

EUROPEAN COMMISSION
INITIATIVE ON BREAST CANCER

EC Initiatives on cancer screening and care

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STRIVE: Breast cancer screening in Latvia

Riga, 17 – 09 - 2026

Disclaimer

The content of this presentation is based on the European Commission Initiative on Breast Cancer (ECIBC). This presentation was created with the support from Joint Research Centre (JRC) of the European Commission.

The individual views expressed by the presenter do not necessarily reflect the position or opinion of the European Commission.

1. Introduction

EC Initiatives on cancer screening and care

EC Initiatives on Cancer Screening and Care



European Commission Initiative on Breast Cancer



European Commission Initiative on Cervical Cancer



European Commission Initiative on Colorectal Cancer



European Commission Initiative on Gastric Cancer



European Commission Initiative on Lung Cancer



European Commission Initiative on Prostate Cancer

Key facts

Funding and coordination:

- European Commission's Directorate General Health and Food Safety;
- European Commission's Joint Research Centre;

Aim:

- To improve the quality of cancer prevention, screening and care and contribute to reduce inequalities in accessing cancer services in Europe.

Components:

- European Guidelines on breast cancer prevention, screening and diagnosis;
- European Quality Assurance scheme covering the entire breast cancer care pathway.

Rationale

- 2022 – EU Council Recommendation on strengthening prevention through early detection: new screening approaches for organised population-based screening programmes for **breast, colorectal**, **cervical, gastric**, **lung**, and **prostate** cancer (replacing the 2003 recommendation)
- 2008 – European Parliament and Council called the Commission to ensure the **development of evidence-based guidelines** and **quality assurance schemes** for cancer screening and care
- Discrepancies in the quality of care and access to care across EU

⇨ **Europe's Beating Cancer Plan** (Feb 2021)

Objectives & Pillars

Improve quality of cancer screening and care – reduce inequalities across Europe



Evidence-based **Guidelines** on primary prevention, screening and diagnosis



Quality assurance schemes for healthcare services along the entire care pathway

Prevention/ Screening

Diagnosis

Treatment

Rehabilitation

Follow-up & Survivorship

Palliative care

International guidelines supporting European QA schemes

Key features

- **Organised, population-based screening programmes**
- Cover the entire care pathway
- **Scientific, evidence-based, transparent process & reproducible methodology**
- Patient-centred products
- Multidisciplinary panel of professionals and patients
- Conflict of interest management
- Public consultations
- Regularly updated
- **Voluntary implementation and step-wise approach**

Actors

- **European Commission:** DG SANTE policy leadership - JRC scientific and technical coordination
- **Working groups:** decision making body that provides direction for development of guidelines and quality assurance scheme
- **Topic-specific groups:** prepares draft recommendations and requirements; detailed guidance and expertise in planning work for each healthcare question and quality aspects
- **Systematic review group:** performs systematic reviews of the scientific evidence available and summarises evidence
- **Partner and collaborators:** support in identifying priorities, ensure complementarity with other European initiatives and provide feedback

2. European Breast Cancer Guidelines

EC Initiative on Breast Cancer



European Breast Cancer Guidelines

- **Guidelines**: systemically developed **evidence-based statements** which allow stakeholders to make informed decisions about appropriate health interventions
- **Recommendations**: **specific and actionable statements** included in guidelines
- Informed by systematic reviews of evidence and assessments of benefits and harms of alternative options

European Breast Cancer Guidelines

Status



- Initiative started in 2015
- 80 guideline recommendations
  4 good practice statements
- Update of the guidelines ongoing
  (5th update)
- Renewed Working Group in Oct 2025

Topics covered

as of September 2026

Breast cancer screening	Breast cancer diagnosis
1. Organising screening programmes	8. Informing women about their results
2. Risk stratification	9. Further assessment after the mammogram
3. Screening ages and frequencies	10. Staging
4. Use of artificial intelligence	11. Planning surgical treatment
5. Use of tomosynthesis	12. Towards the treatment of invasive breast cancer
6. Women with high breast density	
7. Inviting women to screening programmes	

Link to European Breast Cancer Guidelines

GRADE approach

- **GRADE approach:** internationally recognized methodology for the development of health guidelines.
- More than 110 organizations from 19 countries around the world, including WHO, NICE, CDC, CADTH, etc…, have endorsed or are using it (https://www.gradeworkinggroup.org/)
- **GRADE Evidence to Decision framework:** 13 criteria essential to take the decision

Criteria	Question
Problem	Is the problem a priority?
Desirable & undesirable effects	How substantial are the desirable anticipated effects?
	How substantial are the undesirable anticipated effects?
Certainty	What is the overall certainty of the evidence of effects?
Values	Is there important uncertainty about or variability in how much people value the main outcomes?
Balance	Does the balance between desirable and undesirable effects favour the option or the comparison?
Resource use	How large are the resource requirements (costs)?
	What is the certainty of the evidence of resource requirements?
	Does the cost effectiveness of the option favour the option or the comparison?
Equity	What would be the impact on health equities?
Acceptability	Is the option acceptable to key stakeholders?
Feasibility	Is the option feasible to implement?
Planetary health	What would be the environmental and ecological impact?

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PICO format

Healthcare questions structured using the PICO format:

Should organised mammography screening vs. no mammography screening be used for early detection of breast cancer in women aged 50 to 69?

- **P**opulation: general population at average risk of breast cancer aged between 50 and 69 years
- **I**ntervention: mammography
- **C**omparison: no screening
- **O**utcomes: breast cancer incidence, breast cancer mortality, ….

Public access 1/3

https://cancer-screening-and-care.jrc.ec.europa.eu/en/

Women aged 50-69: screening vs. no screening

Issued on: June 2016

Healthcare question

Should organised mammography screening vs. no mammography screening be used for early detection of breast cancer in women aged 50 to 69?

Recommendation

For asymptomatic women aged 50 to 69 with an average risk of breast cancer, the ECIBC's Guidelines Development Group (GDG) recommends mammography screening over no mammography screening, in the context of an organised population-based screening programme.

Recommendation strength

- ✓ Strong recommendation
- ✓ Moderate certainty of the evidence

Recommendation in question/answer format

Recommendation strength and certainty of the evidence

Public access 2/3

Justification

The strong recommendation (rather than conditional) in favour of mammography screening over no mammography screening, in the context of an organised screening programme, was a result of a balance of the health effects that favours the intervention, in the context of moderate certainty in the evidence about these effects, and the cost-effectiveness of screening probably favouring the intervention.

Subgroup considerations

This recommendation does not apply to high-risk women (see recommendations for women with high breast density).

Considerations for implementation and policy making

Despite being a strong recommendation, women should be provided with the information regarding benefits and harms of screening.

Monitoring and evaluation

Future monitoring and evaluation of screening services should consider risks and benefits in the context of evolving treatment and management protocols. Monitoring and evaluation criteria have been developed within the ECIBC initiative.



Justification and other elements of the recommendation

Public access 3/3

Supporting material

GRADE Evidence-to-Decision Framework



European Guidelines on Breast Cancer Screening and Diagnosis
European Commission Initiative on Breast Cancer

Should organised mammography screening vs. no mammography screening be used for early detection of breast cancer in women aged 50 to 69?

Author(s) of the Evidence Profile: Guidelines Development Group (GDG): Mariangela Autelitano, Bettina Borisch, Mireille Broeders, Xavier Castells, Roberto D'Amico, Edoardo Colzani, Jan Daneš, Chris De Wolf, Stephen Duffy, Patricia Fitzpatrick, Markus Follmann, Livia Giordano, Paolo Giorgi Rossi, Axel Gräwingholt, Solveig Hofvind, Lydia Ioannidou-Mouzaka, Susan Knox, Annette Lebeau, Helen Mcgarrigle, Lennarth Nyström, Elsa Pérez Gómez, Cecily Quinn, Peter Rabe, Holger Schünemann, Alberto Torresin, Ruben Van Engen, Cary Van Landsveld-Verhoeven, Sue Warman, Kenneth Young. Systematic Review team: Diogenes Seraphim, Pablo Alonso-Coello, Ivan Solà, Monica Ballesteros, Margarita Posso, Nadia Montero, Carlos Canelo. JRC Healthcare Quality team: Zuleika Saz-Parkinson, Donata Lerda

RECOMMENDATION

Created with: GRADEpro GDT

WE RECOMMEND THE INTERVENTION

For asymptomatic women aged 50 to 69 with an average risk of breast cancer, the ECIBC's Guidelines Development Group (GDG) recommends mammography screening over no mammography screening, in the context of an organised population-based screening programme (strong recommendation, moderate certainty of the evidence).

Complete EtDs, evidence profiles, and bibliography

Implementation of the European Guidelines

Use in Europe and beyond:

- Guidelines implemented (adapted or adopted) in:
  Bahrain, China, Italy, Norway, Sweden and Tunisia
- Guideline translations and use:
  Bulgaria, Slovakia, Spain
- Use of systematic reviews:
  Denmark, Moldova, Sweden
- Several other manifestations of interest:
  Portugal, Ireland, Singapore, Luxembourg and Latvia (LLUMINAS TSI project)



3. European Quality Assurance (QA) scheme for breast cancer services

EC Initiative on Breast Cancer



European QA scheme

Objectives

To provide a quality standard for cancer care services across Europe in the context of organised, population-based cancer screening



Coverage of the **entire care pathway** including the screening programme



Person-centred and considers **individuals' values**



Voluntary, modular scheme that allows a **step-wise** certification approach



Flexibility to account for the **infrastructure diversity** across Europe

European QA scheme

Status

Extensively tested in 20 entities across 9 countries and refined

Determined as **fit-for-purpose**

Endorsed for mandatory application by National accreditation bodies

Scheme is available for implementation – since 4th February 2025



Alignment with the European landscape

- European Projects –
  developing requirements or indicators
- Existing national/regional requirements, third-party schemes, or international standards.
- Feedback from the scheme's users
- Collaboration and exchange
  is integrated into the development



Target users of the scheme

Breast Cancer Screening and Care Services

- Entities responsible for any aspect of cancer care management from **screening to palliative** care such as:



Screening units



Breast Centres



Cancer Centres



Hospitals



Clinics

Contents

Part I – Operation and certification

Part II - Requirements

Glossary

Annex 1 – Quality indicators

Annex 2 – Auditor specifications

Annex 3 – Supporting documents

Normative

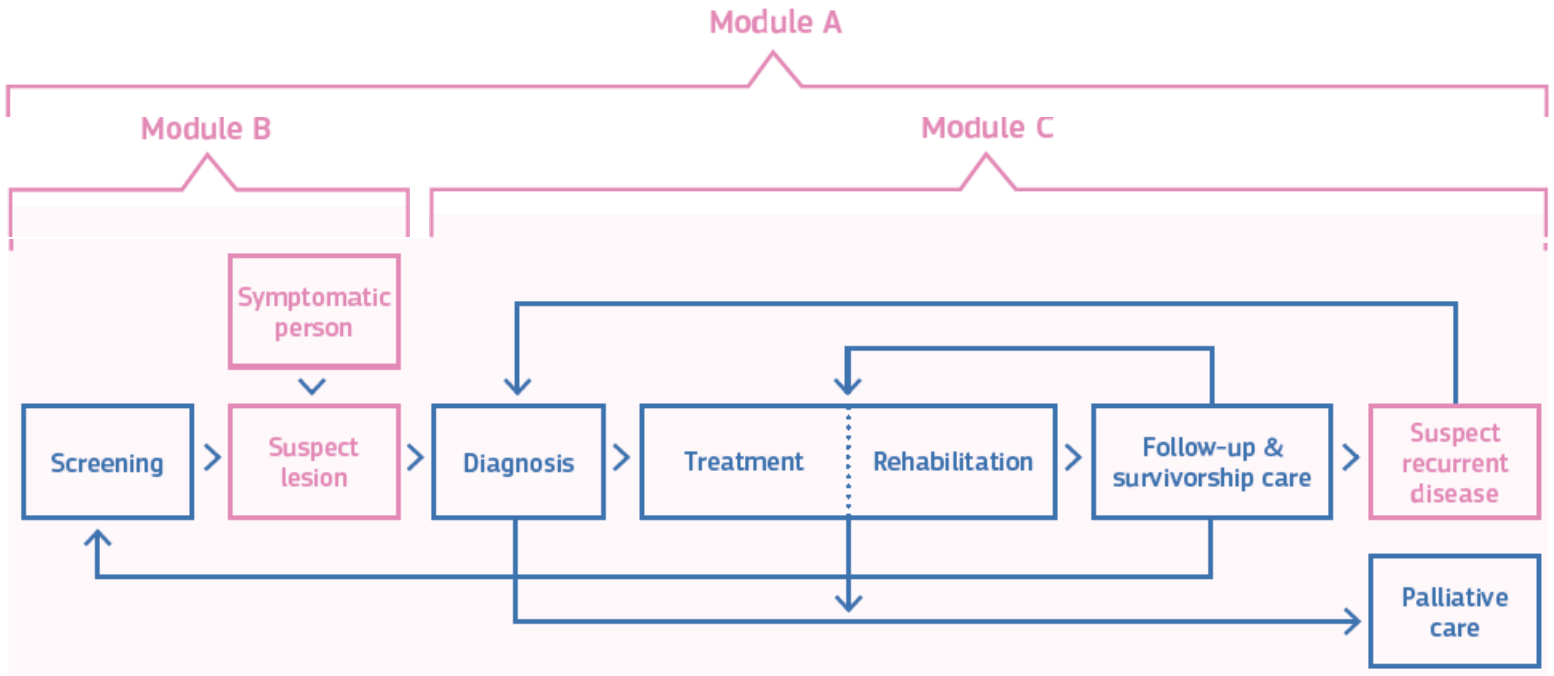
Mandatory for conformity assessment

Informative

guidance, explanations, examples, and best practices

ECIBC

Part I: Certification modules



Module A: Entire breast cancer screening and care pathway

Module B: Breast cancer screening programme

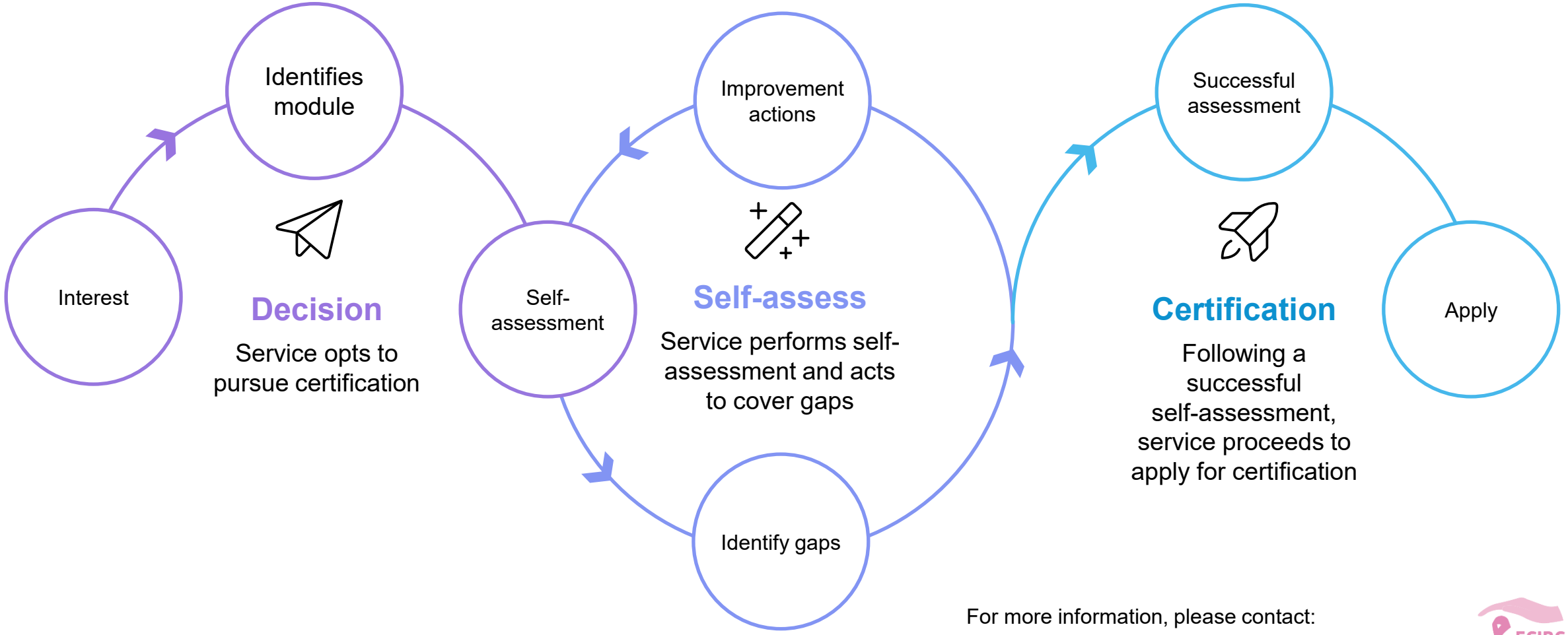
Module C: Breast cancer care pathway

Services may apply for one of the certification modules

A **stepwise approach** is available to facilitate uptake

Part I: Applying for certification

For breast cancer screening and care services



For more information, please contact:

JRC-CANCER-CARE-QA-SCHEMES@ec.europa.eu

Progress of implementation (August 2026)

- 9 National/Regional screening programmes

  (Greece, Ireland, 2xItaly, Luxembourg, Malta, Norway, Slovenia, Spain)

- 10 Breast cancer care services

  (Italy, Luxembourg, Latvia, 2xMalta, 2xPoland, 2xPortugal, Slovenia)

- 8 Policy makers & third-party schemes

  (Austria, Cyprus, Germany, Greece, Italy, Slovakia, Slovenia, Spain)

- 6 Certification bodies registered plus other interests; ongoing authorisation agreements

  (Cyprus, Greece, Italy, Portugal, Spain, Turkey)



Thank you

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General Contact:

JRC-CANCER-POLICY-SUPPORT@ec.europa.eu

Contact regarding the European QA schemes:

JRC-CANCER-CARE-QA-SCHEMES@ec.europa.eu

Link to download the European QA scheme

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