No child left behind: creating equal access to care & research in childhood cancer through the EU 2028–2034 Budget

Small investments, lifesaving impact: EU childhood cancer funding that changes lives →



About Childhood Cancer

6000
deaths annually in Europe

Childhood cancer is a therapeutic area of (ultra) rare and life-threatening diseases with high unmet needs.

Childhood cancer remains the

No 1

cause of death by disease in children >1 year old in Europe.

The Childhood, Adolescent, and Young Adult (CAYA) cancer survivor population is estimated at 500,000 persons and is expected to increase each year.



2/3 experience late effects.

There is a

20%

difference in childhood cancer survival rates across Europe.





#### Why do children with cancer still need the EU support?

1 Every child deserves new hope, not old drugs.



O new treatments in the last 20 years for childhood cancers causing 1/3 of deaths

Anticancer drug development since 2007:

16 %
new anticancer
medicines

for children

vs 150
new anticancer
medicines
for adults



2 Every child must have access to therapies to tackle inequalities across Europe.



3 Every child must have access to less toxic treatments and to follow up care.



#### No single country can tackle these challenges alone

### The new MFF (2028–2034) is a major opportunity to solve these challenges



# 1. Boost Drug Development and Access to Innovation in Childhood Cancer

- → Support the European childhood cancer research networks and secure EU funding for academic-led clinical trials.
- → Facilitate cross-border access to clinical trials.



### 2. Implement Childhood Cancer Care Networks & Infrastructures

- → Ensure sustainability of ERN PaedCan.
- → Support twinning projects (sharing expertise between childhood cancer centres).
- → Recognise and expand specific Comprehensive Childhood Cancer Infrastructures within the existing ERN PaedCan structure.
- → Support the development of National Cancer Mission Hubs (NCMHs).

→ Improve access to cross-border care under existing EU legislation.



### **3.** Unlock opportunities through data sharing and Al tools

- → Ensure EHDS Implementation unlocks greater opportunities for childhood cancer.
- → Explore genome sequencing.
- → Develop Al driven data solutions.



# **4.** Real patients, real voices: operating grants for patient organisations

- → Allow patient organisations to work independently and uninfluenced as civil society actors = more patient -centric decisions on research and care.
- → Implement EU policies, and help close the gaps beyond the EU region.

Contact:

CCI Europe

www.ccieurope.eu office@ccieurope.eu

SIOPE

www.siope.eu office@siope.eu No child left behind: creating equal access to care & research in childhood cancer through the EU 2028–2034 Budget:

