



LTPC National Event Prostate cancer awareness and policy action

3 June, 3 pm - 6 pm

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Event report 3rd June LTPC

Speakers

Antonella Cardone (Moderator), CEO of Cancer Patients Europe Italian Parliament

Gian Antonio Girelli, Member of the Social Affairs Commission of the Chamber of Deputies and President of the Intergroup on Prevention and Risk Reduction (Democratic Party)

Ylenia Zambito, Secretary of the Social Affairs Commission of the Senate (Democratic Party)

Patient Associations

Francesca Merzagora, President of ONDA Foundation

Antonella Cardone, CEO of Cancer Patients Europe

Paolo Bonaretti, Spokesperson of All.Can Italy

Claudio Talmelli, President of the Italian Group Europa Uomo

Alessandro Boni, Expert Patient, Expert Patient Academy – EUPATI

Clinicians

Rolando M. D'Angelillo, Vice President of the Italian Society of Uro-Oncology

Giuseppe Carrieri, President of the Italian Society of Urology

Regional Representatives

Danilo Cereda, Head of the Prevention Organisational Unit – Lombardy Region
 Giuseppe Gorini, Institute for the Study, Prevention, and Oncological Network
 Mario Airoldi, Coordinator of the Piedmont and Aosta Valley Oncology Network
 Massimo Aglietta, Coordinator of the Piedmont and Aosta Valley Oncology Network
 Marco Di Donato, European Regional and Local Health Authorities (EUREGHA)
 Manuela Tamburo De Bella, National Agency for Regional Health Services (AGENAS)

LTPC Expert

Prof. Hendrik Van Poppel, European Association of Urology (EAU) & KU Leuven

Summary of the event and key steps



The event took place on Tuesday, June 3, at the Sala del Refettorio of the Chamber of Deputies, in Rome, and was opened by the Moderator, Antonella Cardone, CEO of Cancer Patients Europe, who read a message from the Vice President of the Chamber of Deputies, Anna Ascani, expressing her support. In her message, Vice President Ascani thanked Honourable Girelli and the Expert Group Let's Talk Prostate Cancer for promoting a discussion on a crucial public health issue: the prevention and early diagnosis of prostate cancer. She highlighted Italy's progress in fighting cancer due to increased collaboration between institutions, the scientific community, professionals, associations, and patients. Finally, she reiterated the importance of strengthening this alliance to overcome regional inequalities and build a fairer and more citizen-oriented healthcare system.

The event included key national and international stakeholders, such as ONDA Foundation, Cancer Patients Europe, All.Can Italy, Europa Uomo, Patient Expert Academy EUPATI, the Italian Society of Uro-Oncology (SIURO), and European Regional and Local Health Authorities (EUREGHA). It provided an important opportunity for technical-scientific and institutional dialogue on the prevention and management of prostate cancer.

During the event, the Expert Group LTPC presented their identified priorities for improving early diagnosis through targeted screening programmes, territorial equity, and access to prostate cancer care, promoting innovation, patient support, and coordinated health policies.

The discussions were divided into four panels:

- Panel 1 Prostate cancer in Italy: the reality behind the numbers
- Panel 2 Transforming care: a multidisciplinary and patient-centred approach
- Panel 3 National leadership: political action for better outcomes and sustainability of the National Health Service
- Panel 4 Regional initiatives: tackling prostate cancer across Italy



Key discussion points that emerged during the event

- **Centrality of prevention and early diagnosis**: Prostate cancer is a priority public health issue requiring concrete actions for prevention and early diagnosis.
- Active and recognised role of the patient: Patients must be actively involved as an integral part of the care pathway. An informed, trained, and expert patient contributes to better clinical outcomes and greater system sustainability.
- Regional inequalities and the need for a national approach: Significant regional
 disparities in access to care and screening programmes persist, highlighting the need for
 a structured national table to coordinate and standardise prostate cancer screening across
 the territory. Including screening in the Essential Levels of Care (LEA) is a priority shared
 by scientific societies, patient associations, and experts in the field.
- **Importance of a multi-stakeholder alliance:** The success of initiatives depends on close collaboration between institutions, clinicians, patients, associations, and industry, in an integrated approach that values the contributions of all involved. Multidisciplinarity is key to ensuring more effective, personalised, and equitable care.
- Education and culture of male prevention: Male oncological prevention is still hindered by cultural delays requiring targeted interventions, starting with educational campaigns from schools. Many men ignore warning signs or tend to postpone check-ups, even when adequately informed. Therefore, promoting male health must become a true public health priority.
- Technological innovation: Advanced technologies such as multiparametric MRI, fusion biopsy, artificial intelligence, and omics technologies are revolutionising early diagnosis of prostate cancer, offering increasingly precise and targeted tools.
- Regional pilot screening experiences: Regional experiences are an important first step but need to be extended to the entire Italian territory.
- The role of politics and legislators: Politics must listen to science and translate evidence into concrete regulatory and strategic actions that can have a real impact on public health. Reorganising available resources is not only possible but necessary to strengthen prevention without compromising system equity. Prevention programmes should be considered a fundamental investment for the future sustainability of the health service, not just a cost to be contained.



Key messages that emerged during the event



first session featured Francesca Merzagora, President ONDA Foundation, who explained what motivated the foundation to expand from its initial focus on women's health to include male health and specifically prostate cancer. Dr Merzagora highlighted the foundation's main activities on the topic, including a 2021 survey, the drafting of a white paper, blue ribbon initiatives hospitals, for

institutional document to initiate national screening, and an interregional table.

"We hope that the collaboration built over the years with institutions, associations, and parliamentarians will transform into a stable and concrete alliance, capable of finally activating national screening for prostate cancer as well."

In the second panel, experts discussed the latest therapeutic innovations and emphasised the importance of placing the patient at the centre of care.



Dr Claudio Talmelli, President of Europa Uomo Italia, opened the session by stressing that prostate cancer represents not only a clinical challenge but also a social, cultural, and political one. He underscored the urgency of acting on three priority fronts: early diagnosis, active surveillance, and the establishment of Prostate Cancer Units nationwide. In Italy, one in eight men are often diagnosed late due to the lack of organised screening. Talmelli called for clear



political commitment and highlighted the need for male health education starting from schools, to promote culture and awareness before the disease.

"There is an underlying issue: the lack of knowledge about male health. Too many men do not know, do not talk, do not take care of themselves. Education on prevention is needed from schools, as there is a world before diagnosis that needs to be built with culture, awareness, and information."

Dr Paolo Bonaretti, spokesperson for All.Can Italy, highlighted that prevention and early diagnosis are crucial challenges to ensure the sustainability of innovation in cancer care, especially for high-incidence tumours like prostate cancer. He stressed the need to promote health education for men. Bonaretti also pointed out the importance of building screening programmes based on scientific evidence and risk stratification, valuing the use of advanced technologies, personalised medicine, and artificial intelligence, and addressing regulatory barriers related to the reuse of health data.

"A deep educational effort is needed, starting well before the age of 50, to overcome cultural biases that lead too many men to ignore disease signals... A team effort between institutions, businesses, research, and associations is needed, as already happens in regional cancer networks. Only in this way can we truly change the approach to male health."

Dr. Alessandro Boni, an expert patient and member of the EUPATI Academy, emphasised the central role of informed and aware patients in the care pathway. He highlighted that active patient involvement leads to better adherence to therapies, improved clinical outcomes, and lower costs for the healthcare system. He also pointed out Italy's delay, particularly in the digital field, reiterating the need to consider the patient an active resource and not just a recipient of care.

"Actively involving the patient is no longer an option, it is a necessity."

The discussion continued with significant contributions from scientific societies. **Prof. Giuseppe Carrieri, President of the Italian Society of Urology (SIU)**, highlighted the importance of a multidisciplinary approach in improving the diagnostic and therapeutic pathway for prostate cancer. Thanks to synergistic work within the Prostate Units, it is now possible to offer clearer, personalised, and shared guidance. Carrieri also emphasised the crucial role of new technologies, such as multiparametric MRI and fusion biopsy, in early diagnosis.



"Including prostate screening in the LEA is a priority. But without overcoming regional inequalities, it will remain just an announcement. A step change is needed, now."

Prof. Rolando D'Angelillo, President of the Italian Society of Uro-Oncology (SIURO), reiterated the importance of multidisciplinarity to ensure equity and quality in care, recalling that active surveillance was introduced ten years ago thanks to specialist collaboration. He stressed the fundamental role of each professional, such as the radiologist, along the care pathway and the importance of creating discussion spaces among all actors involved in male health. The hope is to set up a structured national table on prostate cancer screening capable of systematising existing experiences and expertise.

"Multidisciplinarity is the most concrete way to ensure equity and quality of care. Ten years ago, we introduced active surveillance, and we have seen how important it is for specialists to work together. Only in this way can we offer patients valid therapeutic alternatives, wherever they are. Sitting around a table with all stakeholders involved in male health and oncological prevention is undoubtedly a valuable opportunity."

The discussion was enriched with contributions from Parliament members.



Hon. Gian Antonio Girelli (Democratic Party), member of the Social Affairs Commission and President of the Prevention Intergroup, highlighted the central role of politics in listening to science and translating it into concrete actions. He stressed that without an effective prevention strategy, the right to health risks remaining formal. With prostate cancer expected to double by 2040, awareness, culture, and information are needed from a young age. Girelli finally emphasised the importance of working together with professionals, associations, and patients to build a structured response to this health emergency.



"Our task, as politicians, is also to listen to science and turn it into action. Without a strong prevention policy, the right to health risks remaining just on paper."

Senator Ylenia Zambito (Democratic Party), Secretary of the Senate Social Affairs Commission, also spoke, highlighting the progress made in prostate cancer care – from robotic surgery to the multidisciplinary approach – but also the persistent regional inequalities in access to care. She reiterated that prevention cannot be sacrificed and that better organisation of resources, including through supplementary funds, can strengthen it without penalising the public system. She also shared a touching personal experience that motivates her to commit even more to this issue.

"There is still much to be done, and it is unacceptable that a patient's chances of recovery depend on the region they live in. Resources must be reorganised to strengthen prevention."

Dr Manuela Tamburo de Bella, Head of the Simple Operational Unit (UOS) Hospital Networks of the National Agency for Regional Health Services (AGENAS) and Coordinator of the Observatory for Monitoring Regional Oncology Networks, also spoke. She presented data from AGENAS monitoring of oncology networks, expressing full support for extending screening to prostate cancer, in line with the 2022 European Council Recommendations. She highlighted the importance of targeting screening at a selected population to optimise resource use and ensure effectiveness, stressing that such pathways must necessarily be integrated into regional oncology networks.

"I fully support extending screening to prostate cancer, but it must be targeted at a selected population with specific characteristics to ensure optimal resource organisation."

The final panel focused on regional initiatives implemented so far in terms of secondary prevention for prostate cancer. In his speech, **Dr Danilo Cereda, Head of the Prevention Unit of the Lombardy Region**, illustrated the approach adopted by the Region, which since November has launched a pilot programme for voluntary screening for prostate cancer. The pathway starts with an online questionnaire for eligibility assessment, followed by a PSA test in regional laboratories for those eligible. Depending on the result and family history, patients may be referred for further investigations (urological examination, MRI, biopsy) or follow-up. To date, about 4,700 citizens have participated, and over 1,000 PSA tests have been performed. The goal is to develop sustainable screening, avoiding unnecessary treatments and optimising the use of available resources, aiming to introduce active invitations in the future.



"The goal is to offer sustainable screening, avoiding unnecessary treatments and considering available healthcare resources. The initial data is helping us better understand spontaneous participation and the potential for programme expansion. After this initial phase, we aim to introduce active invitations, as already happens for other cancer screenings."

The discussion further explored an important project initiated in the Apulia Region.

Prof. Giuseppe Carrieri, Dean of the Faculty of Medicine at the University of Foggia and Director of the Complex Urology Structure at the Foggia University Hospital, presented the first pilot study on prostate cancer screening in the Province of Foggia, targeting 100,000 men aged 50 to 70 and funded with university funds. The initiative, unique in Southern Italy, has already seen good participation, although male participation remains lower than female participation. The project aims to reduce territorial inequalities and support the inclusion of screening in the Essential Levels of Care (LEA), hoping for concrete institutional commitment.

"As often happens, male participation in oncological screenings remains significantly lower than female participation, reflecting a general lower attention of men towards prevention. This is a unique initiative in Southern Italy."

For the Piedmont Region, Dr Mario Airoldi, Coordinator of the Hospital Area of the Piedmont and Aosta Valley Oncology Network, and Prof. Massimo Aglietta, Coordinator responsible for the strategic directions of the same Network, spoke.

Dr Airoldi announced the launch of a pilot study on prostate cancer screening inspired by the Lombardy model, which will involve about 4,500-5,000 men aged 55 to 65, with a PSA threshold of 3 to access further diagnostic investigations. The project will initially be limited to a single Local Health Authority but could represent a first step towards regional expansion. Prof. Aglietta highlighted the organisational challenges related to the impact on healthcare facilities, particularly the availability of MRIs, emphasising the need to rethink the national cancer screening system with more resources, cultural change, and greater regional responsibility.

"Prostate screening needs to be expanded, but the entire national screening system needs to be overhauled, with more resources, a different healthcare culture, and greater regional responsibility."

Dr Antonella Cardone, CEO of Cancer Patients Europe, then highlighted that, beyond differences between European countries, there are also significant inequalities within individual member states, as clearly emerged from the interventions of regional representatives.



"In the same nation, access to diagnosis, care, or prevention can change drastically from one region to another. This is a challenge we can no longer ignore".

Dr Giuseppe Gorini, Head of the simple evaluation structure screening of the Institute for the Study, Prevention, and Oncological Network - ISPRO, then illustrated the project presented to the CCM, the Centre for Disease Control and Prevention of the Ministry of Health, involving a consortium of Institutes coordinated by the Florentine Institute ISPRO, the Institute for the Study, Prevention, and Oncological Network, which aims to investigate the feasibility of organised prostate screening programmes in Italy. The project aims to overcome the current opportunistic approach, still too dependent on individual doctor discretion. The goal is to build a pathway based on innovative tools such as risk stratification, multiparametric MRI, and active surveillance, reducing unnecessary treatments and complications. Data and interviews will investigate the real use of PSA in Italy, often inappropriate today, and patients and stakeholders will be involved through a participatory forum to define a shared and sustainable screening model.

Dr Marco di Donato, Policy and Project Manager of the European Regional and Local Health Authorities (EUREGHA), illustrated the work carried out in collaboration with the Committee of the Regions within the European Cancer Plan, with a specific focus on screening. He highlighted the central role of regions in innovation and experimentation, stressing the importance of inclusive governance involving all stakeholders, with the support of political decision-makers, to identify obstacles and opportunities in prevention. He also highlighted how EUREGHA is committed to connecting the regional level to existing major frameworks, such as the National Cancer Mission Hubs, contributing to integrating research and policy. In view of the next financial framework, he hoped for more territorial, coordinated, and synergistic health policies, capable of better valuing resources and ensuring greater coherence in European action.

The regions represent true laboratories of experimentation: bringing their best practices to the European level adds enormous value. We hope that in the future, there will be more opportunities to exchange experiences and opinions.





Prof. Hendrik closing, Poppel, member of Let's Talk **Prostate Cancer and EAU Policy** Office Chairman of the European Association of Urology (EAU), concluded the proceedings bringing the greetings of the Expert Group Let's Talk Prostate Cancer and thanking for the opportunity to represent a public health issue that cannot be ignored in an institutional setting. Prof. Van Poppel illustrated the work of the Expert Group and

showed where Italy stands in terms of the spread of prostate cancer and ongoing projects, while also presenting the European project **PRAISE-U** (Prostate Cancer Awareness and Initiative for Screening in Europe), funded by the European Union and led by the **European Association of Urology**. The project aims to develop a **screening model for prostate cancer** that can be adopted across **all EU Member States**, promoting early diagnosis and improving patient outcomes through harmonized and evidence-based strategies.

"For prostate cancer, we need to act on three fronts: recognizing it as a priority, reducing territorial inequalities, and focusing on early diagnosis and timely access to care. Italy currently has a low mortality rate, but the data indicates it will increase.

Now is the right time to invest, not to wait.""



Relevant outcomes

All speakers, including the Moderator, expressed great appreciation for the value of the discussion, considering it an extremely useful debate, made even more effective by the live streaming on the official website of the Chamber of Deputies.

Many organisations involved, including SIU, EUPATI, EUREGHA, and the CPE led by Antonella Cardone, provided very positive feedback, highlighting strong interest from their members and colleagues, as well as the quality and variety of the interventions.

Hon. Girelli informed us that he would like to continue the journey and bring the issue to the attention of Parliament through a parliamentary act, specifically by presenting a parliamentary motion.

Event Pictures: Link