efforts today will pay off in the future.

Lung Cancer: Tobacco use, prevention and screening: **Dr. Nataliya Chilingirova**, Associate Professor of Oncology, Science and Research Institute, Medical University Pleven, Bulgaria:

- Lung cancer is the biggest killer of all cancer types in Europe.
- Implementation of lung cancer screening allows for significant decreases in mortality rates.
- Lung cancer screening should be made available to all European citizens everywhere in Europe, in combination with smoking cessation to be cost-effective.



- Tobacco cessation remains the most important intervention to decrease lung cancer risk.
- New classes of tobacco products (HTPs and ENDS) are expected to have a substantial negative health impact as compared to total tobacco abstinence, but there is increasing recognition of the potential of their consumption, rather than of tobacco cigarettes, to reduce disease risk.

Alcohol use and cancer prevention: **Dr. Carina Ferreira-Borges**, Programme Manager Alcohol and Illicit drugs, WHO European Office for Prevention and Control of Noncommunicable Diseases:

- Europe has the highest levels of alcohol consumption in the world and alcohol is responsible; for 300 000 deaths per year in the EU, that could be prevented by reducing alcohol use.
- Alcohol is a major contributor to cancer, linked with the most prevalent cancer types, and cancer is the main cause of alcohol-related death in the EU.
- There is no safe threshold for alcohol consumption: “Less is better. None is the best”: for instance, ¼ alcohol-attributable breast cancer is linked to “moderate drinking”.
- Policy options for the EU to prevent alcohol-attributable cancers include:
  - Promoting public awareness of the link between alcohol use at any level and cancer;
  - Aligning single market principles with public health-focused alcohol control policies;
  - Reducing affordability of alcohol through excise duties and minimum prices;
  - Restricting alcohol marketing and introducing cancer-specific health warnings on alcohol containers.

The impact of alcohol on health and cancer prevention: **Mariann Skar**, Secretary General, European Alcohol Policy Alliance:

- Knowledge of the link between alcohol and cancer is very low in Europe: 10% of all Europeans ignore it, 20% do not believe in it.
- The Europe’s Beating Cancer Plan should include measures for funding of awareness-raising campaigns and gathering information on citizens’ knowledge on alcohol and cancer, on prevalence of alcohol-related cancers in the EU and on Member States’ best practices.
- Key areas of action for the EU on alcohol policy include:



- Reducing exposure of the population to alcohol marketing, sponsorship, advertising;
- Decreasing affordability through raising excise duties and allowing limitations to cross-border purchases and setup of minimum unit prices by Member States;
- Information to consumers through alcohol labelling;
- Developing alcohol research, data collection and monitoring, notably through an Alcohol Monitoring Centre.

Food, nutrition and cancer: **Dr. João Breda**, Head WHO European Office for Prevention and Control of Noncommunicable Diseases (NCDs):

- Half of all European countries are projected not to achieve the WHO Sustainable Development Goal in respect to reduction of premature death from NCDs, including cancer.
- 30% of all cancer cases could be linked to poor dietary habits, whose modification represents a promising approach for the prevention of cancer.
- Recommended policies, including WHO 'Best Buys', need to be better implemented by European countries.
- Main recommendations include maintaining a healthy weight, avoiding processed meat, limiting salt, sugar and red meat consumption, and promoting breastfeeding.
- European food systems need to be built back better in the post-COVID-19 era.

Q&A session: During the ensuing discussion, the members of the Special Committee voiced their support for a strong inclusion of prevention measures in Europe's Beating Cancer Plan. Key topics that were raised by the MEPs included: the need for public awareness campaigns on cancer risks and for the promotion of healthier lifestyles, the relevance of taxation measures on cancer determinants, regulatory approaches towards the classification of alcohol products and e-cigarettes, links between cancer causation and social inequalities, the provision of support on cancer causation and prevention, and the collection of relevant data to inform cancer prevention policies.

**Alessandra Moretti MEP** (S&D, Italy): *"We need to have a coordinated effort at European level to inform children at school [about cancer risks] and to take regulatory action."*

**Katerina Konecna MEP** (GUE/NGL, Czech Republic): *"I believe that a significant number of cancer cases of socially determined."*



**Sara Cerdas MEP** (S&D, Portugal): *"It would be important that the new European Health Data Space collects data on risk factors and allows for broad studies allowing us to improve our understanding of the causation of cancer and other NCDs."*

**Maria Spyraiki MEP** (EPP, Greece): *"There is no safe level of drinking. We should establish an EU campaign on this, targeting the youth"*

**Manuela Ripa MEP** (Greens/EFA, Germany): *"Preventing cancer does not only reduce human suffering, but also offers the most cost-effective long term strategy"*

Rapporteur **Véronique Trillet-Lenoir** reflected on some of the relevant measures being actively considered by the Special Committee, including:

- raising excise duties for tobacco products and revising pricing policies on alcohol and food;
- prohibiting tobacco aromatisers and continuing assessment of e-cigarettes;
- imposing plain packaging for cigarettes and health warnings signs on alcohol containers and high-risk products, and introducing (mandatory) food labelling through the NutriScore system;
- restricting advertising of alcohol products, ultra-processed food and sugar beverages;
- promoting sport activities and healthier lifestyles.

## Part 2: Prevention of cancer: vaccination and risks of UV exposure

UV exposure-related cancers and prevention: **Prof. Piotr Rutkowski**, Professor of Surgical Oncology, Head of the Department of Soft Tissue/Bone Sarcoma and Melanoma, Maria Skłodowska-Curie Memorial Cancer Center and Institute of Oncology, Warsaw, Poland:

- UV radiation is a major cause of skin cancers, which make up the most common cancer type in the Caucasian population and whose incidence has doubled over the last 20 years.
- Prevention of skin cancer involves reduction of UV exposure through awareness raising and early detection through education of relevant specialists and of general practitioners.
- There is no safe limit for exposure to UV from artificial tanning devices (sunbeds); unfortunately, their use is still not restricted everywhere in the EU.



- The fight against UV-related cancers requires: better education for more responsible exposure to sun, EU-level legal action against the use of sunbeds and promotion of the European Code Against Cancer.

The role of HPV vaccination in cancer prevention: **Prof. Daniel Kelly**, Royal College of Nursing Chair of Nursing Research, co-chair of the European Cancer Organisation HPV Action Network

- HPV is a common sexually-transmitted infection, causing 2.5% of all cancers in Europe, including cervical cancer and other cancer types, 20-30% of which occur in men.
- All HPV-related diseases can be prevented through vaccination and screening.
- The European Union and the wider WHO European region should commit to the core goal of matching and exceeding the WHO Global Strategy for Cervical Cancer Elimination and implement policies and strategies for the elimination of all the cancers and diseases caused by HPV.
- The recently published report of the European Cancer Organisation HPV Action Network “Viral Protection: Achieving the Possible” outlines evidence-based steps towards this goal in four key areas: vaccination, screening, treatment, and public awareness.
- Gender-neutral vaccination is essential to save lives and is cost-effective; the Europe’s Beating Cancer Plan should encourage all European countries to implement it, with a target of 2030 for all programmes to be in place.
- Vaccination uptake rates need to be improved in many countries, with a target of at least 90% of coverage for adolescents of both genders.
- Europe can and must be ambitious. HPV-caused diseases are a shared problem, requiring shared ambitions.

Q&A session: During the ensuing discussion, the chair and the members of the Special Committee expressed a strong support for the recommendations listed by both speakers. Key topics that were raised by the MEPs included: the banning of sunbeds, the inclusion of boys in HPV vaccination campaigns, the need to increase vaccination uptake rates, the coverage of HPV vaccination costs and the fight against vaccine hesitancy and misinformation.

**Cindy Franssen MEP** (EPP, Belgium): *“Exposure to UV radiation from sunbeds causes cancer. There is no safe use of sunbeds.”*

**Alessandro Moretti MEP** (S&D, Italy): *“We need a very stringent European HPV gender-neutral vaccination programme. Every young person that is not vaccinated is at risk.”*



**Katerina Konecna MEP** (GUE/NGL, Czech Republic): *"We have a vaccine against HPV. But a lot of Member States don't agree with a harmonisation of HPV vaccination in Europe."*

**Véronique Trillet-Lenoir MEP** (Renew, France): *"We need to work all together on insufficient levels of uptake of HPV vaccine, at European level and in the Member States. It is a very urgent situation and needs to be at the heart of our work to fight cancer."*

**Sara Cerdas MEP** (S&D, Portugal): *"More and more, with the widespread of misinformation, we are seeing more and more vaccine hesitancy, and this is something we must fight against."*

**Nicolas Gonzalez Casares MEP** (S&D, Spain): *"We need to have an HPV vaccination campaign throughout the entire Europe, not just for young girls."*

**Giórgos Georgíou MEP** (GUE/NGL, Cyprus): *"All vaccination needs to be performed free of charge. Health is a social good."*