Mission Cancer 2024: le nuove opportunità di ricerca e innovazione e l’andamento di alcuni importanti progetti: EuonQoL, CCI4EU e Echos

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Coordinatore CCI4EU, EUonQoL
Leader WP2 ECHOS
• Il cancro in Europa
• European Cancer Plans: focus su Cancer Mission
• Le call del 2024 e 2025
• L’esperienza di INT
• Qualche riflessione
Cancer in Europe

• 2.7 million new cases (2020), 1.3 million deaths (2020), expected increase of about 25% by 2035

• There is a large variability in Epidemiology, Economics, Health Care and Health Care Systems, and Outcomes

• Both between and within countries
Age standardised incidence and mortality rates for all cancers for men and women in Europe 2018 (excluding non-melanoma skin cancers)

Investment in health care

Figure 7.3. Health expenditure as a share of GDP, 2018 (or nearest year)

Note: Expenditure excludes investments, unless otherwise stated.
1. Australia expenditure estimates exclude all expenditure for residential aged care facilities in welfare (social) services. 2. Includes investments.
Source: OECD Health Statistics 2019, WHO Global Health Expenditure Database.

StatLink: https://doi.org/10.1787/888934016816
Per capita health expenditures
GfK Purchasing Power Europe 2023

<table>
<thead>
<tr>
<th>2023 ranking</th>
<th>Country</th>
<th>2023 per capita purchasing power in €</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Liechtenstein</td>
<td>68,943</td>
</tr>
<tr>
<td>2</td>
<td>Switzerland</td>
<td>49,592</td>
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<tr>
<td>3</td>
<td>Luxembourg</td>
<td>40,931</td>
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<tr>
<td>4</td>
<td>Iceland</td>
<td>33,424</td>
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<tr>
<td>5</td>
<td>Denmark</td>
<td>32,490</td>
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<tr>
<td>6</td>
<td>Ireland</td>
<td>26,382</td>
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<tr>
<td>7</td>
<td>Austria</td>
<td>26,671</td>
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<tr>
<td>8</td>
<td>Norway</td>
<td>26,301</td>
</tr>
<tr>
<td>9</td>
<td>Germany</td>
<td>26,271</td>
</tr>
<tr>
<td>10</td>
<td>United Kingdom</td>
<td>26,081</td>
</tr>
</tbody>
</table>

Italy about 20,000, 16/42 countries

Milan, top ranking, about 28,000

Crotone, last with about 12,000
Variability across the 21 Italian regions, with a North-Center-South trend
Europe’s Beating Cancer Plan and Cancer Mission have the common objectives to **improve quality** and **decrease inequalities** in cancer care in Europe, in order to:

**Decrease mortality, improve survival and ameliorate QoL**

These objectives may be achieved only:

- supporting research and health care activities
- a wider participation of all Member States and Affiliated Countries
- a direct involvement of all the relevant stake-holders in the co-design and project implementation, including citizens and patients
- alignment and coordination at national and European level
Five main actions

• Increase knowledge (research)
• Increase access to quality care
• Fight actionable determinants of inequalities
• Involve active participation of relevant stake-holders
• Optimize synergy between funded projects
Cancer Mission

Proposed Mission
CONQUERING CANCER:
MISSION POSSIBLE
Report of the Mission Board for Cancer

13 bold recommendations
13 bold actions
13 calls
EU Cancer Mission

Overall goal

To improve the lives of more than 3 million people by 2030, through prevention, cures, and for those affected by cancer and their families to live longer and better

Specific objectives

- Understand cancer and its risk factors
- Prevent what is preventable
- Optimise diagnostics and treatment
- Support quality of life of people living with and after cancer

Transversal priorities:

- Equitable access for all, personalised medicine, innovation, childhood cancer

Concrete actions:

- Four flagship initiatives
- R&I actions under each specific objective & project clusters
- Synergies with other initiatives at EU, national, and regional levels
- Citizen engagement
Cancer Mission - WP2021-2024

- Mission-guiding principles
- Mission clusters
- Synergy Europe’s Beating Cancer Plan

Develop new methods and technologies for screening and early detection
HORIZON-MISS-2021-CANCER-02-01

Improving and upscaling primary prevention of cancer through implementation research
HORIZON-MISS-2022-CANCER-01-01

Enhance cancer prevention through behaviour change
HORIZON-MISS-2023-CANCER-01-02

Early detection heritable cancers in European regions
HORIZON-MISS-2024-CANCER-01-03

Pragmatic clinical trials to optimise treatment for cancer patients
HORIZON-MISS-2022-CANCER-01-03

Strengthen research capacities of comprehensive cancer infrastructures
HORIZON-MISS-2022-CANCER-01-02

Pragmatic clinical trials minimally invasive diagnostics
HORIZON-MISS-2023-CANCER-01-03

Support a pragmatic clinical trial programme by cancer charities
HORIZON-MISS-2024-CANCER-01-04

Ensure equitable access

Mission on Cancer:
By 2030, more than 3 million lives saved, living longer and better

Prevent what is preventable
Optimise diagnostics and treatment
Support quality of life

Understand

Develop and validate a set of quality-of-life measures for cancer patients and survivors
HORIZON-MISS-2021-CANCER-02-02

Towards the creation of a European Cancer Patient Digital Centre
HORIZON-MISS-2022-CANCER-01-04

Improve quality of life for survivors of childhood cancer (Best practices and tools)
HORIZON-MISS-2023-CANCER-01-04

Improving the understanding and management of late-effects in adolescents and young adults
HORIZON-MISS-2024-CANCER-01-05

An information portal for the European Cancer Patient Digital Centre
HORIZON-MISS-2024-CANCER-01-06

Preparing UNCAN.eu, a European initiative to understand cancer
HORIZON-MISS-2021-UNCAN-01-01

Better understand healthy versus cancer cells at individual and population level
HORIZON-MISS-2021-CANCER-02-03

Better understand tumour-host interactions in cancer patients
HORIZON-MISS-2023-CANCER-01-01

Use cases for the UNCAN.eu research data platform
HORIZON-MISS-2024-CANCER-01-01

Creation of national cancer mission hubs - HORIZON-MISS-2022-CANCER-01-05

National cancer data nodes - HORIZON-MISS-2024-CANCER-01-02
<table>
<thead>
<tr>
<th>Recommendation</th>
<th>Action</th>
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<tbody>
<tr>
<td>1</td>
<td>Launch UNCAN.eu – a European Initiative to Understand Cancer</td>
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<td>2</td>
<td>Develop an EU-wide research programme to identify (poly-)genic risk scores</td>
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<td>3</td>
<td>Support the development and implementation of effective cancer prevention strategies and policies within Member States and the EU</td>
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<td>4</td>
<td>Optimise existing screening programmes and develop novel approaches for screening and early detection</td>
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<td>5</td>
<td>Advance and implement personalised medicine approaches for all cancer patients in Europe</td>
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<td>6</td>
<td>Develop an EU-wide research programme on early diagnostic and minimally invasive treatment technologies</td>
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<tr>
<td>7</td>
<td>Develop an EU-wide research programme and policy support to improve the quality of life of cancer patients and survivors, family members and carers, and all persons with an increased risk of cancer</td>
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<tr>
<td>8</td>
<td>Create a European Cancer Patient Digital Centre where cancer patients and survivors can deposit and share their data for personalised care</td>
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<td>9</td>
<td>Achieve Cancer Health Equity in the EU across the continuum of the disease</td>
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<td>10</td>
<td>Set up a network of Comprehensive Cancer Infrastructures within and across all EU Member States to increase quality of research and care</td>
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<tr>
<td>11</td>
<td>Childhood cancers and cancers in adolescents and young adults: cure more and cure better</td>
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<tr>
<td>12</td>
<td>Accelerate innovation and implementation of new technologies and create Oncology-focused Living Labs to conquer cancer</td>
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<tr>
<td>13</td>
<td>Transform cancer culture, communication and capacity building</td>
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</table>
Governance – linking EU and Member States’ initiatives

**Public Health Expert Group Cancer Subgroup** (set up by EC)
- Representatives from health and research ministries

**SPC Cancer Mission Working Group** (set up by EC)
- Representatives from research ministries

**National Cancer Mission Hubs** (to be set up by MS – ECHoS project)
- National entities to be set up in every MS to support Mission’s implementation

**‘Mirror Groups’** (set up by MS)
- Stakeholders at national/regional level

**EU Mission NCPs** (set up by MS – EU funded)
- National Contact Points in every MS and AC
Performance Italia 2021-2023 (JA e CSA)

• Ottimi livelli di partecipazione
• Buoni risultati come coordinatori e partner (tra i primi paesi Europei)
• Numerose presenze in network
2024 Horizon Europe calls for CM

Objective: Six Horizon Europe calls to support Cancer Mission

• 2 Coordination and Support Action (CSA)
• 2 Research and Innovation Action (RIA)
• 2 Innovative Action (IA)

Publication: 18 Aprile 2024
Deadline: 18 Settembre 2024
2024 Horizon Europe call to support the EU Mission on Cancer

• HORIZON-MISS-2024-CANCER-01-01: Use cases for the UNCAN.eu research data platform (RIA)

• HORIZON-MISS-2024-CANCER-01-02: Support dialogue towards the development of national cancer data nodes (CSA)

• HORIZON-MISS-2024-CANCER-01-03: Accessible and affordable tests to advance early detection of heritable cancers in European regions (IA)

• HORIZON-MISS-2024-CANCER-01-04: Support a pragmatic clinical trial programme by cancer charities (CSA)

• HORIZON-MISS-2024-CANCER-01-05: Improving the understanding and management of late-effects in adolescents and young adults (AYA) with cancer (RIA)

• HORIZON-MISS-2024-CANCER-01-06: An information portal for the European Cancer Patient Digital Centre (IA)
Il budget complessivo è di € 118.999.999,69 ripartito nei seguenti topic:
HORIZON-MISS-2024-CANCER-01-01: € 30.000.000
HORIZON-MISS-2024-CANCER-01-02: € 2.999.999,90
HORIZON-MISS-2024-CANCER-01-03: € 34.999.999,95
HORIZON-MISS-2024-CANCER-01-04: € 2.999.999,90
HORIZON-MISS-2024-CANCER-01-05: € 35.999.999,98
HORIZON-MISS-2024-CANCER-01-06: € 11.999.999,96
HORIZON-MISS-2024-CANCER-01-01: Use cases for the UNCAN.eu research data platform

Submission: 18.09.2024; R&I action; EUR 30 M/proposal; 70 pages; networking & project cluster

Scope:

• **Develop the UNCAN.eu platform** by integrating and, where relevant, complementing existing (or planned) data nodes of European research infrastructures and/or other national infrastructures linking cancer data holders (e.g. hospitals, research centres, comprehensive cancer centres, etc.).

• Provide open-source **tools, services and workflows to researchers** across data nodes for access and efficiently use cancer datasets for research. Capitalise on EOSC4cancer's achievements, integrating and expanding as appropriate the available tools and solutions.

• Design and implement a **rich and diverse portfolio of use-cases** to inform, steer the development and demonstrate the validity of the UNCAN.eu platform. Use cases should focus on ambitious research questions that are in line with the Cancer Mission objectives.

• At the same time, use-cases should be functional to the design and implementation of UNCAN.eu to **increase the diversity of digital tools and services available for cancer researchers**. The mobilisation and integration of a large amount of different data and a balanced participation of clinicians, disease experts and data scientists will be essential to achieve the objectives. Emphasis to FAIR data (findable, accessible, interoperable, reuse) should be given.
HORIZON-MISS-2024-CANCER-01-01: Use cases for the UNCAN.eu research data platform (2)

- Develop innovative approaches, to integrate and analyse **heterogeneous data from multiple sources and different research domains**. In this regard, at least one use-case should integrate imaging, digital pathology and genomic data, using and/or contributing with new data sources to the Genomics Data Infrastructure (GDI) and Cancer Image Europe. Over the project lifetime, new data sources that might become available at a later stage can be accommodated as well as allowing additional data holders to join the UNCAN.eu platform.

- Establish **appropriate links with relevant EU-funded initiatives** (e.g. EHDS and others) and with the successful proposal resulting from the topic HORIZON-MISS-2024-CANCER-01-02

**Expected outcome:**

- The UNCAN.eu platform is developed by federating a network of cancer data nodes built on European and national computing infrastructures that link different cancer data holders across European countries.
- Use-cases focusing on the understanding of cancer initiation and progression are designed and implemented by multidisciplinary teams to develop tools and services for working with FAIR data.
- Researchers and clinicians use the electronic resources provided by the UNCAN.eu platform to access, manage and analyse data of heterogeneous types and belonging to different research domains at an unprecedented scale.
HORIZON-MISS-2023-CANCER-01-02: Support dialogue towards the development of national cancer data nodes

Submission: 18.09.2024; CSA; EUR 3 M/proposal; networking & project cluster

Scope:

• Foster the development of national cancer data nodes through policy dialogues at national level with relevant actors in the research and innovation community, digital health and public health policy.

• Identify and build synergies between European infrastructures related to health data access and health data sharing for primary and secondary data uses (e.g. MyData@eu, HealthData@eu, ELIXIR, BBMRI, and others)

• Identify challenges and barriers to the effective future implementation of the UNCAN.eu and the ECPDC platforms at national and European levels and propose operational solutions to overcome them.

• Identify population subgroups with poor digital skills and geographical areas with limited digital resources that might prevent the use of those platforms and propose solutions to reduce the digital divide.

Expected outcome:

• Advance the process of establishing National cancer data nodes

• Way forward to overcome potential barriers that may prevent the effective implementation of UNCAN.eu and ECPDC digital platforms
HORIZON-MISS-2024-CANCER-01-03: Accessible and affordable tests to advance early detection of heritable cancers in European regions

Submission: 18.09.2024; EUR 10-12 M/proposal; Innovation action (TRL 5-7); written commitment from regions; evaluation portfolio approach; synergies; networking & project cluster

Scope:

- Validate easy-to-use, affordable and accessible genetic, multi-omics or other biomarker-based cancer tests for early detection of cancers with an underlying [heritable genetic risk](#) for [uptake in regional or national healthcare systems](#). Validation may include for example clinical studies, socio-economic or technological feasibility studies.

- Stratify the to-be-tested population by sex, gender, age or other determinants.

- Be compliant with GDPR and take into account socio-economic status, limited health literacy, limited awareness of disease symptoms and access for people in remote and rural areas.

- Tests can be based on, for example, polygenic cancer risk scores, algorithms, machine learning, biomarkers, cell lines, organoids, liquid biopsies, medical devices, or wearables and other digital applications.

- Co-create with **end-users** - including citizens and health professionals, such as psychologists, living in the targeted regions - aspects such as the innovation life cycle, priority definition, design, development, testing and piloting stages as well as risk assessment, counselling, health education, and acceptability.

- Extensively pilot and upscale genetic, multi-omics or other biomarker-based testing or use in early detection programmes in at least three regions across at least three different Member States or Associated Countries. One of the three targeted regions should be within the following Member States: **Bulgaria, Croatia, Cyprus, Czech Republic, Estonia, Greece, Hungary, Latvia, Lithuania, Malta, Poland, Portugal, Romania, Slovakia or Slovenia**.

- Preferably work together with one of the **EIT-Health KIC networks** to establish appropriate contacts, and support relevant entrepreneurship, education, training, capacity building or innovation aspects for interested stakeholders in the targeted regions.
HORIZON-MISS-2024-CANCER-01-03: Accessible and affordable tests to advance early detection of heritable cancers in European regions (2)

Expected outcome:

• People and their families at heritable genetic risk of developing cancer, will benefit from the outcomes of evidence-based, tailored, affordable and accessible early detection, based on accessible and affordable tests;

• Civil society, foundations, and innovators will seize opportunities to respectively co-create, support or commercialise early detection programmes based on genetic, multi-omics or other biomarker-based tests.

• Regional and national policymakers and authorities in Member States and Associated Countries will engage in piloting, scaling up or implementing suitable early detection and treatment of people and their families with underlying heritable genetic risk in European regions based on genetic, multi-omics or other biomarker-based accessible and affordable tests, including legislative policies.
HORIZON-MISS-2024-CANCER-01-04: Support a pragmatic clinical trial programme by cancer charities

Submission: 18.09.2024; EUR 3 M/proposal; CSA; networking & project cluster

Scope:

• Together, registered cancer charities and foundations across Europe, organise, fund and implement at least two transnational calls for proposals, resulting in grants to academic investigator-led third parties to conduct randomised multi-centre pragmatic clinical trials.

• Organise annual networking activities between charities, the successful academic investigators, citizen representatives and stakeholders across Member States and Associated Countries across Europe.

• The chosen intervention(s) should be adapted to the particular needs of the target population and to the specificities of the provision of care at local, regional, or national level, duly reflecting the diversity across Member States and Associated Countries.

• The chosen intervention(s) should take into account socio-economic and biological stratification. All data should be disaggregated by sex, gender, age and other relevant variables, such as by measures of socio-economic status.

• The successful grants to third parties will address interventions for patients with cancers with a 5-year overall survival of less than 50% from time of diagnosis or rare cancers, at any stage of the disease, for any cancer subtype, in any age group or part of society.

Expected outcome:

• Together, a network of registered cancer charities and foundations support multi-centre, transnational pragmatic clinical trials on cancers with a 5-year overall survival less than 50% from time of diagnosis or rare cancers using their own resources.

• Cancer patients and their caregivers have access to more effective and patient-centred, treatment and care solutions.

• Researchers, innovators, and professionals from different disciplines and sectors ensure accessibility and re-usability of relevant trial data, to support the UNCAN.eu research data platform, which is currently in preparation.

• National healthcare providers, policymakers and authorities in European regions, Member States and Associated Countries have the evidence to implement affordable and accessible treatment and care solutions in their healthcare systems.
HORIZON-MISS-2024-CANCER-01-05: Improving the understanding and management of late-effects in adolescents and young adults (AYA) with cancer

Submission: 18.09.2024; EUR 4-6 M/proposal; R&I action; networking & project cluster

- **Scope:** AYA cancer patients (age range 15-39) too often experience late-effects due to treatment (e.g. chronic pain and fatigue, cardiovascular disease, organ and skin alterations, fertility problems, mental health issues etc). Proposals should focus on one or more cancer types and address one of the following interventions:
  - Building on data from existing or newly established AYA patient cohorts, obtain a thorough assessment by cancer type of the prevalence, specific effect(s), severity, time of onset, relative risk, and risk factors associated to late effects in AYA cancer patients.
  - Develop, test and scale-up evidence-based screening methods for early detection of late-effects in AYA cancer patients;
  - Develop, test and scale up in real-life settings, innovative, holistic approaches and tools (including digital tools), optimising cancer treatment and follow-up regimens to prevent, reduce and/or effectively manage late-effects, including psycho-social aspects.

- **Expected outcome:** Proposals under this topic should aim to deliver results that are directed and tailored towards and contribute to the following expected outcomes:
  - Increased awareness and understanding of the incidence, severity, and impact of late effects in AYA cancer survivors;
  - Development of effective interventions to support AYA patients and survivors in preventing, reducing and managing late-effects;
  - Improved quality of life and long-term outcomes for AYA cancer survivors.
HORIZON-MISS-2024-CANCER-01-06: An information portal for the European Cancer Patient Digital Centre

Submission: 18.09.2024; Innovation action; EUR 12 M/proposal

Scope:

• **Design, develop and deploy, a pilot ECPDC information portal** to complement the existing Knowledge Centre on Cancer (KCC).

• The knowledge base of the information portal will cover the cancer patient journey from diagnosis to life after cancer. It will **provide evidence-based information** on diagnosis, treatment options, rehabilitation, management of recurrence and palliative care.

• The selection of the information provided to the users should be based on **explicit and robust criteria and be transparent**.

• Provide a **validated workflow** for updating the knowledge base when new clinical information and scientific evidence arise. The development and implementation of human centric AI-based tools for this task is envisaged.

• Improve ECPDC portal user experience by implementing an **AI-based virtual assistant** to deliver information tailored to user cultural background, individual (clinical) circumstances, needs, preferences and/or expectations. This virtual assistant should be designed and tested in real-world patient populations for acceptability and value provided.
• All the developed **IT-solutions and workflows should be open source** and made available. The involvement of AI-researchers, clinicians, epidemiologists, guideline developers, service design specialists and patient organisation representatives are envisaged.

• The pilot ECPDC information portal should also **include other information** for cancer patients, survivors and their families (e.g. options to cross-border health care, participation to clinical research, psychosocial and legal support options, guidance and support for returning to study or to work, financial issues and survivors’ rights etc.)

• **Test and validate the pilot ECPDC information portal** by an appropriate number of cancer patients and survivors of different cancer types and age groups.

**Expected outcome:**
• The ECPDC information portal is an entry point to quality information for cancer patients, survivors, their families and caregivers, covering the cancer patient journey from diagnosis to treatment and post treatment care and life after cancer.

• The ECPDC information portal complements the Knowledge Centre on Cancer (KCC) by integrating additional trusted information on cancers beyond what is currently available in the KCC.

• The ECPDC information portal implements human-centric AI-based solutions to manage and systematically update the information provided to the users and to facilitate the user experience.
Le call del 2025

Siamo nella fase di preparazione delle call del 2025

Presentate prime proposte al CM Working Group meeting del 30 Aprile (molto discusse)

Ancora in versione molto preliminare (full draft by mid Luglio, approvate per fine 2024 e attivate dalla nuova Commissione nel 2025)

Possibilità di commentare e proporre modifiche (a livello pubblico **deadline 6 maggio**)
Le call del 2025: titoli provvisori

Qualità della vita attraverso la nutrizione

Investigator driven multicenter clinical trial in pazienti pediatrici

Innovative surgery in tumori cervello, polmone, fegato e metastasi ossee

Effetti esposizione ambientale come rischio di tumori pediatrici e sulla salute dei pazienti pediatrici «survivors»

Joint call con Cities Missions (ruolo walking e cycling su salute)
Enhancing the quality of life of cancer patients through nutrition

EU MISSIONS CšRER

Mission objective 4: Quality of life

Scope

Advanced cancer patients and their caregivers benefit from tailored nutritional care as part of their care intervention.

Validation of clinical trial's translational research is limited to supporting the clinical trial.

Expected outcome

- Patients have access to and benefit from tailored nutritional care as part of their care intervention.
- National authorities have the evidence to implement tailored nutritional care as part of care interventions.
- Phase III clinical trials: translational research is limited to supporting the clinical trial.

Confidential

Call 2025: un esempio
**INT’s participation in EU Programmes - research grants**

<table>
<thead>
<tr>
<th><strong>Mission on Cancer &amp; Beating Cancer Plan</strong></th>
<th><strong>Horizon Europe and other programmes (RIA &amp; IAs)</strong></th>
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| **INT COORDINATES:**  
  - EUonQoL - Quality of Life in Oncology: measuring what matters for cancer patients and survivors in Europe (MISS-2021-CANCER-02-02)  
  - JA JANE on Networks of Expertise in Cancer (2022-2024)  
  - JA JANE-2 - follow-up, from Q4 2024, again as EU Coordinator | **INT COORDINATES:**  
  - I3LUNG - AI-driven data platform for individualized lung cancer care with Immunotherapy (HLTH-2021-CARE)  
  - IDEA4RC - governance, sharing and re-use of health data for rare cancers (HLTH-2021-TOOL)  
Both in the EU cluster for “data-driven projects in cancer”  
- TETRIS - Risk assessment Tools for severe side Effects after breasT Radiotherapy (EURATOM)  
Additionally, INT is partner in 23 EU-funded research projects, of which:  
  - 5 still ongoing Horizon 2020 projects  
  - 4 Horizon Europe Health projects  
  - 2 EIC Pathfinder, 1 IHI, 4 EU4Health, several ERANETs, etc. |
| **INT IS PARTNER IN:**  
  - CCI4EU - Comprehensive Cancer Infrastructures (WP leader, Italian representative)  
  - ECHOS - National Mission Hubs (WP leader, Italian representative)  
  - 3 other Mission on Cancer projects  
  - Ongoing EU4HEALTH Joint Actions EUNetCCC, PreventNCD, TEHDAS, EUCanScreen | |

**32 Commission-funded or co-funded active grants**  
6 as Coordinator  
Total budget for INT - **37.2M€**
HORIZON-MISS-2022-CANCER-01-02: Strengthening research capacities of comprehensive cancer infrastructures

Closure: 07.09.2022; Indicative call budget: EUR 10 M; Project size: EUR 10 M; Coordination & Support Action

Scope:

- Offer an R&I-centred capacity-building programme to support existing and future comprehensive cancer infrastructures.
- Cooperation with the EU network of comprehensive cancer centres CRANE, being established through Europe’s Beating Cancer Plan. Participating countries will be provided with recommendations. Support and roadmap for implementation and transferable best practices will be identified.

Expected outcomes:

- Research and health policy makers will benefit from support to further develop or set up comprehensive cancer infrastructures, leading to improvement in research and access to care.
- Research and healthcare professionals will benefit from a better integration between research and care;
- Researchers will benefit from innovative infrastructures to perform research and participate in studies.
- Citizens, including patients and their caregivers will have access to screening, diagnostics and treatments, care pathways and integrated care. Participation in clinical trials will be facilitated.

Source: European Commission
From the call

The Mission Board of the EU Mission on Cancer has defined Comprehensive Cancer Infrastructures as ‘national or regional infrastructures that provide resources and services to support, improve and integrate cancer care, research, training of care professionals and education for cancer patients, survivors and families/carers.’

Today, the level of development of Comprehensive Cancer Infrastructures and their capacities, such as their digital, research and innovation-related capacities, vary considerably across Member States and Associated Countries, leading to inequalities, in particular in terms of research, quality and access to care.

The Horizon Europe Mission on Cancer will complement the set-up across Member States and several Associated Countries of an EU network of Comprehensive Cancer Centres that will be established through the Europe’s Beating Cancer Plan by 2025. The Mission aims to achieve the target of ensuring that 90% of eligible cancer patients have access to Comprehensive Cancer Infrastructures by 2030.
Three arguments

• The definition of comprehensiveness
  • From the demand (a place where patients will find what he/she needs)
  • From the offer (everything needed to satisfy the demand)

• The target (90%!)

• The variability in the European countries
Mapping of Comprehensive Cancer Infrastructures (CCIs)

Quick scan by EUHealthSupport to prepare the implementation of the Mission on Cancer, at the request of DG R&I in the context of the Single Framework Contract Chafea/2018/Health/03

Quick scan of existing networks in the EU

Aim:
- Identify existing (networks of) cancer infrastructures* in all EU Member States
- Not limited to recognised comprehensive cancer infrastructures
- Describe their activities/priorities, collaborations, quality standards/accreditation

* Operationalisation of cancer infrastructure → National or regional infrastructure that provides resources and services to support, improve and integrate cancer clinical care and scientific research

Summary

Quick scan not exhaustive, but a first impression!

- Number of reported cancer infrastructures (integrating cancer research and care) varies per country, as does their spread within countries.
- In almost all EU Member States at least one reported cancer infrastructure.
- Less internationally accredited CCIs in smaller countries and Eastern-Europe.
- In most countries the development of networks around CCIs is still patchy.

Approach

- Emails to Board and Assembly members (and others via ‘snowballing’ method) and contact OECI and partners of Joint Actions iPAAC/CanCon
- Data collection with short questionnaire (via EUSurvey tool)
- Descriptive data analysis and reporting
- Data collection from mid October until end December 2020

Source: European Commission
European initiative, implemented in all Member States, based on a capacity building programme (CBP), will help reduce inequalities, in the context of other actions ongoing, such as CRANE, JANE and UNCAN.

The CSA will implement the following steps:

- define CCI Maturity Model including quality indicators;
- profile the CCIs in each MS and a few ACs in terms of CCI presence and levels of maturity; design tailored CBP interventions, giving priority to MSs without any CCI;
- deliver online training courses open to teams in all MSs and ACs, implement targeted onsite interventions;
- scale up and sustain development; disseminate, exploit and report results.
EUonQoL project

Quality of Life in Oncology: measuring what matters for cancer patients and survivors in Europe

Is aimed at developing, validating and disseminating the European Oncology Quality of Life toolkit (EUonQoL-Kit) among European cancer patients and survivors.

This project received funding from the European Union Horizon Europe Research and Innovation Programme Grant Agreement N. 101096362
Project Data

- Duration: 1 Jan 2023 - 31 Dec 2026
- Funding: € 10,999,810,76
- Participants:
  - beneficiaries: 24
  - affiliated entities: 3
  - Cancer centres: 45
- Countries involved
  - Member states: 25
  - Associated countries: 6 + UK

www.euonqol.eu
<table>
<thead>
<tr>
<th>WP Title</th>
<th>Lead and co-lead Participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>WP1 Ethics requirements</td>
<td>INT</td>
</tr>
<tr>
<td>WP2 Involvement of stakeholders and patients</td>
<td>NIVEL/ECO</td>
</tr>
<tr>
<td>WP3 Review of existing HRQoL measures &amp; item libraries</td>
<td>EORTC/IMIM</td>
</tr>
<tr>
<td>WP4 Development of the EUonQoL-Kit</td>
<td>UNIVLEEDS/UMIL</td>
</tr>
<tr>
<td>WP5 Cross-cultural determinants of the QoL and linguistic and cultural adaptation of EUonQoL-Kit</td>
<td>IEO/SPOREDATA</td>
</tr>
<tr>
<td>WP6 Digital tools for data collection</td>
<td>DIGICORE/RH</td>
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<tr>
<td>WP7 EUonQoL-Kit Pilot Survey</td>
<td>INT/OECI</td>
</tr>
<tr>
<td>WP8 Implementation/Exploitation</td>
<td>OUS/UNICANCER</td>
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<tr>
<td>WP9 Dissemination/Communication</td>
<td>OECI/ECO</td>
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<tr>
<td>WP10 Project Management/Coordination</td>
<td>INT</td>
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<tr>
<td>Name</td>
<td>Institution</td>
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<tr>
<td>Giovanni Apolone</td>
<td>Istituto Nazionale dei tumori Milano</td>
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<tr>
<td>Paola Gabaldi</td>
<td>Fondazione Don Carlo Gnocchi Onlus</td>
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<tr>
<td>Carla Finocchiaro</td>
<td>Istituto Nazionale dei tumori Milano</td>
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</tbody>
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6th May 2024
Establishing of national cancer mission hubs and creation of network to support the Mission on Cancer, a National Cancer Mission Hub (NCMH) will:

Facilitate integration of the activities of the Mission on Cancer at national, regional, and local levels e.g., identifying synergies between European, national, regional and local policies and initiatives related to cancer;

Facilitate engagement of relevant actors and stakeholders at national, regional or local level going beyond the research and innovation and health systems to cover all relevant areas in cancer control and support policy dialogues on cancer (examples include employment, education, socio-economic aspects);

Support citizen engagement activities at national, regional and local levels, including new participatory formats.”

In the scope of the ECHoS project, which focuses on establishing Cancer Mission Hubs and promoting networks and synergies, Work Package 2 aims to design and create National Cancer Mission Hubs (NCMHs) and facilitate the exchange of knowledge.
Mapping of existing/newly established NCMHs in AC/MS

The objectives of the survey were to collect data for mapping the presence and maturity of NCMH structures in participating Member States/Associated Countries (MS/AC) as well as to collect expectations over such structures.

The questionnaire investigated three main possible scenarios:

i. Countries that have organisation/structure that could take the role of a National Cancer Mission Hub as described in ECHoS;

ii. Countries with no organisation/structure able to take the role of a National Cancer Mission Hub;

iii. Countries that have potential eligible organisation that could take the role of a National Cancer Mission Hub.

The data collection took place from July until September 2023, the whole consortium was involved including all the 57 beneficiaries, affiliated entities, and associated partners, representing 28 countries (Member States and Associated Countries).
Mapping of NCMH-like structures

28 countries participated in the questionnaire:
- 12 have a well-established organisation or structure capable of assuming the role of a NCMH;
- 10 countries don’t have a NCMH-like structure but have a potential candidate.
- 6 countries lack both an existing organisation/structure and a potential candidate.

<table>
<thead>
<tr>
<th>Yes</th>
<th>No, but there is a potential candidate (eligible organisation entity)</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Austria</td>
<td>Czech Republic</td>
<td>Croatia</td>
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<tr>
<td>Belgium</td>
<td>Finland</td>
<td>Cyprus</td>
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<tr>
<td>France</td>
<td>Italy</td>
<td>Estonia</td>
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<td>Germany</td>
<td>Latvia</td>
<td>Greece</td>
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<td>Hungary</td>
<td>Luxembourg</td>
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<td>Lithuania</td>
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<td>Norway</td>
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<td>Portugal</td>
<td>Sweden</td>
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<tr>
<td>Romania</td>
<td>The Netherlands</td>
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<tr>
<td>Spain</td>
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<tr>
<td>Türkiye</td>
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</tbody>
</table>
Pillars of concept model

- Governmental endorsement
- Operating at national level
- Organisational structure (Legal Organisation; Consortium; Coordinated National Action)
- Governmental Funding
- Activities (organising events; participating in and promoting research and development (R&D) and policy projects; publishing policy reports.)
- Financial and operational autonomy
- Dedicated Staff
## NCMH: all possible combinations in a continuum of 5 dimensions?

<table>
<thead>
<tr>
<th></th>
<th>NCMH: all possible combinations in a continuum of 5 dimensions?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Independent legal entity</td>
<td>Functional activities in the context of another legal entity</td>
</tr>
<tr>
<td>With high political endorsement (es. Ministry of health)</td>
<td>Without a political endorsement</td>
</tr>
<tr>
<td>With clear full autonomy</td>
<td>Lower level of autonomy</td>
</tr>
<tr>
<td>Entirely able to accomplish all the NCMH tasks</td>
<td>Some tasks are carried out by other entities (es. NCP)</td>
</tr>
<tr>
<td>National</td>
<td>Regional in networks</td>
</tr>
</tbody>
</table>
INT: qualche riflessione

• Notevole incremento della partecipazione a call EU negli ultimi 3 anni
  – Effetto Piano Strategico Ricerca
  – Presenza di un continuum della ricerca
  – Presenza in molti «tavoli» europei

• Aumento successo come partner e come coordinator
  – Massa critica e qualità ricercatori
  – Qualità e potenziamento Grant Office
  – Acquisizione società esterne di supporto

• Impatto (negativo) su uffici amministrativi INT
References

- **EU Mission on Cancer**
  - [Cancer Mission implementation (europa.eu)](#)
  - Horizon Europe rules apply (see information on participation of UK, CH, Associated and Third countries)
  - Please read the [Implementation Plan](#) before you apply:
  - [Commission Communication with Implementation plan](#) (29 September 2021)
  - [Horizon Europe mission work programme 2024](#) (published on 17 April)
  - Mission calls for proposals and partner search tool are accessible via the [Funding & Tenders Portal](#)
  - First, contact your [national contact point](#), then contact RTD-SANTE-CANCER-MISSION@ec.europa.eu

- **Horizon Europe Health Partnerships** and **Innovative Health Initiative**

- **Europe’s Beating Cancer Plan** and **EU4Health programme**

- **Digital Europe programme**

- **Euratom Research and Training Programme**

- **EIT-Health KIC**

- **Knowledge Centre on Cancer (KCC)**

- **HaDEA**