



On Equality  
in Beating  
Cancer

# Patient rights in the EU – main provisions of EU patient rights that are mostly breached by unequal cancer care

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**PwC Legal**  
Zvērinātu advokātu birojs

# Patient rights in the EU – main provisions of EU patient rights that are mostly breached by unequal cancer care



The European Code of Cancer Practice

**Equal Access** - To **affordable** and **optimal** cancer care, including the right to a second opinion.

- **The European Charter of Fundamental Rights. Human rights/Patient rights.**
- **The European Code of Cancer Practice**
- **The «Cross-Border Healthcare»**
- ECC Bill of Rights

**Main provisions of EU patient rights that are mostly breached by unequal cancer care and patients' rights at risk.**

Patients' rights and opportunities to defend their rights at national and European level. **Efficiency?**

**Initiatives.**

Cross – border healthcare – evaluation of patients' rights.

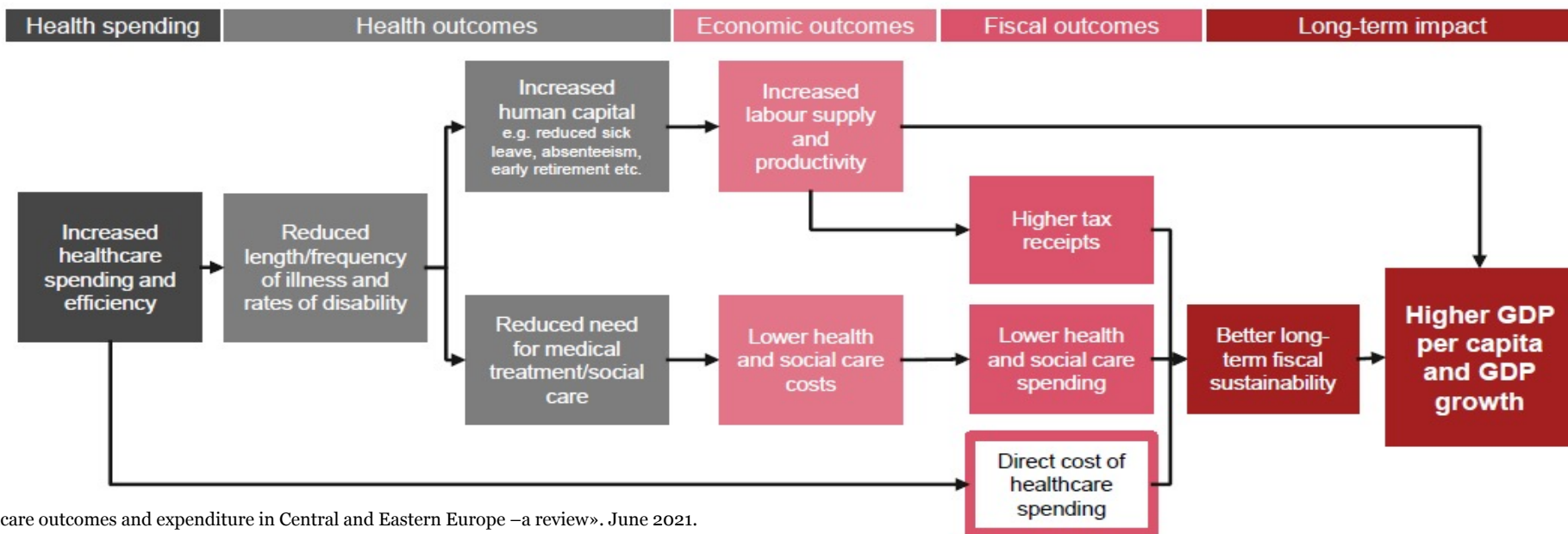
What changes should be made? What can we do at national and European level?

# PwC «Healthcare outcomes and expenditure in Central and Eastern Europe –a review». EFPIA.

**Summary of the case for change:** More spending on healthcare and better healthcare policies lead to superior health, economic, and fiscal outcomes

**A healthier population is more productive and has fewer social and healthcare costs**

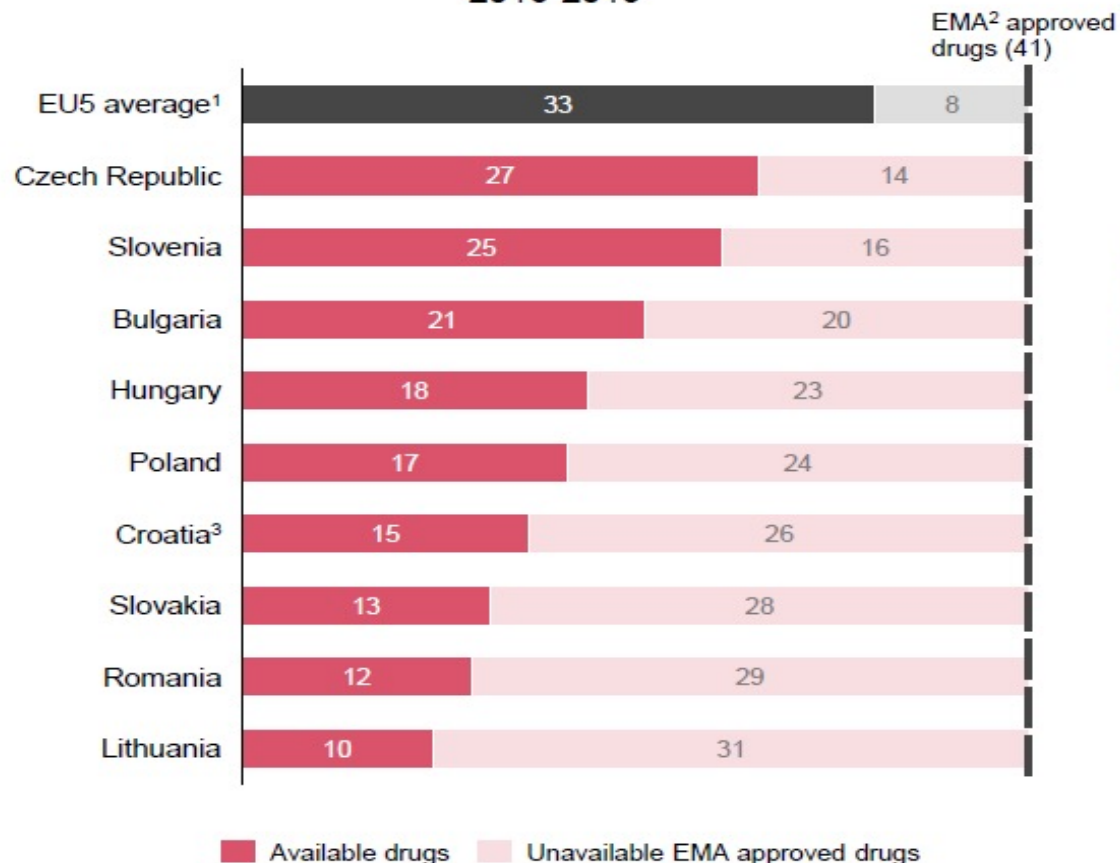
- Healthcare policies and spending affect health outcomes within a country, **whether positively or negatively**. The health of the population in turn affects future economic and fiscal outcomes, through the channels shown below.
- When assessing the **economic and fiscal impacts** of healthcare spending or policy changes, the effects through all of these channels should be taken into account; not only the direct cost of the new policy or additional spend.
- However, the **full economic and fiscal impact is often underestimated**, but when the potential impact is observed across all channels it is clear there is significant opportunity.



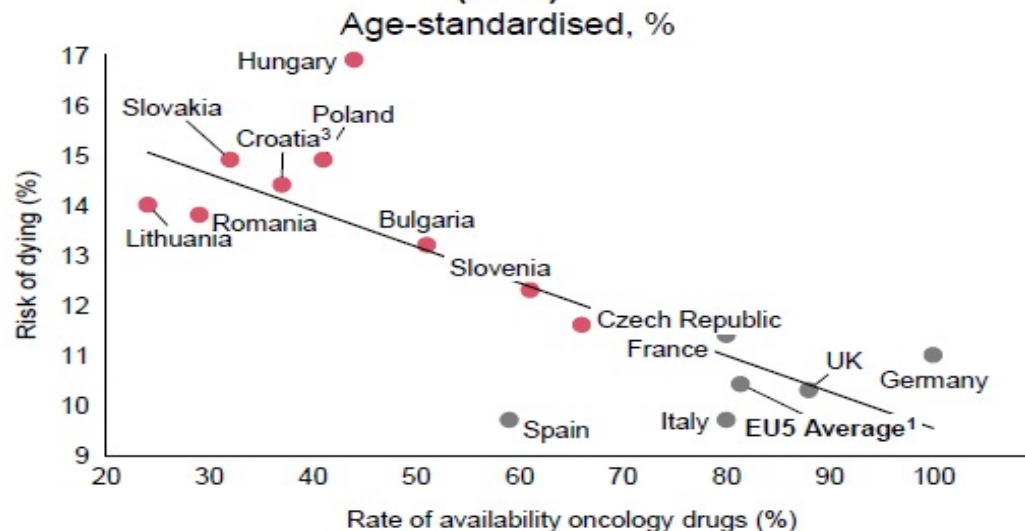
# Poorer access to innovative therapies is often linked to poorer health outcomes, for example in oncology

**Patients in the EU5 had access to almost twice as many new oncology drugs as those in CEE and had a much lower risk of dying from cancer**

**W.A.I.T Indicator: Availability of new oncology drugs  
2016-2019**



**W.A.I.T Indicator: Rate of availability of new oncology  
drugs (2016-19) compared to risk of dying from cancer  
(2018)**

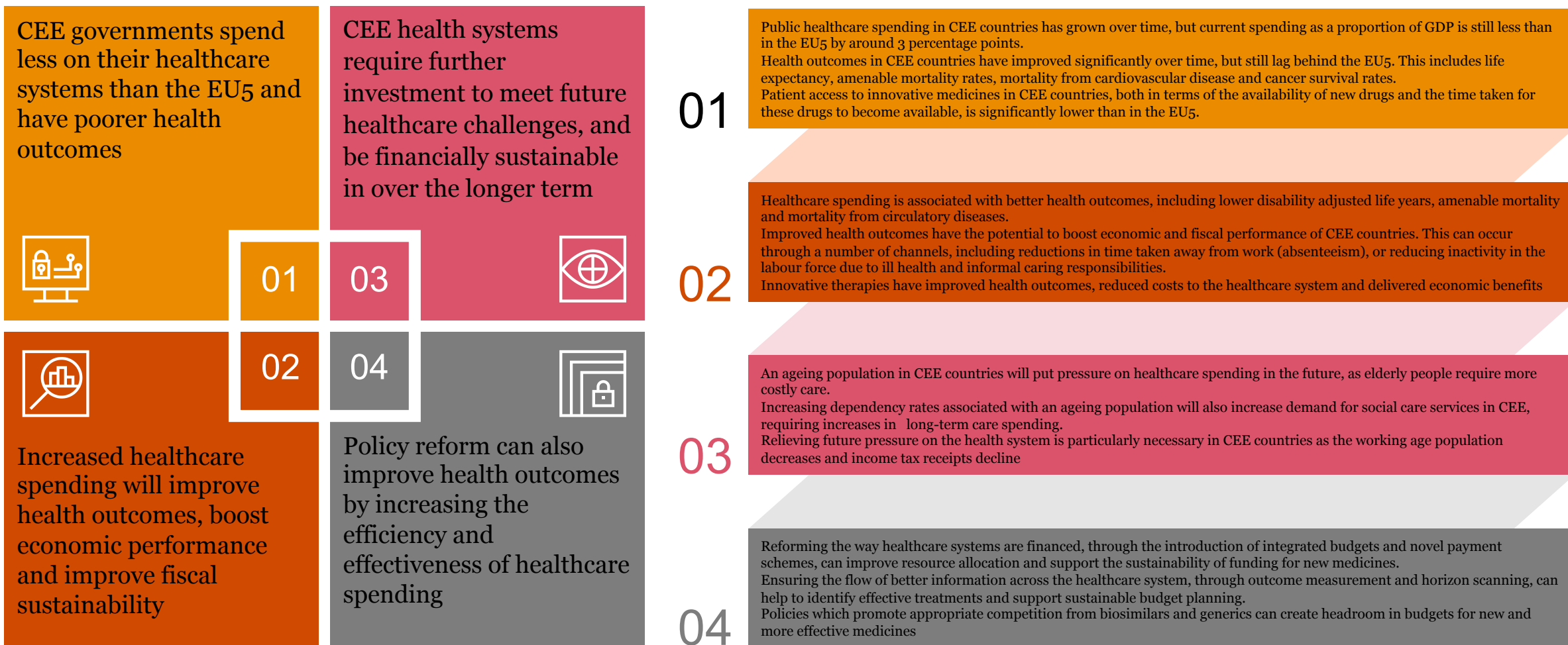


## Methodology

**Risk of dying from cancer** – The cumulative probability of dying from cancer, expressed as the % of newborn children who would be expected to die from cancer before the age of 75, assuming a constant rate of cancer incidence as observed in the period of observation and in absence of competing causes of death. It is estimated using age-specific rates and therefore not influenced by differences in age structures.



# PwC «Healthcare outcomes and expenditure in Central and Eastern Europe –a review». EFPIA study.



# Thank you!



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PwC study for EFPIA – «Healthcare outcomes and expenditure in Central and Eastern Europe –a review», June 2021.  
Available - <https://www.efpia.eu/publications/downloads/health-outcomes/healthcare-outcomes-and-expenditure-in-central-and-eastern-europe-a-review/>

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