

EUROPEAN INITIATIVES ON GASTRIC CANCER PREVENTION – **GISTAR, EUROHELICAN, TOGAS, EUCANSCREEN**

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COUNCIL



COUNCIL RECOMMENDATION

of 9 December 2022

on strengthening prevention through early detection: A new EU approach on cancer screening
replacing Council Recommendation 2003/878/EC

(2022/C 473/01)



Brussels, 20.9.2022
COM(2022) 474 final

ANNEX

ANNEX

to the

Proposal for a Council Recommendation

on strengthening prevention through early detection: A new EU approach on cancer
screening
replacing Council Recommendation 2003/878/EC

{SWD(2022) 296 final}

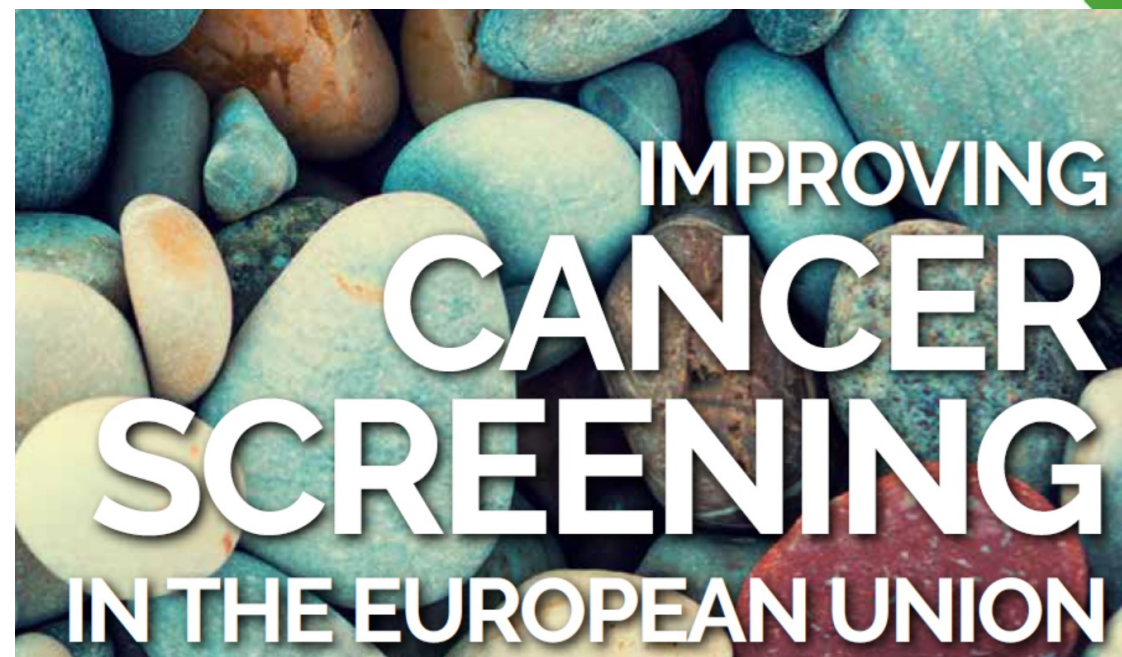
<https://eur-lex.europa.eu/legal-content/EN/ALL/?uri=COM:2022:474:FIN>

*Scientific Advice
Mechanism (SAM)*

Cancer screening in the European Union

*Group of Chief Scientific Advisors
Scientific Opinion No.12, March 2022*

Independent
Expert
Report



SAP_{EA}

Science Advice for Policy by European Academies

Evidence Review Report No. 10



EUROPEAN COUNCIL RECOMMENDATION, 2022



BREAST CANCER
suggesting a lower age limit of 45 and a higher age limit of 74 (standard 50 – 69), plus MRI scans when medically appropriate



HPV testing for women aged 30 to 65, every 5 years or more, to detect **CERVICAL CANCER**, taking account of HPV vaccination status



Triage testing for **COLORECTAL CANCER** in people aged 50 – 74 through faecal immunochemical testing (FIT) to determine follow-up via endoscopy/colonoscopy



LUNG CANCER
testing for individuals at high risk (i.e. smokers), incl. prevention approaches



Prostate specific antigen testing for **PROSTATE CANCER** in men, plus MRI scans for follow-up



In places with high **GASTRIC CANCER** incidence and death rates, screening for *Helicobacter pylori* and surveillance of precancerous stomach lesions



RECOMMENDATION ON GASTRIC CANCER SCREENING

Screening for *Helicobacter pylori* should be considered in those countries or regions inside countries with high gastric cancer incidence and death rates, according to thresholds to be defined in European guidelines with quality assurance. Screening should also address strategies for identification and surveillance of patients with **precancerous stomach lesions** unrelated to *Helicobacter pylori* infections. Considering the evidence for screening and the need for a stepwise approach, countries should begin to test the feasibility of this programme, including by using implementation studies.



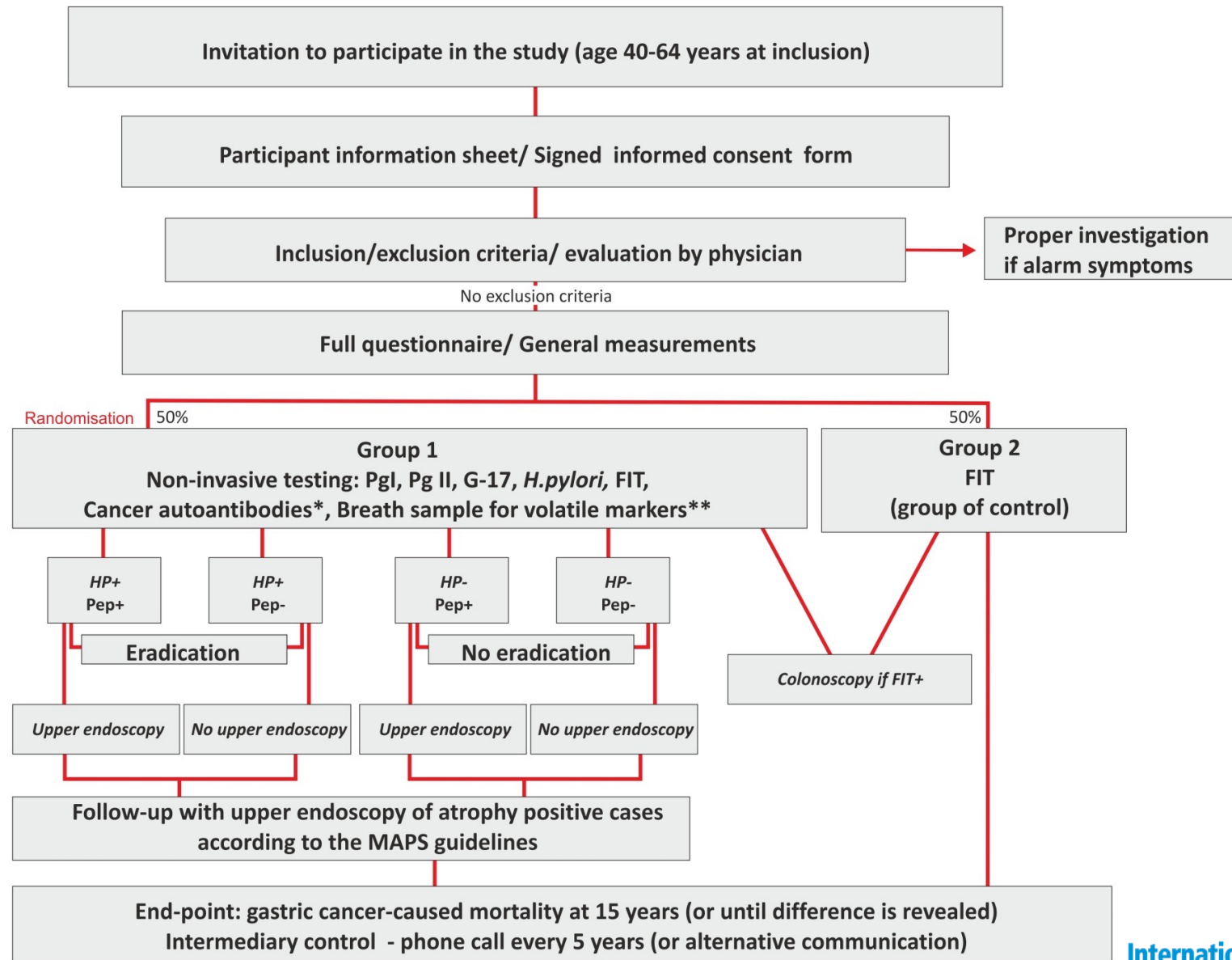
ONGOING ACTIVITIES IN EUROPE

GISTAR

EUROHELICAN

TOGAS

EUCanScreen



* All patients with positive gastric cancer-related autoantibodies will be referred for upper endoscopy
 ** Based on volatile marker test results referral for upper endoscopy will be done only if specific panel characteristic for gastric cancer will be revealed





GISTAR RECRUITMENT SITES IN LATVIA





CURRENT STATUS OF GISTAR

Recruitment started – October, 2013

11,223 subjects enrolled in 11 sites

Ongoing follow-up (Eurohelican & TOGAS)

PIs: M.Leja and R.Herrero / J. Young Park



TOWARDS GASTRIC CANCER SCREENING
IMPLEMENTATION IN THE EUROPEAN UNION

EU₄Health Programme (EU₄H)

TOWARDS GASTRIC CANCER SCREENING IMPLEMENTATION IN THE EUROPEAN UNION



TOWARDS GASTRIC CANCER SCREENING
IMPLEMENTATION IN THE EUROPEAN UNION

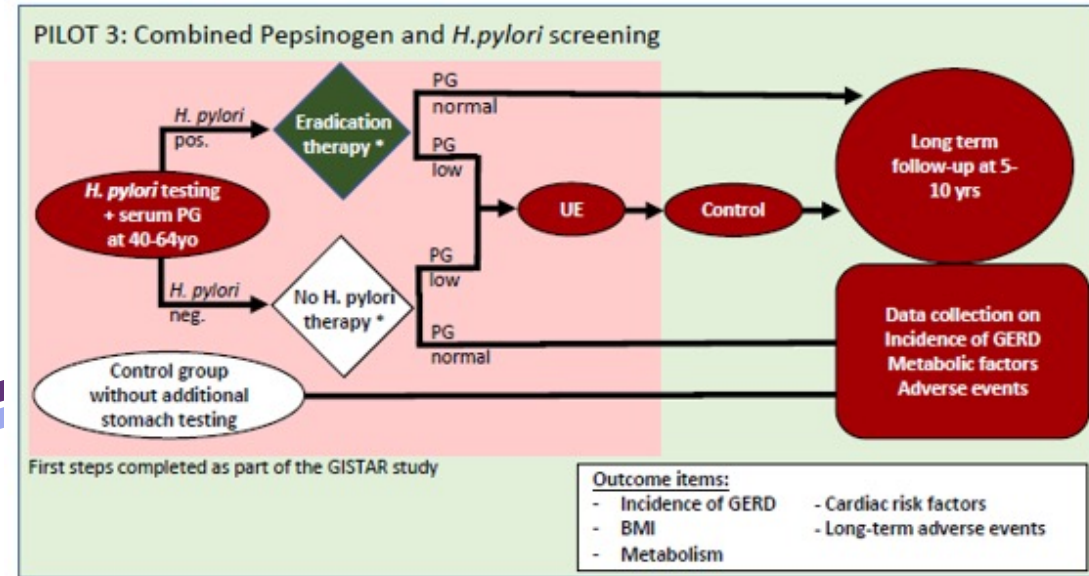
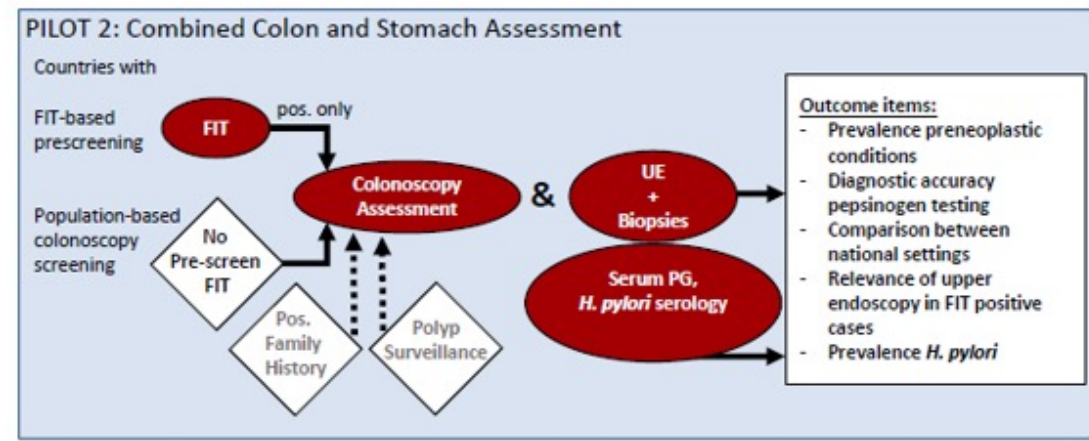
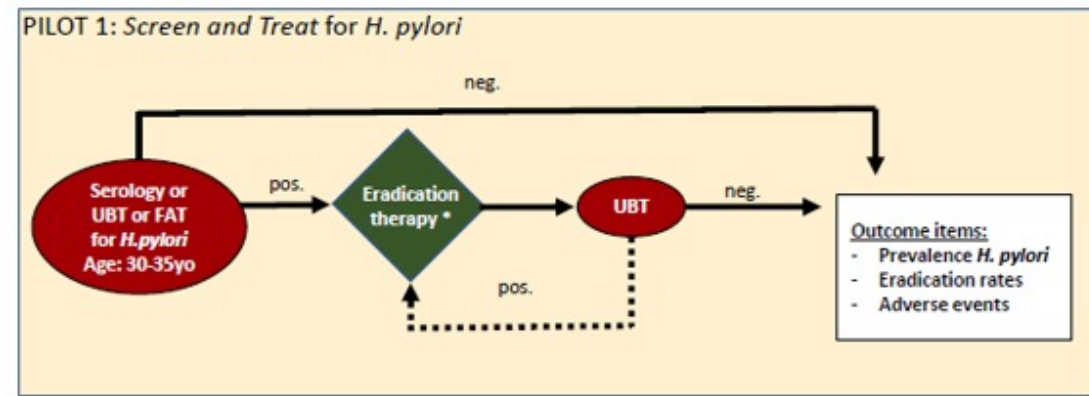


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TOGAS partner countries



3 studies



TOGAS Pilot Study 1: Implementation research of *Screen and treat* strategy in young-age individuals

- Age group: 30-35 years
- 6,800 subjects to be recruited
- Countries to contribute
 - Slovenia
 - Croatia
 - Romania
 - Poland
 - Ireland
 - Latvia



TOWARDS GASTRIC CANCER SCREENING
IMPLEMENTATION IN THE EUROPEAN UNION



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TOGAS Pilot Study 2: Endoscopic Screening

- Screening for gastric cancer and for conditions indicating an increased risk for gastric cancer in different European countries
- Age group: 50-74 years
- Observational diagnostic study
- 1,800 subjects to be recruited in 7 centres
- Study population: subjects presenting for colorectal cancer / polyp screening or surveillance



TOWARDS GASTRIC CANCER SCREENING
IMPLEMENTATION IN THE EUROPEAN UNION



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UNIVERSITY OF LATVIA
INSTITUTE OF CLINICAL
AND PREVENTIVE
MEDICINE



Perceptions And Attitudes Of Medical Professionals Towards Gastric Cancer Screening

Dear Medical Professional,

The updated European Council Recommendation on cancer screening has suggested several new cancers to be included in general screening programs, gastric cancer being among them. The **TOGAS project** (*Towards gastric cancer implementation in the European Union*) will generate the missing evidence and contribute to gastric cancer screening implementation in Europe.

The effectiveness of cancer prevention activities depends on the willingness and motivation of medical professionals, like you. Hence, your feedback is of utmost importance.

<https://latvia.questionpro.com/t/AX1qaZyKoz>



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EUROHELICAN

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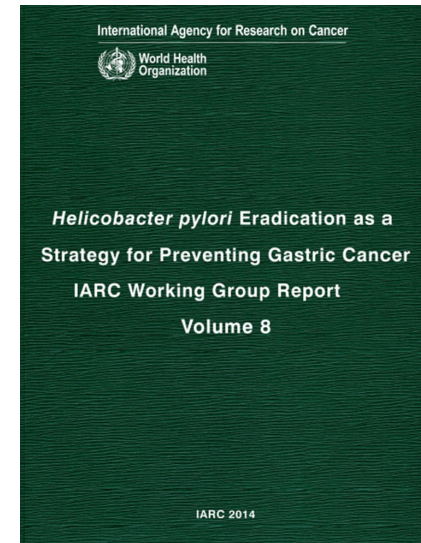


EUROHELICAN – Accelerating gastric cancer reduction in Europe through *Helicobacter pylori* eradication

Additional contribution to TOGAS Pilot 1 & Pilot 3

Expert-group recommendations on *H.pylori* eradication for primary prevention of gastric cancer

International Agency for Research on Cancer



EUROPEAN JOINT ACTION EUCANSCREEN



Joint European effort to address all the aspects related to cancer screening

97 partners

29 partnering countries (25 EU Member States)

Launched June 1, 2024



Co-funded by
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GASTRIC CANCER PREVENTION WITHIN EUCANSCREEN

Multiple general cancer screening aspects relevant to gastric cancer prevention

Emphasis to data harmonization and standardization as well as personalized screening

Pilot study to be run by combining colorectal cancer screening (by faecal immunochemical test – FIT) to *H.pylori* screening (by faecal antigen).

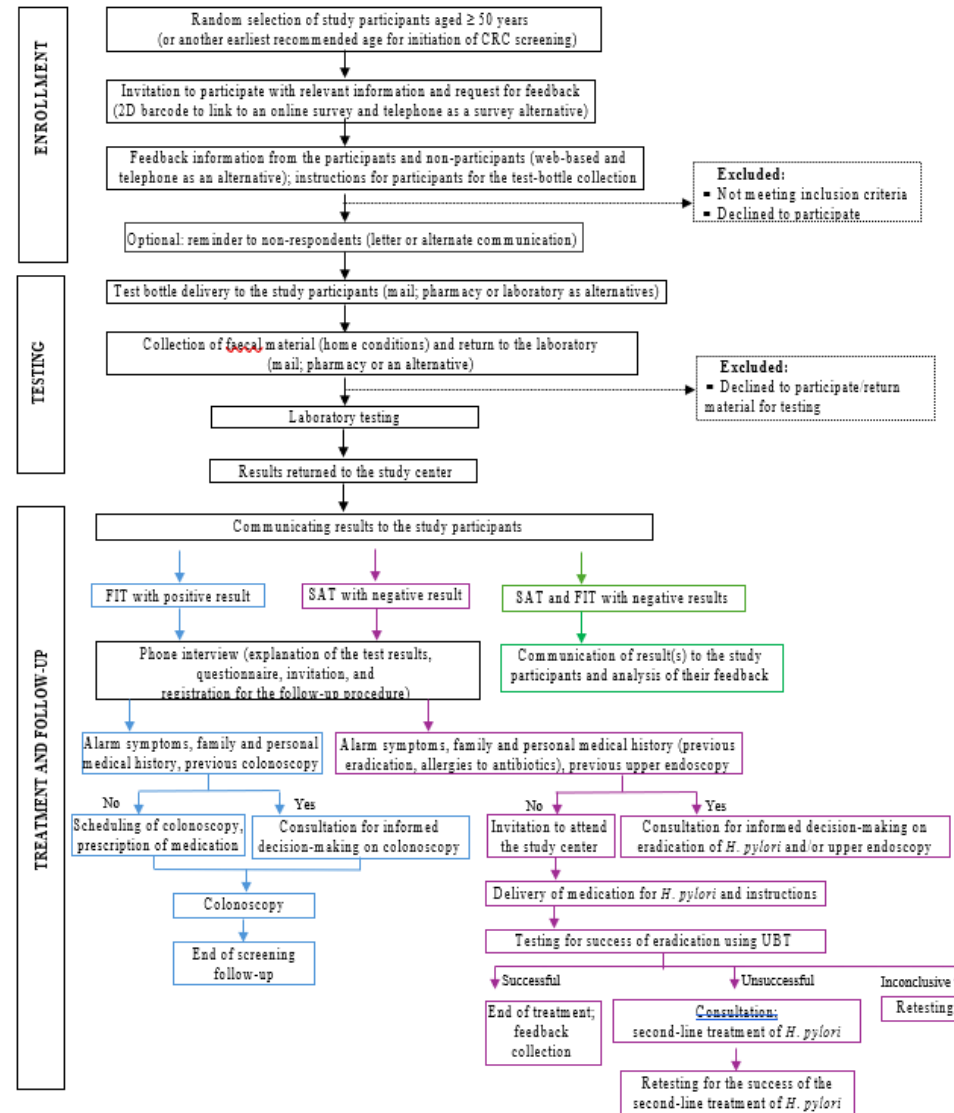
Countries to be involved initially

- Estonia
- Latvia
- Portugal
- Italy



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EUCANSCREEN GASTRIC CANCER PREVENTION PILOT STUDY FLOW-CHART



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2024 TOGAS outreach conference
Porto, September 12, 2024



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**Let's shape the future of
gastric cancer screening
practices in Europe!**

Register [here](#)

