



Cancer screening

Everything you need to know

1. WHAT IS A SCREENING AND HOW DOES IT WORK?



Cancer screening looks for cancer before a person has any symptoms, as catching the disease early offers better treatment options. If your doctor suggests a screening test don't panic, it doesn't mean they suspect cancer – screening is often carried out as a precaution.

Based on conclusive scientific evidence, in December 2022 the European Council adopted recommendations on cancer screening addressed to EU Member States¹. In this context:

- The Europe's Beating Cancer Plan is providing support to Member States to ensure that 90% of the EU population who qualify for breast, cervical and colorectal cancer screenings are offered such screening by 2025. The recommendations also expands population-based organised cancer screening to include lung, prostate and, under certain circumstances, gastric cancers.
- The EU Cancer Mission is providing support to develop more reliable, less invasive, and more affordable screening tests.

Here's how screening works for each type:

Breast Cancer

Screening recommended for women aged 50 to 69²

- **Mammogram** – this is an X-ray of the breast and it is the most common type of screening.
- **Breast magnetic resonance imaging (MRI)** – Use of MRI should be considered when medically appropriate. Used in conjunction with mammograms, the breast MRI uses magnets and radio waves to take pictures of the breast.
- **Clinical breast exam** – An examination by a doctor or nurse, who uses his or her hands to feel for lumps or other changes.
- **Breast self-awareness** – It is important for women to check their breasts regularly to detect any unusual lumps or changes, all of which should be reported to your doctor.



Colorectal Cancer

Screening recommended for individuals aged between 50 and 74

- **Fecal immunochemical test (FIT)** – where the stool is examined to detect abnormalities. FIT is considered the preferred screening test before referring individuals for follow-up colonoscopy.
- **Flexible sigmoidoscopy** – A short, thin, flexible, lighted tube is inserted into the rectum. The doctor checks for polyps or cancer in the lower third of the rectum.
- **Colonoscopy** – Similar to flexible sigmoidoscopy, except the doctor uses a longer, thin, flexible, lighted tube to check for polyps or cancer inside the rectum and the entire colon.
- **Virtual Colonoscopy** – Computed tomography (CT) colonography, also called a virtual colonoscopy, uses X-rays and computers to produce images of the entire colon.



Cervical

Screening recommended for women aged 30 to 65

- **HPV test** – This is performed to detect the presence of high-risk types of human papillomavirus (HPV) that can lead to cervical cancer.
- **Pap test** – Otherwise known as a Pap smear or cervical cytology, collects cervical cells to identify any HPV-related changes that have the potential to progress into cervical cancer if left untreated.
- **HPV/Pap co-test** – Combines the HPV test and Pap test, enabling the simultaneous detection of both high-risk HPV strains and any cervical cell changes associated with HPV infection.



1 Council Recommendation on strengthening prevention through early detection: A new EU approach on cancer screening, November 2022

2 A lower age limit of 45 years and an upper age limit of 74 years is suggested.

Gastric

- **Gastroscopy** - Also referred to as upper endoscopy, uses a slender and flexible tube called an endoscope to inspect the upper digestive system. Screen-and-treat strategies for *Helicobacter pylori* should be considered in countries or regions with high gastric cancer incidence.



Prostate

- **PSA test** – this is a blood test that measures the level of prostate-specific antigen (PSA) in the blood. The PSA test is used in combination with additional magnetic resonance imaging (MRI) scanning as a follow-up test.
- **Digital rectal examination** – Or DRE as it is known, is when a health care provider inserts a gloved, lubricated finger into a man's rectum to feel the prostate for anything abnormal, such as cancer.



Lung

- **LDCT scan** – Doctors use a low-dose computerized tomography (LDCT) scan of the lungs to look for lung cancer. It is normally used for those at higher risk.



2. IMPORTANCE OF SCREENING

The primary objective of cancer screening is to minimize both the incidence of cancer-related illnesses and mortality rates. It's undeniable that proper screening measures have effectively reduced both illnesses and deaths caused by cancer in the EU and beyond. Screening provides you with the opportunity to identify and manage your health issues in an effective way. It can also serve to put your mind at ease and confirm that you have nothing to worry about, so make sure to attend a screening when you are invited.

Abnormal screening results may require further diagnostic tests to confirm cancer.

3. HOW TO PREPARE FOR A SCREENING

Ways to prepare for a cancer screening differ depending on the type of screening involved, such as fasting before a colonoscopy. Details such as this should be made available to you prior to your appointment.

As a general rule, it is advised to prepare as you would for a standard appointment with the doctor:

- Wear comfortable clothing
- Practice good hygiene
- Prepare and write down any questions that you have

