



Cancer Prevention in Women in the EU

Dr Wendy Yared, Director
Association of European Cancer Leagues (ECL)

Ministerial Conference
WOMEN'S HEALTH: A LIFE COURSE APPROACH
Rome, 2-3 October 2014



THE ASSOCIATION OF EUROPEAN CANCER LEAGUES

The Association of European Cancer Leagues (ECL) is a non-profit organisation. It is an alliance of national and regional cancer societies from the WHO European Region (EU-28 and others). Located in Brussels, ECL is a non-profit association of members and exists exclusively for cancer societies at the national and regional level. www.europeancancerleagues.org

- EU: Prevention and Health Promotion Work Package Leader Joint Action European Partnership for Action Against Cancer 2011-2014 www.epaac.eu
- EU: Associated Partner Cancer Control Dissemination Joint Action CanCon www.cancercontrol.eu
- EU: Founding member of European Forum on Alcohol and Health with commitment to provide information on Alcohol and Cancer
- EU: Member of the Diet, Physical Activity and Health Platform to provide information on Obesity and Cancer





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CAMPAGNA NASTRO ROSA
PER LA PREVENZIONE DEL TUMORE AL SENO
Sconfiggiamo il tumore al seno.
SIAMO PIU' FORTI INSIEME

THE ESTÉE LAUDER COMPANIES
BREAST
CANCER
AWARENESS
CAMPAIGN

cerca nel sito

cerca ▶

scegli la dimensione del carattere - A | A | A | A

Info Tumore

Trova tutte le informazioni

schede tumori ▼



Come aiutarci

La tua solidarietà

scegli cosa fare ▼



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La Newsletter

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Chi siamo

La LILT in Italia

La prevenzione dei tumori

SOS LILT

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Area informazione

Eventi

Ricerca e Formazione

Le guide LILT

Come aiutarci

Lega Italiana per la Lotta contro i Tumori

in Primo piano



Ottobre: mese rosa per la prevenzione del tumore al seno

Giunta alla XXII edizione, la Lega Italiana per la Lotta contro i Tumori ha aperto a Roma la Campagna Nastro Rosa 2014 di sensibilizzazione per la lotta ai tumori al seno, con un messaggio inviato dal Ministro della Salute on. Beatrice Lorenzin: "per il prezioso contributo che la LILT offre quotidianamente, in un campo così delicato e così drammaticamente rilevante, quale è quello dell'oncologia....

• **Siamo più forti insieme**

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» [tutti i primi piani](#)

▶ Inaugurato il nuovo centro poliambulatoriale della LILT a Bari

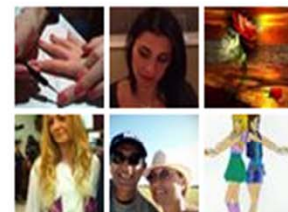
Trovaci su Facebook



LILT Nazionale

[Mi piace](#)

LILT Nazionale piace a 9.011 persone.



[Plug-in sociale di Facebook](#)

Ottobre 2014

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				01	02	03
04	05	06	07	08	09	10
11						



Political Support for Cancer Control: MEPs Against Cancer (MAC)

LED BY MEPS FOR MEPS TO RAISE AWARENESS ON CANCER AT EUROPEAN AND NATIONAL LEVELS

Presided by Mr Alojz Peterle MEP Former Prime Minister Slovenia, Secretariat provided by ECL

In the 2014 to 2019 legislature the strategic goal of the MEPs Against Cancer Group is:

- *To reduce cancer incidence by promoting prevention, reduce mortality by ensuring equitable access to high quality treatment and care, and ensure a good quality of life for cancer patients and survivors.*
- **A KEY AREA IS PREVENTION:** strengthen cancer prevention policies in Tobacco control, Alcohol, Skin Cancer Prevention, Nutrition/unhealthy diets and Physical Activity, environmental pollutants: air quality control and endocrine disruptors



THE FACTS

Cancer is the **2nd** most common cause of death in the European Union

Cancer responsible for **23% OF DEATHS IN WOMEN**

MOST COMMON cancer SITES in wider Europe 2012

female breast (464,000 cases)

colorectal (447,000)

prostate (417,000)

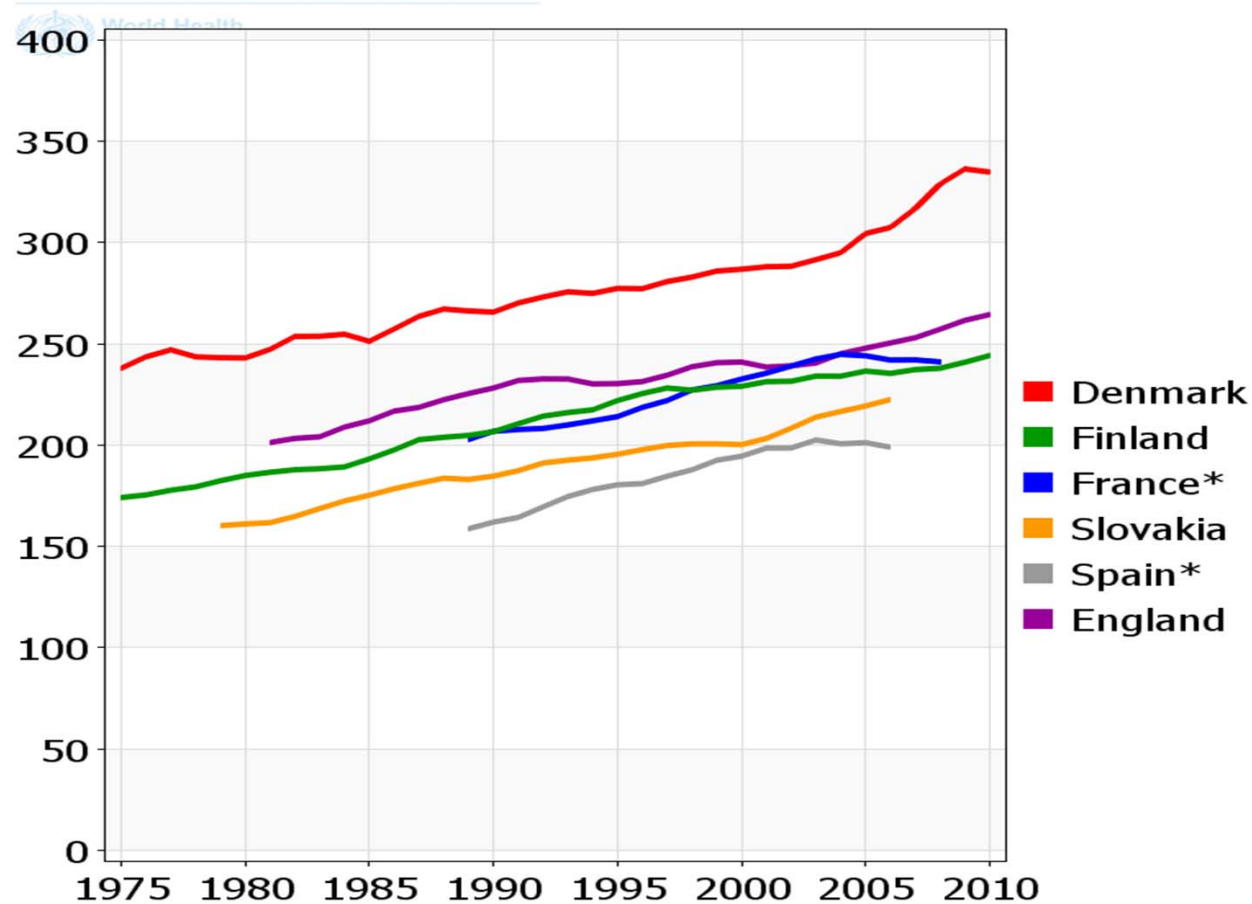
lung (410,000)

Sources: http://ec.europa.eu/health/major_chronic_diseases/diseases/cancer/index_en.htm,
International Agency for Research on Cancer, Ferlay et al 2013

THE FIGURES

Trends in incidence of cancer in selected countries: age-standardised rate (W) per 100,000, women

International Agency for Research on Cancer



Source: IARC Globocan

THE FIGURES

IN WOMEN

breast cancer most frequent (28.8% of total)

colorectal (205,000, 12.7%)

lung (119,000, 7.4%)

corpus uteri (99,000, 6.1%)

Source: *International Agency for Research on Cancer, Ferlay et al 2013*

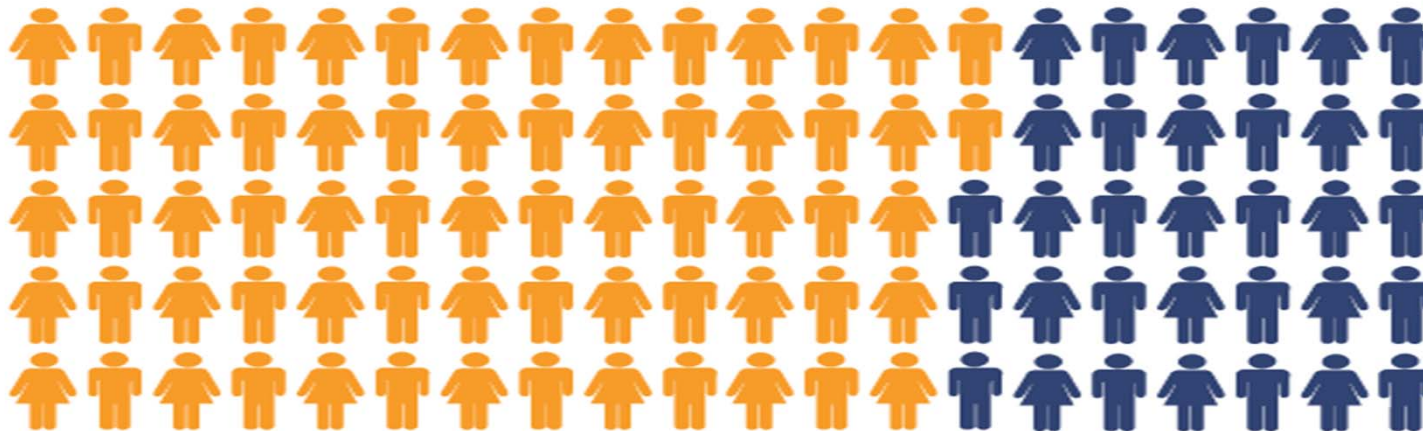
THE BIGGEST MYTH

“There’s nothing I can do to avoid getting cancer”

FALSE

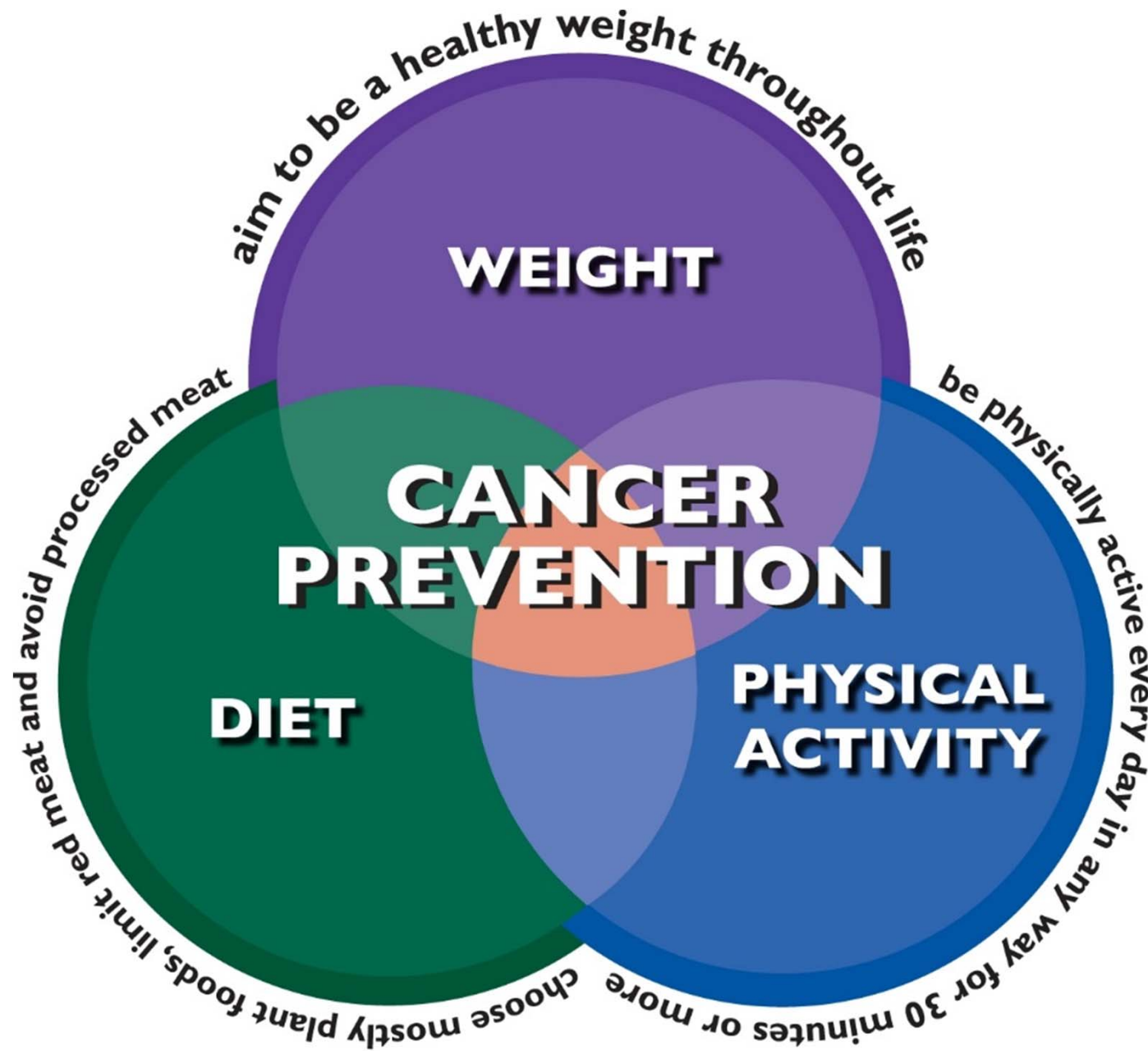
At least 33% of cancers can be prevented through adopting healthy lifestyles – World Health Organization, European Commission, American Institute for Cancer Research

TRUE



For every 100 people who get cancer
33 cases could be prevented through simple lifestyle changes

Graphic Source: AICR



Source: American Institute for Cancer Research

WCRF Recommendations for Cancer Prevention

Second Expert Report

Publication Date: November 2007

- 1. Be as lean as possible without becoming underweight.**
- 2. Be physically active for at least 30 minutes every day. Limit sedentary habits.**
- 3. Avoid sugary drinks. Limit consumption of energy-dense foods.**
- 4. Eat more of a variety of vegetables, fruits, whole grains and legumes such as beans.**
- 5. Limit consumption of red meats (such as beef, pork and lamb) and avoid processed meats.**
- 6. If consumed at all, limit alcoholic drinks to 2 for men and 1 for women a day.**
- 7. Limit consumption of salty foods and foods processed with salt (sodium).**
- 8. Don't use supplements to protect against cancer.**
- 9. * It is best for mothers to breastfeed exclusively for up to 6 months and then add other liquids and foods.**
- 10.* After treatment, cancer survivors should follow the recommendations for cancer prevention.**

***Special Population Recommendations**

Source: World Cancer Research Fund

EUROPEAN CODE AGAINST CANCER

3rd Revision (2003)

<http://www.cancercode.eu/>

Many aspects of general health can be improved, and certain cancers avoided, by adopting a healthier lifestyle

3RD REVISION CODE TO BE REPLACED BY NEW ONE IN OCTOBER 2014

1. Do not smoke; if you smoke, stop doing so. If you fail to stop, do not smoke in the presence of non-smokers
2. Avoid Obesity
3. Undertake some brisk, physical activity every day
4. Increase your daily intake and variety of vegetables and fruits: eat at least five servings daily. Limit your intake of foods containing fats from animal sources
5. If you drink alcohol, whether beer, wine or spirits, moderate your consumption to two drinks per day if you are a man and one drink per day if you are a woman
6. Care must be taken to avoid excessive sun exposure. It is specifically important to protect children and adolescents. For individuals who have a tendency to burn in the sun active protective measures must be taken throughout life

This study was supported by the Europe Against Cancer programme of the European Community

EUROPEAN CODE AGAINST CANCER

3rd Revision (2003)

www.cancercode.eu

3RD REVISION CODE TO BE REPLACED BY NEW ONE IN OCTOBER 2014

7. Apply strictly regulations aimed at preventing any exposure to known cancer causing substances. Follow all health and safety instructions on substances which may cause cancer. Follow advice of national radiation protection offices
8. Women from 25 years of age should participate in cervical screening. This should be within programmes with quality control procedures in compliance with European Guidelines for Quality Assurance in Cervical Screening
9. Women from 50 years of age should participate in breast screening. This should be within programmes with quality control procedures in compliance with European Union Guidelines for Quality Assurance in Mammography Screening
10. Men and women from 50 years of age should participate in colorectal screening. This should be within programmes with built-in quality assurance procedures
11. Participate in vaccination programmes against Hepatitis B Virus infection

This study was supported by the Europe Against Cancer programme of the European Community

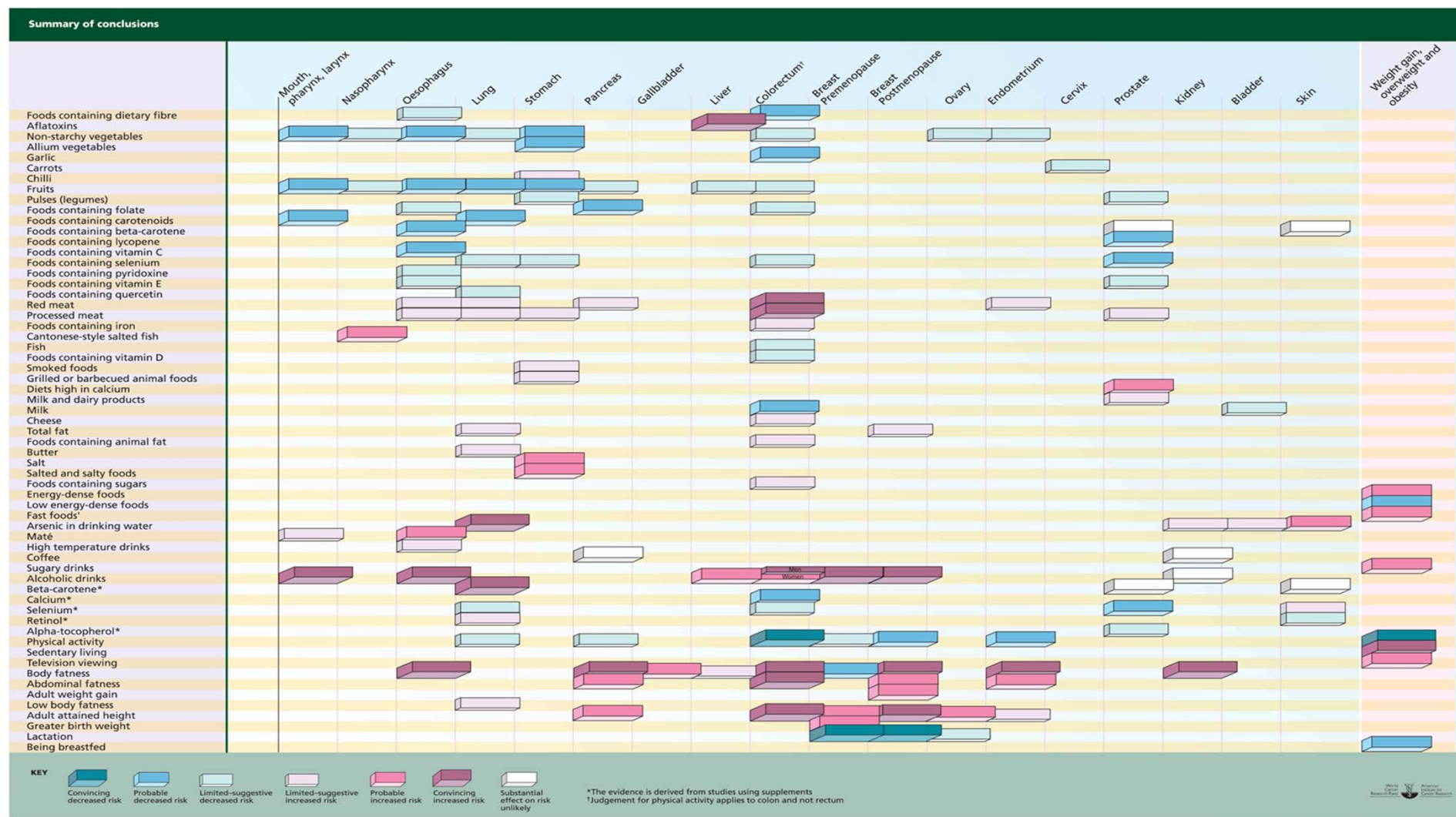
TOBACCO CONTROL

“Tobacco use is the single greatest **avoidable** risk factor for cancer mortality worldwide.” (WHO)

“Lung cancer retains its status as the leading cause of cancer death in Europe in 2012. The overwhelming majority of lung cancer is caused by tobacco smoking and tobacco control is clearly a number one priority in Europe, ...**increasingly targeted towards young women**” (IARC)

Tobacco smoking causes many types of cancer, including cancers of the **lung**, oesophagus, larynx (voice box), mouth, throat, kidney, bladder, pancreas, stomach and **cervix**.
(WHO)

World Cancer Research Fund: "factors associated with diet, physical activity and body weight were found to be strongly associated (ie, evidence for the link was judged either "convincing" or "probable") to cancer risk.



Source: World Cancer Research Fund/ American Institute for Cancer Research's Continuous Update Project (CUP)

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Foods containing dietary fibre	Foods containing sugars
Aflatoxins	Energy-dense foods
Non-starchy vegetables	Low energy-dense foods
Allium vegetables	Fast foods'
Garlic	Arsenic in drinking water
Carrots	Maté
Chilli	High temperature drinks
Fruits	Coffee
Pulses (legumes)	Sugary drinks
Foods containing folate	Alcoholic drinks
Foods containing carotenoids	Beta-carotene*
Foods containing beta-carotene	Calcium*
Foods containing lycopene	Selenium*
Foods containing vitamin C	Retinol*
Foods containing selenium	Alpha-tocopherol*
Foods containing pyridoxine	Physical activity
Foods containing vitamin E	Sedentary living
Foods containing quercetin	Television viewing
Red meat	Body fatness
Processed meat	Abdominal fatness
Foods containing iron	Adult weight gain
Cantonese-style salted fish	Low body fatness
	Adult attained height
	Greater birth weight
	Lactation
	Being breastfed

Source: World Cancer Research Fund/ American Institute for Cancer Research's Continuous Update Project (CUP)

SPECIFIC RISK FACTORS

Breast Cancer

Excess body weight and physical inactivity account for approximately 25–33% of breast cancer cases

Alcohol consumption Light drinkers, up to one alcoholic drink per day (which corresponds to 12 grams or 15 ml of pure alcohol) have a 5% higher breast cancer risk

Contraceptives, Menopausal Therapies long-term combined estrogen-progestogen menopausal therapy causes cancers of the breast (IARC), women taking oral contraceptives have a 15-25% higher risk of breast cancer compared with women who have never used oral contraceptives. This risk levels off 10 or more years after stopping oral contraceptive use

Source: EuropaDonna

FOOD, NUTRITION, PHYSICAL ACTIVITY AND BREAST CANCER (PREMENOPAUSE) 2010

	DECREASES RISK	INCREASES RISK
Convincing	Lactation	Alcoholic drinks
Probable	Body fatness	Adult attained height ¹ Greater birth weight
Limited - suggestive	Physical activity ²	
Limited - no conclusion	Dietary fibre; vegetables and fruits; soya and soya products; meat; fish; milk and dairy products; total fat; folate; vitamin D; calcium; glycaemic index; dietary patterns; adult weight gain; abdominal fatness	
Substantial effect on risk unlikely	None identified	

1 Adult attained height is unlikely directly to modify the risk of cancer. It is a marker for genetic, environmental, hormonal, and also nutritional factors affecting growth during the period from preconception to completion of linear growth (see chapter 6.2.13 – Second Expert Report).

2 Physical activity of all types: occupational, household, transport and recreational.

Source: World Cancer Research Fund/ American Institute for Cancer Research's Continuous Update Project (CUP)

FOOD, NUTRITION, PHYSICAL ACTIVITY AND BREAST CANCER (POSTMENOPAUSE) 2010

	DECREASES RISK	INCREASES RISK
Convincing	Lactation	Alcoholic drinks Body fatness Adult attained height ¹
Probable	Physical activity ²	Abdominal fatness Adult weight gain
Limited - suggestive		Total fat
Limited - no conclusion	Dietary fibre; vegetables and fruits; soya and soya products; meat; fish; milk and dairy products; folate; vitamin D; calcium; selenium; glycaemic index; dietary patterns; birth weight; energy intake	
Substantial effect on risk unlikely	None identified	

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Source: World Cancer Research Fund/ American Institute for Cancer Research's Continuous Update Project (CUP)

Colorectal cancer Risk Links to **Diet, Activity and Weight**

Red and processed meat increase **colorectal cancer** risk

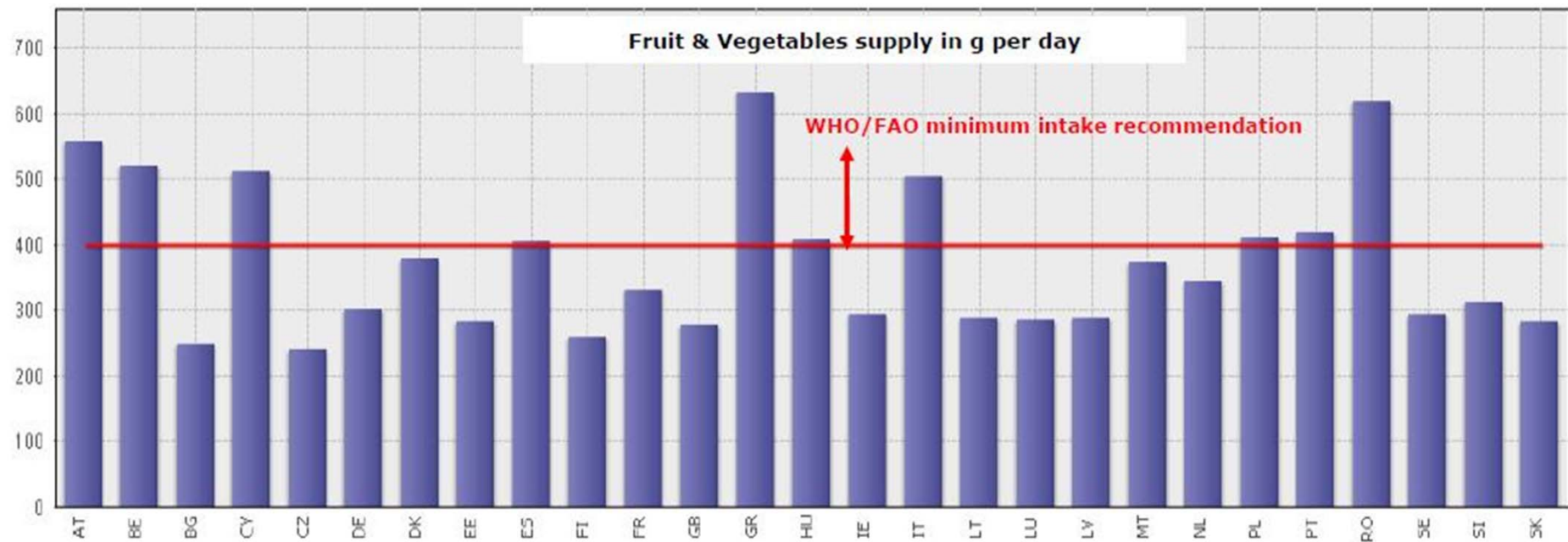
Convincing and probable conclusions from the **Continuous Update Project report on colorectal cancer***

FOOD, NUTRITION, PHYSICAL ACTIVITY, AND CANCERS OF THE COLON AND THE RECTUM		
	DECREASES RISK	INCREASES RISK
Convincing	Physical activity ^{1 2} Foods containing dietary fibre ³	Red meat ⁴ Processed meat ⁵ Alcoholic drinks (men) ⁶ Body fatness Abdominal fatness Adult attained height ⁷
Probable	Garlic Milk ⁸ Calcium ⁹	Alcoholic drinks (women) ⁶

Source: World Cancer Research Fund/ American Institute for Cancer Research's Continuous Update Project (CUP)

DIET

Many Countries Not Meeting Minimum Intake of Fruit and Vegetables

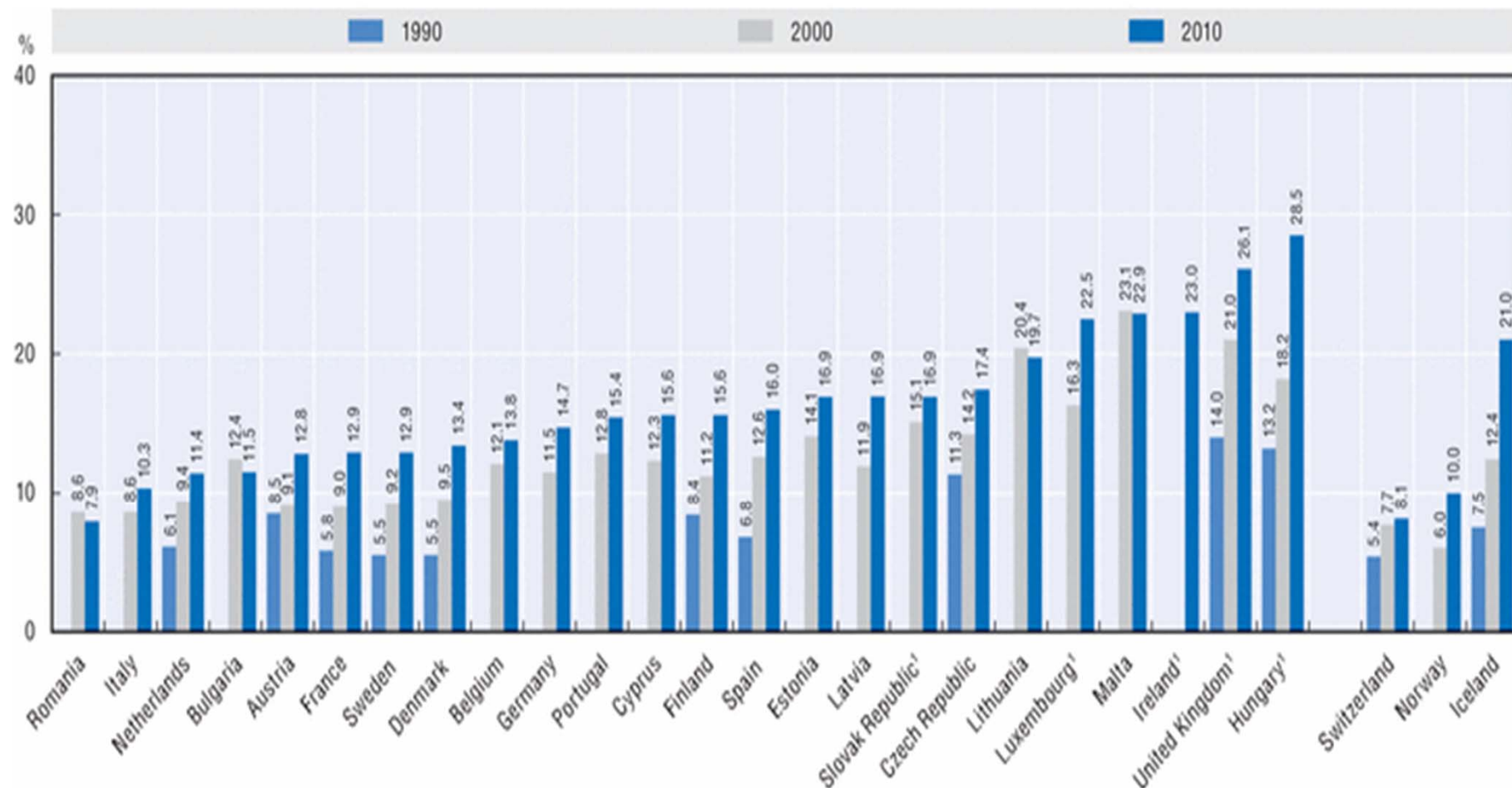


Source: http://www.enjoyfresh.eu/img/content/FV_Consumption_2011.JPG

WEIGHT

We Have An Obesity Epidemic

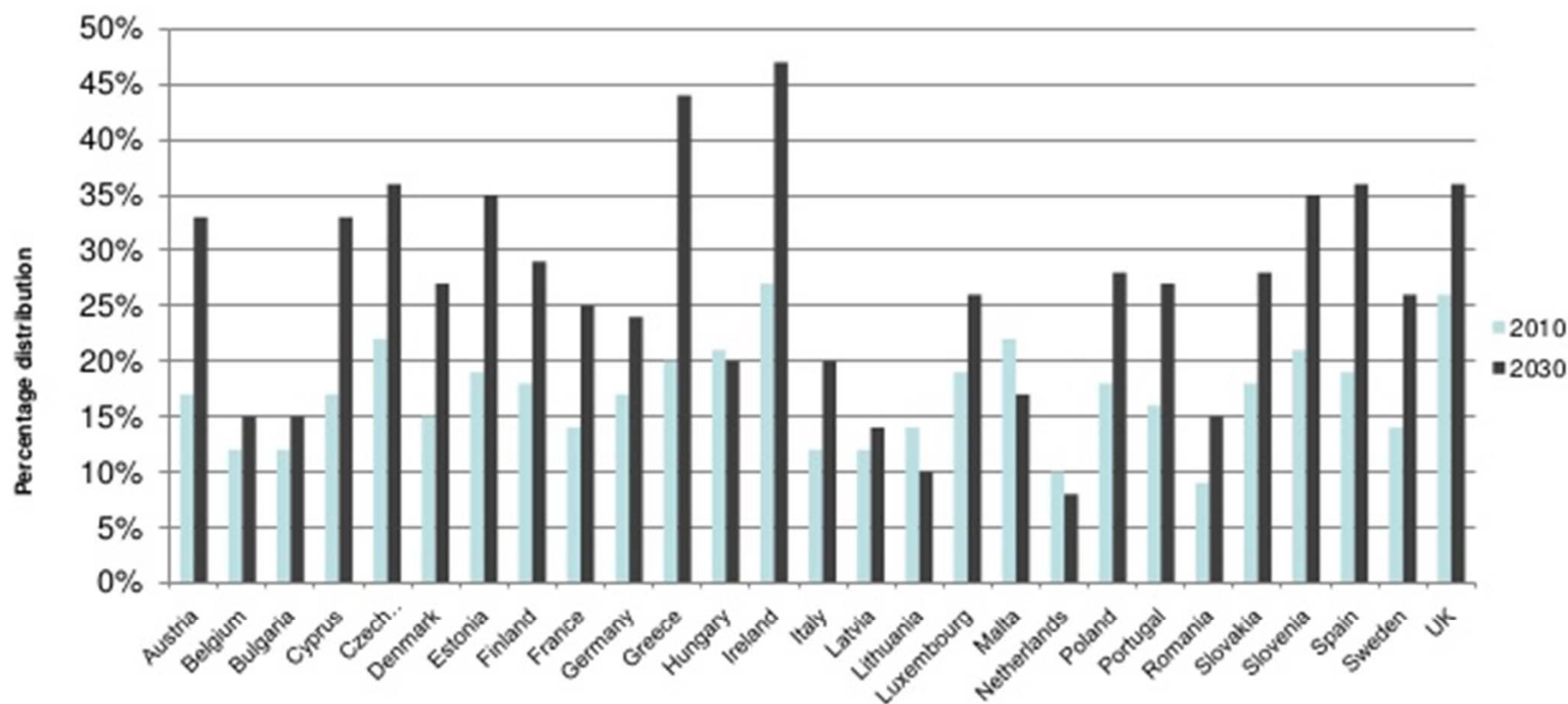
Figure 2.7.2 Increasing obesity rates among adults in European countries, 1990, 2000 and 2010 (or nearest years)



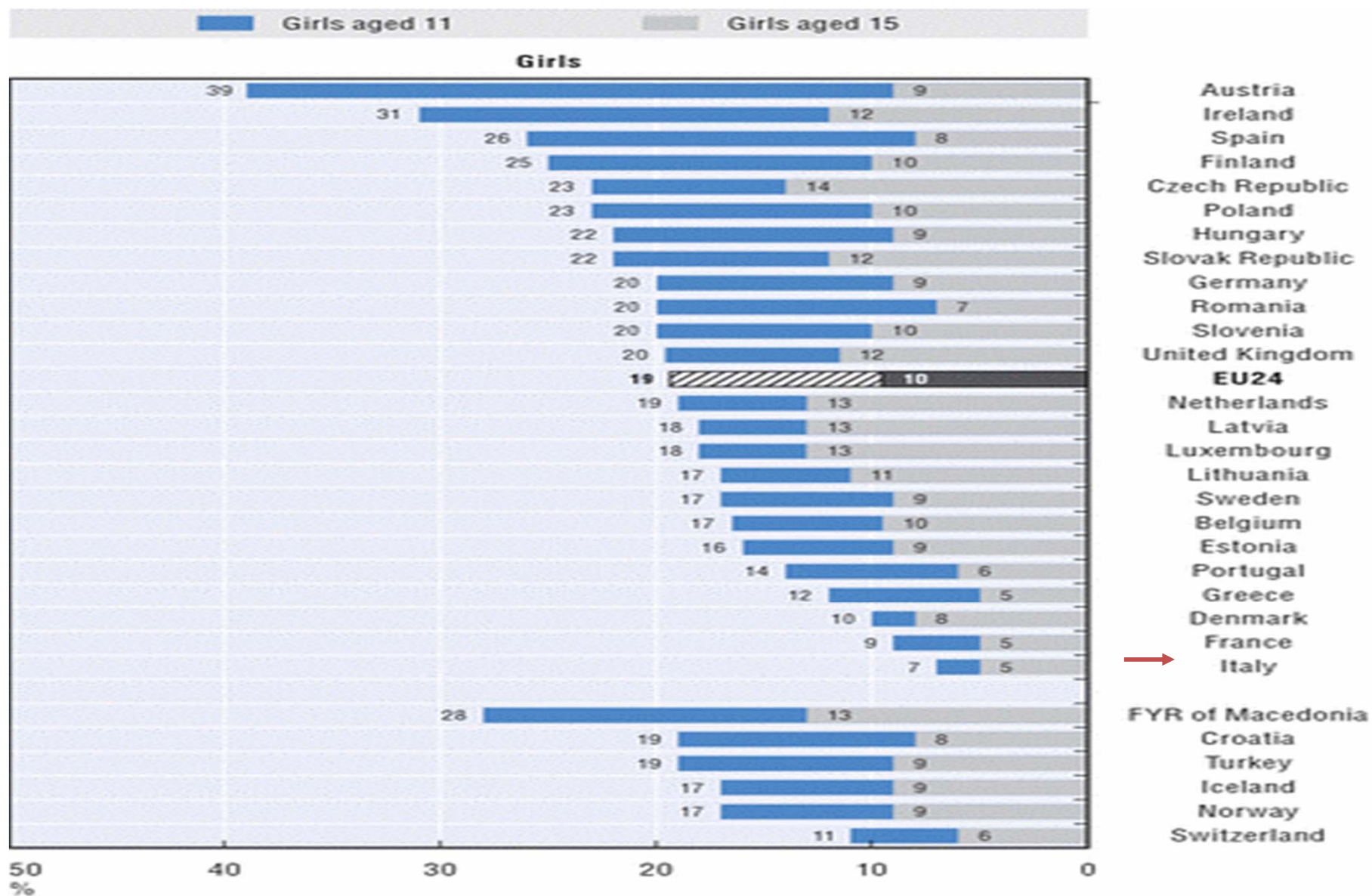
Source: OECD [Health at a Glance: Europe 2012](#)

Projected obesity for 2030

WHO Modelling obesity Project 2013 together with UK Health Forum – NOPA II



Daily moderate-to-vigorous physical activity, 11- and 15-year-olds, 2009-10



Source: OECD Health at a Glance 2012

LACK OF PHYSICAL ACTIVITY



LACK OF PHYSICAL ACTIVITY



SUPPORTING CANCER PREVENTION

Disseminate and Implement the new European Code Against Cancer

- Evidence-based, easy to understand advice
- New (4th) Revision to be launched in next few weeks
- Developed by International Agency for Research on Cancer, financially supported by the European Commission

Increase national budgets for prevention!!

- Explore policies that work or might work for common risk factors e.g., comprehensive tobacco control, tighter regulations on food advertising, nutrition labelling, food and beverage taxes?! (controversial)



**REMEMBER: AT LEAST 33% OF CANCERS CAN BE
PREVENTED THROUGH HEALTHIER LIFESTYLES**

THANK YOU

www.europeancancerleagues.org
www.weekagainstcancer.eu
www.cancercode.eu