

The Let's Talk Prostate Cancer Campaign

The impact of COVID-19 on men with prostate cancer across Europe

The COVID-19 pandemic has led to unprecedented disruption of health systems, economies and everyday life.¹ Healthcare systems across Europe have mobilised immense efforts to respond to the crisis and support those affected as well as their families and carers. It is a particularly worrying time for cancer patients as the impact of their condition and its treatment means that they are at an increased risk from the pandemic.¹,²

The Let's Talk Prostate Cancer expert group is a pan-European initiative – organised and funded by Astellas Pharma Europe Ltd – bringing together representatives of stakeholder organisations from the EU prostate cancer community. Its aim is to raise awareness of the needs and challenges of those affected by prostate cancer across Europe.

This document highlights the impact that COVID-19 has on those affected by prostate cancer as well as the unique opportunities for improving prostate cancer care that healthcare systems should consider as part of the long-term recovery from the pandemic.



COVID-19 is likely to disproportionally impact the same demographics as prostate cancer^{3,4,5}

The impact of COVID-19 on prostate cancer patients

COVID-19 appears to disproportionally impact the same demographics as prostate cancer.^{3,4,5} Early data suggest that older men, and especially those from a black and minority ethnic background, are more likely to die from COVID-19.^{4,5,6} This is the same part of the population that is also likely to be impacted by prostate cancer.

Prostate cancer is already a major health challenge - responsible for 25% of all new male cancers and 10% of male cancer deaths, accounting for 107,000 deaths across EU Member States in 2018 alone.⁷⁸

In the EU, more than two million people are living with prostate cancer. For every 100,000 people living in Europe in 2018, there were 159 new cases of prostate cancer diagnosed, compared with 145 new breast cancer cases. ^{10,11} Nonetheless, policy attention to prostate cancer has remained low. What is more, prostate cancer is increasingly diagnosed at an advanced stage, ¹¹ with those affected often experiencing health inequalities, ¹² stigma¹³ and health system failures ¹⁴ resulting in sub-optimal patient outcomes.

Without policy action, there is a risk that COVID-19 will increase the challenges already facing prostate cancer patients across Europe:

This project has been organised and funded by Astellas Pharma Europe Ltd.

Accessing prostate cancer diagnosis, treatment and support

The severe disruption of the prostate cancer care pathway caused by COVID-19 is likely to further impact on patient outcomes:



Delays in seeking help

Accessing health services for non-COVID-19 reasons has become more challenging and many men with signs and symptoms of prostate cancer may have delayed seeking help because of these access hurdles, or because they are concerned about being exposed to the virus. ¹⁴ This may mean that they are more likely to present with prostate cancer which has already spread.

Delays in diagnosis

Early data from clinical practice suggests that fewer patients have been seeking medical advice during the pandemic, which could lead to an increase in late or missed diagnoses for cancer patients in future. ¹⁵ Approximately, 37,500 men are diagnosed with prostate cancer across Europe every month. ⁸ This means that for every month of lockdown, these men may experience difficulties in receiving a timely and accurate diagnosis.

Disruption of care support

As part of the treatment pathway those affected often require ongoing monitoring and support either to evaluate the impact of their treatment or to assess whether their cancer has progressed, so that the right treatment can be provided at the right time. Delayed or postponed outpatient appointments can further increase anxiety and worry for those patients currently on active surveillance or progressive treatment plans. 17

Delays in access to treatment

Almost 9,000 men die every month across Europe as a result of prostate cancer.⁸ This illustrates the importance that those affected receive access to the right treatment at the right time. Prostate cancer treatments including surgery, chemotherapy and radiotherapy have all been affected by COVID-19.¹⁷ This will create a backlog of patients requiring urgent treatment once healthcare systems have responded to the immediate pressures of the pandemic. In addition, many men with prostate cancer will be immuno- compromised and therefore require shielding. This is likely to create anxiety for men and their families, and additional complexities for the healthcare systems that support them.



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Health inequalities

Those affected by prostate cancer are already experiencing healthcare inequalities that span across socio-economic and ethnic backgrounds, ¹⁸ affecting every aspect of their care. With Black, Asian and minority ethnic (BAME) communities at an increased risk of dying or suffering serious ill-health as a result of COVID-19, the health inequalities faced by the prostate cancer community will further increase unless targeted action is taken to support affected communities in accessing help.⁴



Stigma compounded by prolong isolation and anxiety can impact on the mental health of those affected 13,14

Stigma

Treatment for prostate cancer can cause emotional distress, guilt, isolation and anxiety. Many patients feel uncomfortable talking about the condition to close friends, family and healthcare professionals. This stigma, together with a reluctance to engage with the healthcare system during this time of crisis might cause men not to seek the medical advice they require, further delaying access to vital support and treatment. This might not only lead to the progression of their disease but also impact on their mental and psychological wellbeing as a result of prolonged self-isolation and anxiety.

The combination of disrupted prostate cancer services and the direct impact of the COVID-19 pandemic means that it is now more important than ever that the needs of prostate cancer patients and their families are not forgotten and addressed in a timely manner.



Best practice models emerging from the pandemic response provide opportunities for improved prostate cancer care

The way forward: Supporting prostate cancer services recovery from the pandemic

As healthcare systems respond to the pressures caused by the pandemic, there are examples of best practice emerging in prostate cancer care across Europe which should be emulated. It is vital that healthcare systems capitalise on these opportunities and make prostate cancer a central part of their COVID-19 recovery process. These innovations across the prostate cancer care pathway include:

Increased care provision in the primary care setting: Capacity pressures in the hospital setting caused by the pandemic have seen an increased role for GPs in the provision of care for those affected by cancer.¹⁹ As access to specialist care is likely to continue to be limited for some time, new care provision models including within the primary care setting should be considered. This will not only alleviate pressures across the prostate cancer care pathway but also enable easier access to care and support for those affected.



New models of care are evolving around remote consultations and digital care provision **Remote consultations for outpatients:** the rapid transition from physical attendance at outpatient clinics to virtual appointments is resulting in new ways of delivering care within most healthcare systems across Europe. The pace and scale of this transformation varies but provides new opportunities to increase the accessibility, responsiveness and efficiency of care, particularly at a time when many patients may be concerned about attending hospitals.

Adoption of digital technology: to support the move to virtual outpatient monitoring, healthcare systems have started to implement new technologies enabling better remote monitoring and facilitating patient self-evaluation and self-care. For men with prostate cancer, many of whom are undergoing active surveillance or ongoing monitoring of the effects of treatment, these technologies and practices could mean further quality of life improvements – without as many regular visits to hospital.

The response to this crisis has seen health professionals and organisations work together in new ways, presenting unique opportunities to unlock the capacity and innovation for improved prostate cancer care across Europe.

This is why the *Let's Talk Prostate Cancer* expert group is calling on European policymakers to make prostate cancer a priority and to work within the EU institutions to give Member States the tools, guidance and incentives to ensure they have the best possible prostate cancer plan for their country, including the dissemination and application of European guidelines.¹⁶

Together with Astellas, the *Let's Talk Prostate Cancer* expert group has launched a Call to Action aimed at European and national policymakers, outlining recommendations for how healthcare systems can address the challenges faced by the prostate cancer community. These include ensuring that prostate cancer is recognised as a policy priority, encouraging research into healthcare inequalities affecting individuals with prostate cancer and promoting care provision by multidisciplinary and multi-professional teams.

To find out more about the *Let's Talk Prostate Cancer* campaign or to receive a copy of the Call to Action, please contact the LTPC Secretariat provided by Incisive Health at **LTPC@Incisivehealth.com**



The Let's Talk Prostate Cancer campaign was launched in November 2019
to address the challenges faced by people living with prostate cancer in Europe.
The campaign is organised and funded by Astellas Pharma Europe Ltd. and brings together a
multi-disciplinary group of experts from across the region including representatives from Europa Uomo,
The European Oncology Nursing Society (EONS), The European Cancer Patient Coalition (ECPC),
The European Association of Urology (EAU), and The European Association of Urology Nurses (EAUN).













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