Cancer Care in Numbers

presentation of the Czech Society for Oncology

...by the Institute of Biostatistics and Analyses, Faculty of Medicine, Masaryk University ...on behalf of the Board of the Czech Society for Oncology

About the Czech Society for Oncology

The Czech Society for Oncology (ČSO) is a voluntary independent association of physicians, pharmacists and other professionals working in healthcare (oncology in particular) and related services. As of 28 August 2017, ČSO pays attention to development and spreading of scientifically proved findings in oncology and related fields, striving to use them and putting special emphasis on cancer prevention. ČSO is engaged in the lifelong education of physicians and is an active partner in the transformation of management and financing of the Czech healthcare system.

ČSO also supports the development of cancer screening programs and cooperates with several patients organizations and always defends interests of cancer patients, who are empowered by a constant access to regularly updated on-line information on cancer prevention and treatment, thus enhancing their participation in treatment.

Czech National Cancer Control Programme

Czech National Cancer Control Programme was created in accordance with the conditions and needs of the Czech Republic and in compliance with the conclusions of WHO Consultation on Strategies to Improve and Strengthen Control Cancer Programmes in Europe held on 25–28 November 2003 in Geneva.

Aims:

• Lowering cancer incidence and mortality.
• Improving quality of life of cancer patients.
• Making the best use of available resources for cancer diagnosis and treatment in the Czech Republic.
• Optimising approach to modern diagnostic and treatment methods.

Strategy:

• Fighting against malignant tumours as a part of nationwide and regional political agenda.
• Making the best use of available resources for cancer diagnosis and treatment in the Czech Republic.
• Optimising approach to modern diagnostic and treatment methods.

Cancer in the Czech Republic

The cancer burden in the Czech population ranks among the highest worldwide [1,2] and has been growing continuously. Each year in the Czech Republic (with a total population over 10.5 million), over 82,000 people are diagnosed with cancer and over 27,000 people die of it. Men are most often diagnosed with colorectal and lung cancer. The most frequent diagnoses in Czech women are breast cancer, followed by colorectal, lung, and uterine cancer. Lung, colorectal, breast, prostate, and pancreatic cancers rank among the most frequent ones with respect to mortality rates.

Czech National Cancer Registry and IT background of cancer care

In cooperation with other institutions, ČSO has developed an information system that provides a complex view of cancer epidemiology, diagnosis and research in the Czech Republic. The Czech National Cancer Registry is the main point of this system - a unique population-based database which involves all cancer cases diagnosed in the Czech Republic since 1977. This almost 40-year time-series makes it possible to perform long-term assessment of epidemiological trends for individual cancer types, evaluation of treatment outcomes and patient survival rates and, last but not least, to predict the numbers of cancer patients to be treated in the years to come (Figure 2).

National cancer screening programmes

All internationally recommended cancer screening programmes are available for citizens of the Czech Republic. People aged 50 years and over can participate in colorectal cancer screening, women aged over 45 can undergo mammography, and all adult women can attend cervical cancer screening. In accordance to the recommendation by the Council of the European Union, all screening examinations are offered by means of organised programmes, with strictly defined procedures and ensured quality control. Health care facilities selected for providing screening examinations (mammography centres, colorectal cancer screening centres, etc.) are therefore continuously monitored to provide high-quality examinations. A system of personalised invitation to cancer screening was launched in early 2014, which turned the organised programmes into population-based. Personalised invitations led to an increase in uptake, particularly in the colorectal cancer screening programme (Figure 3).

Improvement of cancer care and prolonged survival of cancer patients

Continuing the high incidence of cancer outcomes of cancer care are of key importance. Over the last 10–15 years, the Czech cancer care has made a significant progress in terms of increasing survival of cancer patients and decreasing mortality rates. In most cancer types, the Czech Republic has achieved markedly better outcomes than other Eastern bloc countries, getting closer to the European average, as confirmed by the EUROCAR-5 study [3] and the CONCORD-2 study [4], as well as by the annual comparison of healthcare systems in OECD and EU countries [5]. In some cases, such as colorectal cancer, the Czech Republic has seen by far the biggest drop in mortality in a decade when compared to other European countries (Figure 4).

In spite of these positive findings, several challenges for the Czech cancer care have been identified: promotion of prevention and healthcare lifestyle preventive examinations, smoking cessation, reduction of obesity and other (risk) factors, availability of new drug treatments, or strengthening the feedback mechanisms to promote best practices in cancer diagnosis and treatment among providers.

Czech pilot model of a comprehensive cancer network

The Work Package 6 of the EU Joint Action CanCon focuses on the concept of Comprehensive Cancer Care Network (CCCN). Peking University and a larger patient base would enable a CCCN to make rational short-term and long-term plans capitalising on complementary expertise of individual professionals, while avoiding unnecessary and costly duplications. This would provide a seamless pathway of care for patients nearer their homes, which would be sustainable at the same time. A pilot model of such CCCN has been set up in the Czech Republic, namely in the Vysočina Region and the South Moravian Region. The pilot model covers all components of cancer care: from cancer prevention and organised screening programmes through standard diagnostic and treatment procedures to follow-up plans; specialised care focused on rare tumours as well as palliative care are also included.

References


5. OECD/EU Health at a Glance: Europe 2016 - State of Health in the EU Cycle [3].