



Statistics and history

- [EBCC history](#)
- [EBCC statistics](#)
- [EBCC-5 report](#)

EBCC History ▲

While there were already a large number of separate opportunities for sharing ideas and experience about specific aspects of breast cancer, no single European forum existed where the views of all the major players could be expressed and discussed. Discussions about the development of such a forum started in the early nineties with the idea to extend the former EORTC Breast Cancer Working Conference. In June 1995, at a meeting hosted by Umberto Veronesi and attended by representatives of the three organising groups and the Federation of European Cancer Societies, the plans were finalised and the idea of a European Breast Cancer Conference (EBCC) was born.

Umberto Veronesi and Emmanuel van der Schueren were the guiding lights behind the conference concept. In recognition of the latter's personal contribution to the development of the concept and organisation of EBCC, an Emmanuel van der Schueren memorial lecture is given on each occasion the conference is held.

EBCC is sponsored by the Breast Cancer Group of the European Organisation for Research and Treatment of Cancer (EORTC), the European Society of Mastology (EUSOMA) and Europa Donna - the European Breast Cancer Coalition and is organised under the co-ordinating umbrella of the Federation of European Cancer Societies. The conference includes presentations on all aspects of breast cancer, such as new developments in

basic science and treatment modalities, prevention, screening and diagnosis, psychological and social issues, the role of complementary therapies, quality of life, the role of patient advocates, and the impact of breast cancer on families, communities and society.

In 1998, the first European Breast Cancer Conference (EBCC-1) took place in Florence (29 September-3 October) under the Chairmanship of Professor Luigi Cataliotti. This first conference attracted 3.003 participants from 74 countries. At the conference, delegates voted for the "[Florence Statement](#)", setting out their vision and priorities for the future in research, treatment and care of breast cancer.

EBCC-2 was held in Brussels (26-30 September 2000), chaired by Professor Martine Piccart. The conference attracted 2.892 delegates. The "[Brussels Statement](#)" confirmed the priorities agreed at EBCC-1 and set the agenda for the future activities of the three major groups involved in breast cancer research, treatment, prevention and advocacy.

At EBCC-3, held in Barcelona (19-23 March 2002) a record number of participants has been registered: 3.745 from 78 different countries worldwide. The conference, hosted by Dr. José Baselga, concluded with a debate on threats to cancer research, preceded by a satirical play entitled 2084, written by Professor Michael Baum, the Conference Chair. The debate explored broadly the growing regulatory requirements in the field of clinical research and discussed abuse, education (both of consumers and politicians), bureaucracy, advocacy and the recruitment of young scientists and of patients. After the conference, a working group developed the "[Barcelona Statement](#)", that was drawn up on the issues discussed during the debate.

The 4th European Breast Cancer Conference, chaired by Prof. Jacek Jassem, co-chaired by Dr. Mary Buchanan and hosted by Professor Fritz Jänicke, was held in Hamburg between 16-20 March 2004. The conference attracted 3,599 delegates from 82 countries and built upon previous EBCC's in presenting the best of breast cancer research, treatment and advocacy through a high-profile platform that attracted attention from around the world. The delegates at EBCC-4 voted on the "[Hamburg Statement](#)" and it is hoped that this document will continue the drive towards better breast cancer care in Europe that previous EBCC's have begun.

The European Breast Cancer Conference has become a unique conference, which encourages interaction between clinicians and patient groups. It brings together doctors, scientists, and patient advocates to talk not just about the latest scientific advances, but also the ethical, moral, social and practical issues concerned with caring for patients with breast cancer.

EBCC Statistics ▲

EBCC-5 (Nice, 21 - 25 March 2006)

Top 10 / country Country

Country	Number of delegates
Italy	426
United Kingdom	403
Belgium	277
France	243
The Netherlands	195
Switzerland	151
Sweden	142
Greece	142
Austria	137
Poland	132
Others	1765
Total number of participants	4830
Total number of countries	90

EBCC-4 (Hamburg, 16 - 20 March 2004)

Top 10 / country

Country	Number of delegates
Italy	354
Germany	338
United Kingdom	326
Belgium	189
The Netherlands	167
Switzerland	137
Austria	122
Poland	110

Spain	108
Portugal	108
Others	1640
Total number of participants	3599
Total number of countries	82

EBCC-3 (Barcelona, 19 - 23 March 2002)

Top 10/ country

Country	Number of delegates
Italy	475
United Kingdom	465
Spain	317
Germany	210
Belgium	199
USA	142
The Netherlands	140
Portugal	111
Sweden	105
Switzerland	100
Others	1481
Total number of participants	3745
Total number of countries	78

EBCC-2 (Brussels, 26 - 30 September 2000)

Top 10/ country

Country	Number of delegates
United Kingdom	364
Italy	327
Belgium	288
Germany	157
The Netherlands	128
France	119
USA	91
Poland	89
Spain	84
Japan	75
Others	1170
Total number of participants	2892
Total number of countries	79

EBCC-1 (Firenze, 29 September - 3 October 1998)

Top 10/ country

Country	Number of delegates
Italy	469
United Kingdom	292
France	256
Germany	185
Belgium	180
Spain	123
The Netherlands	110

THE NETHERLANDS	110
Japan	103
Portugal	81
USA	77
Others	1127
Total number of participants	3003
Total number of countries	74

EBCC-5 report ▲

5th European Breast Cancer Conference, Nice 21st - 25th March 2006

The 5th European Breast Cancer Conference and it's wonderful setting in Nice provided an exciting forum for over 5,000 oncologists, radiotherapists, surgeons, nurses and patient advocacy groups to meet, present and discuss their latest news and key issues.

Delegates witnessed and deplored the diversity of diagnosis and treatment across Europe. Many felt that continuing to lower the breast cancer mortality rate would only be feasible if screening programmes, prevention strategies and best-treatment were universally offered across Europe. The patient advocacy groups continue their fight for equity of access in all aspects of care - and for breast cancer unit accreditation.

Investigating the bio-mechanics of breast cancer and

individualising the disease in certain age groups was a key issue. For instance EBCC-5 reported a large increase in data and effective new strategies for finding new genes. Equally encouraging, was the independent validation of the original raft of prognostic gene signatures.

Thankfully, traditional screening programmes continue to save around 18,000 lives each year. However, MRI screening for mutation carriers, BRCA1/ 2 is at least 10% more effective than mammography and clinical breast examination only. It can also provide valuable additional information and minimises false alarms.

The conference had an onus on life-style advice: cutting down on alcohol, not smoking, maintaining a healthy weight and having children before the age of 30 were all attributable to decreasing the risk of breast cancer. Adding ten minutes of exercise per day to your life-style was said to decrease the risk of getting breast cancer. Two hours of vigorous exercise a day will help prevent further the risk of breast cancer in a woman for the rest of her life.

The impact of surgical techniques on quality of life was also a key issue. Quicker, more conservative and more direct surgery is cost effective with fewer side effects. Breast Conserving Surgery is less invasive, with fewer complications which in turn improves patient quality of life; which appeared to be at the fore-front of EBCC's agenda.

Professor Veronesi from Milan presented the safety data on intra-operative radiotherapy for early breast cancer. If intraoperative radiotherapy (which his group has pioneered), proves equivalent to post operative regimes - typically six weeks of external daily radiation; the socio-economic impact will be immense.

A meta-analysis demonstrated that radiotherapy is an important factor in achieving loco-regional control - and can also significantly influence long-term survival in certain patient groups. So radiotherapy is important!

A molecule causing great interest in the systemic treatment of breast cancer is lapatinib; designed to hit a subset of Epidermal Growth Factor Receptors similar to trastuzumab, cetuximab and gefitinib. The development of lapatinib to block receptors via their tyrosine kinase portions is fuelling optimism. Trials are planned for trastuzumab and lapatinib.

With exciting trials and data shared amongst delegates, the conference drew to a close with the first Nice manifesto announced by the Conference Chair, Dr. Alberto Costa. The manifesto embodied the aims of the conference and is an example of breast cancer doctors collaborating with nurses and patient advocates to improve standards of care and treatment. [Click here to download the manifesto goals.](#)

Thank you for attending and making EBCC-5 such a great success, we look forward to welcoming you to EBCC-6 in Berlin, Germany, 2008

Page last modified: 13 Mar 2008

