



POLICY RECOMMENDATIONS

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PRIORITISING SCIENTIFIC INNOVATION AND DEVELOPMENT

RECOMMENDATION 1

To drive innovation in **Radioligand Therapies (RLTs)**, it is essential to **secure private and public funding** for academic and pre-clinical research to **bridge the current gap** between **research and clinical practice**, facilitating the translation of new therapies into cancer care. At the same time, initiatives such as the **Innovative Health Initiative (IHI)** can support building public-private partnerships on RLTs, potentially through targeted topic funding.

RECOMMENDATION 2

To **accelerate development** in targeted cancer treatments, **researchers** must be provided with the **necessary resources**. Sustained financial support is essential to expand research into new medical isotopes. This should involve targeted and ongoing funding from the EU's Cancer Mission and the **EU Research and Innovation Framework Programmes (i.e. Horizon)**.

RECOMMENDATION 3

To ensure **scientific advancement in integrating RLTs into cancer care** it is urgent to **financially reinforce and incentivise the reliable supply of radioactive isotopes and ligands**. A robust and dynamic EU infrastructure which guarantees the availability of research materials can enable faster development of new therapeutic applications of RLTs.

STRENGTHENING WORKFORCE SKILLS

RECOMMENDATION 4

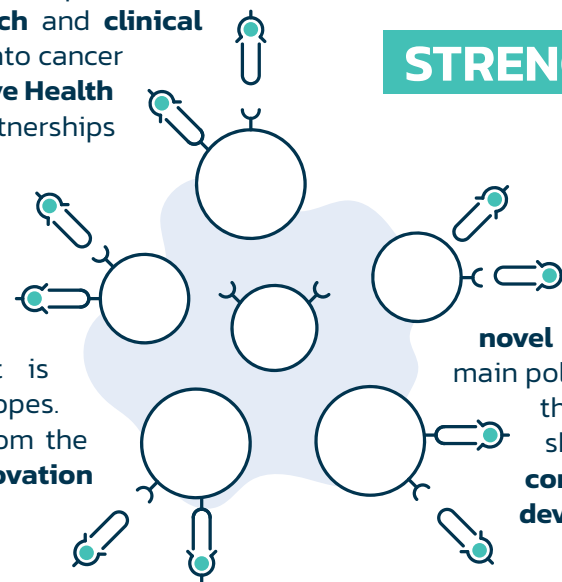
By supporting the creation of **personalised and innovative patient pathways**, RLTs can be better integrated into **enhancing accessibility and treatment options for cancer patients** from an early stage to follow-up care. In this sense, increasing the number of accredited RLTs centres is necessary to ensure that patients receive the most effective and safe available treatment.

RECOMMENDATION 5

Recognising the **clinical interest and potential benefits of RLTs is critical**. To do so, **educating and training** healthcare professionals on RLTs to further expand this **novel therapy across the European Union (EU)** should be a main policy priority as it ensures that the European workforce is at the forefront of cancer care innovation. **RLT workforce** should be considered and included in any future **comprehensive approach to the healthcare workforce developed by the European Commission**.

RECOMMENDATION 6

Cancer is a disease with multiple variations, stages, and prognoses. **Shaping educational programs** to include comprehensive **RLT training for healthcare providers** can **boost the integration of RLTs** into the **national healthcare systems**, improving patient outcomes and quality of life.



RECOMMENDATION 7

Strengthen implementation science in the **field of RLTs**. **Real-world evidence** can provide valuable feedback loops to various elements of healthcare systems as it can support the **refinement of practices and guidelines** based on the latest scientific data. This process serves in assessing the opportunities and needs of each cancer patient, including their treatment with RLTs. At the same time, **real-world monitoring systems** should be considered to better understand the European workforce landscape active on RLTs and to assist with training and planning.



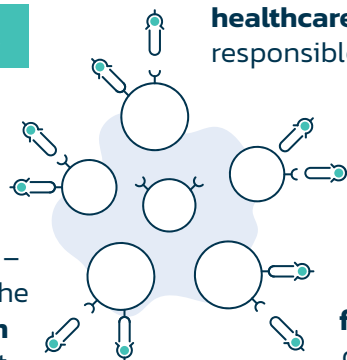
RECOMMENDATION 8

The **development and dissemination** of both written and online **guidelines** to ensure the **highest level of quality in the implementation of RLTs** for **healthcare professionals** is **critical**. Certified accreditation system should be placed to standardise and measure the level of expertise of healthcare providers specialised in RLTs.

INTEGRATING RLTs ACROSS POLICIES

RECOMMENDATION 9

The **current European legal frameworks that govern RLTs are fragmented** across different texts and levels. This impacts all sectors – as the frameworks do not adequately reflect the realities in the healthcare setting. **Misalignment and unclarity** in the **EU legislation** ultimately **delay patients' access to RLTs**. As such, ensuring that **national and European regulations are harmonised**, and standardisation is promoted across regions is critical. Additionally, to bring promising therapies, such as RLTs, regulatory bodies should faster assess medicines and expedite approvals.



RECOMMENDATION 10

As **RLTs demand will grow exponentially in the upcoming decade**, RLTs must be **integrated** into **National Cancer Plans** to offer patients the best therapy available. RLTs should be recognised as a key **component in each of the Member States' cancer plans**, emphasising the importance of comprehensive cancer care strategies. The running implementation of **Europe's Beating Cancer Plan should also reflect on the availability and use of RLTs across Europe**. Increased RLTs availability should be addressed through the **EU Critical Medicines List** and the **Joint Clinical Assessments** from the **Health Assessment Regulation**, in which RLTs should benefit from specific workstreams for Radiopharmaceuticals.

RECOMMENDATION 11

To ensure the **financial feasibility** of RLTs for **patients and healthcare providers** and with the aim of their **full integration into national healthcare systems**, **reimbursement-independent bodies** specifically responsible for **radiopharmaceuticals** must be created.

RECOMMENDATION 12

To advance and ensure the **integration of innovative therapies** such as **RLTs** within the healthcare community, it is indispensable to **disseminate innovative cancer research findings and treatment methodologies for new therapies**. To do so, targeted educational initiatives, **interdisciplinary collaborations**, and the utilisation of digital platforms, such as the **European Health Data Space (EHDS)**, are key to **ensuring widespread awareness** and adoption of **RLTs** across **healthcare policies**.

