precision medicine implementation in cancer

snapshot 2026

version 2.1

Funded by the European Union

PRIME-ROSE

EU Cancer Mission
GA101104269

Impressum PRIME-ROSE

PRIME-ROSE is a project funded by the European Union under the EU Cancer Mission PCM4EU under grant agreement 101104269. The Snapshot 2026 of precision medicine implementation in cancer is an up-date of the Snapshot 2025 that was developed by PCM4EU, a project that ran till June 2025 and that was co-funded by the European Union and Europe's Beating Cancer Plan under grant agreement 101079984.

foreword

Dear Readers,

Precision cancer medicine (PCM) is about treating patients individually based on the tumour's molecular profile and all other information available, and after considering treatment options in a molecular tumour board (MTB).

The PRIME-ROSE project (Cancer Mission GA 101104269, June 2023 – June 2028) has 28 partners in 19 countries and is focussed on access to affordable precision cancer medicine that prolongs life at the best quality possible for all cancer patients. PRIME-ROSE builds on a bottom-up, clinician-initiated family of pragmatic precision cancer medicine clinical trials termed 'DRUP-Like Clinical Trials' (DLCTs) as they follow the original DRUP protocol from the Netherlands. DLCTs have been particularly successful in increasing inclusion rates to offer additional lines of treatment and in providing patient benefit, aggregates data between these trials and organizes new joint cohorts as well as Real-world data control cohorts.

As part of the PRIME-ROSE stakeholder involvement activities and outreach, PRIME-ROSE is now providing the **2026 Snapshot** on precision medicine implementation in cancer for different European countries as of March 2026, going as broadly as possible with respect to countries where we have been able to collect information. The 2026 snapshot is an update of the original 2025 Snapshot with the same name produced by the PCM4EU consortium.

As the network expands with the Joint Action for PCM that started in November 2025 with 145 partners in 29 European countries, we hope that this Snapshot for precision medicine implementation in cancer with a timely overview of the rapidly evolving pcm landscape of in Europe becomes a helpful tool for pcm practitioners, decision-makers and policy makers,

For the PRIME-ROSE Consortium,

Kjetil Taskén
Oslo University Hospital Comprehensive Cancer Centre

PRIME-ROSE Coordinator

PRIME-ROSE
Precision Cancer Medicine Repurposing System Using Pragmatic Clinical Trials

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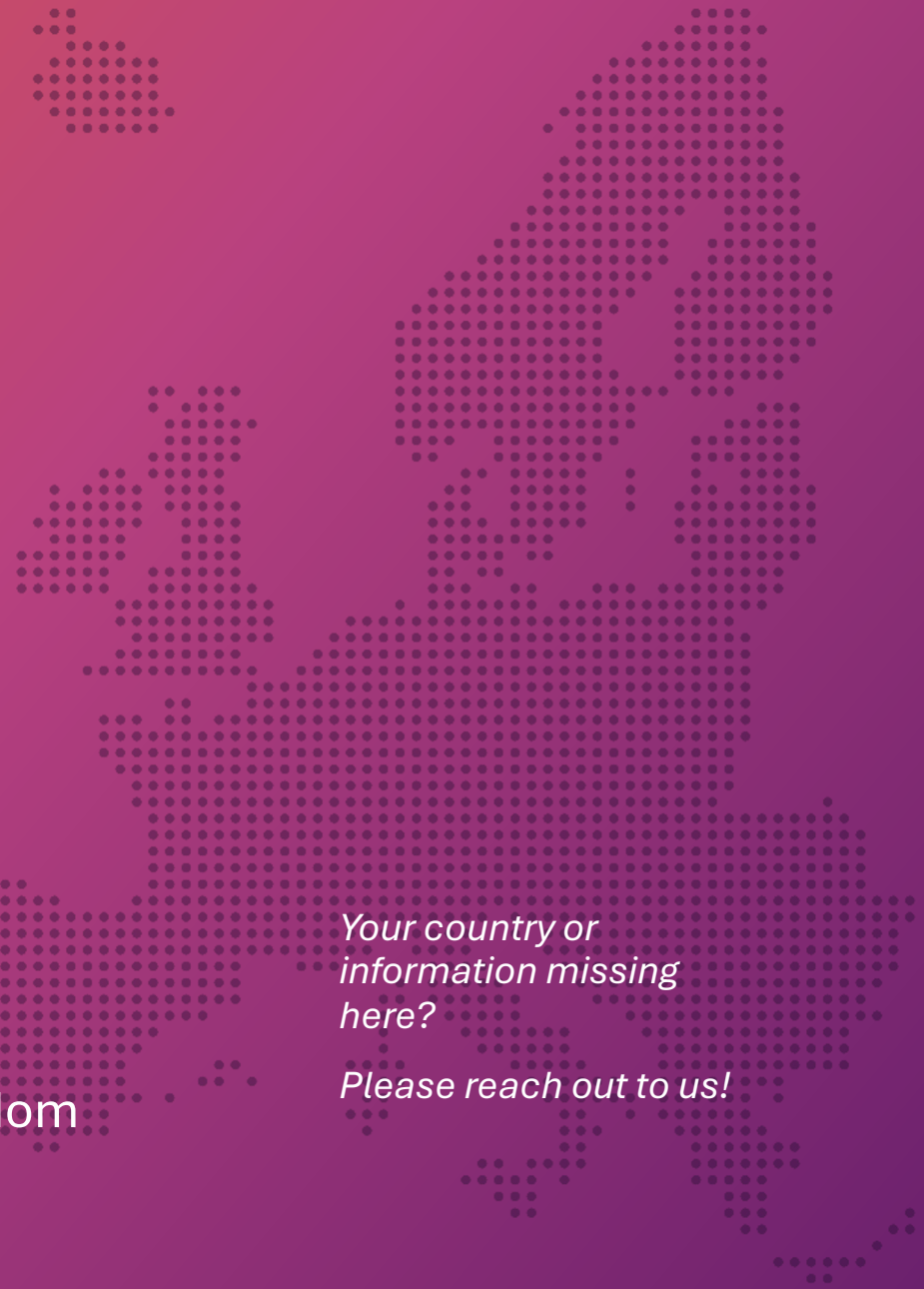
Precision Cancer Medicine implementation in

- Belgium
- Croatia
- Czechia
- Denmark
- Estonia
- Finland
- France
- Germany
- Hungary
- Ireland
- Italy
- Lithuania
- Netherlands
- Norway
- Poland
- Portugal
- Romania
- Spain
- Sweden
- United Kingdom



Your country or information missing here?

Please reach out to us!

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introduction to the current version

The **Snapshot 2026 Precision Medicine Implementation in Cancer report** provides a snapshot of the implementation efforts in precion cancer medicine, pcm, in different EU member states **as of March 2026**.

With this first edition for 2026, the Snapshot 2026 updates the Snapshot 2025 that was produced by the PCM4EU consortium in 2025 to follow the development of precision cancer medicine implementation across Europe. Completed by physicians who are directly involved in national pcm initiatives, such as DRUP-Like Clinical Trials, the snapshot provides true insights of actual accessibility, not only theoretical availability of pcm diagnostics and therapies.

The Snapshot represents a **crowd-sourced resource** thanks to the efforts of many and authors remain responsible for the accuracy of the information provided. Originally created by the precision cancer community as an internal community resource, it captures information deemed relevant by community members at the time of the design of the first Snapshot in 2025. After considerable interest from other stakeholders, in particular, policy-makers, the Snapshot was made public. We do however realise that the snapshot is very dense with technical terms and abbreviations, in particular, with regards to national decision makers and initiatives. In the future, we therefore aim to develop a more accessible version for non-specialists. By necessity, a snapshot captures a moment in time and can neither be extensive nor provide in-depth information. It rather signposts relevant information on precision medicine implementation that at times might be in the planning stage or only be available in national language. We therefore invite you to reach out to the respective **section authors listed** on each country profile for more information.

Countries are listed in alphabetical order and predominantly cover the countries represented in the PCM4EU and PRIME-ROSE consortia. However, we would be delighted to add additional country profiles, so if you are interested to be included, please reach out to bettina.ryll@hhs.se.

The country profiles are part of the PRIME-ROSE Work package 6 Deliverable 6.3 ‘The DLCT ecosystem’. PRIME-ROSE is a project funded by the European Union under the EU Cancer Mission under grant agreement 101104269.

Bettina Ryll

PRIME-ROSE WP6 lead

March 2026

impressum PRIME-ROSE 2026

country profiles

in alphabetical order

Funded by the European Union

PRIME-ROSE

EU Cancer Mission
GA101104269

Author(s)

Gordana Raicevic Toungouz, Aline Hebrant

contact

Gordana.raicevictzoungouz@sciensano.be

date

11 April 2025

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PRIME-ROSE

EU Cancer Mission GA101104269

Belgium

Country Information

Population

~ 11 M

Comprehensive Cancer Centres

2 (OECI certified)

New cancer cases per year

~ 70 000

Precision Cancer Medicine

Does the country have a national PCM initiative? ComPerMed commission and **Precision Initiative** launched by BSMO

Feasibility studies / multi-stakeholder/ extra funding? GENEO and **BALLET** studies for CGP testing

National guidelines on PCM?
ComPerMed: tumor-specific clinical practice guidelines as workflows, updated twice a year.

Does the country have regional PCM initiatives? NO

PCM diagnostics

How is genomic testing organised in your country? Through national framework. Indications outlined in NGS convention. Funded by national health system.

Reimbursement

NGS is reimbursed for certain clinical indications via NGS convention

Molecular Tumour Boards

Multidisciplinary Oncology Consultation (**MOC**) is formal, regulated, and government-funded. National Molecular Tumor Boards (**nMTBs**) for various precision medicine clinical studies involving comprehensive genomic profiling (CGP) testing (not reimbursed)

Access to PCM treatments

Specific reimbursement regulations within **INAMI/RIZIV.** Molecular tests reimbursed according to reimbursement framework

DRUP-Like Clinical Trial

BeDRUP (in preparation)

Challenges

Implementation of CGP in clinical routine, Implement Liquid biopsy, access to innovative drugs

Opportunities

Different EU projects (PRIME-ROSE, JA PCM) and national projects (GENEO 2.0)

Author(s)

Dora Čerina, Eduard Vrdoljak

contact

edo.vrdoljak@gmail.com, dora09cerina@gmail.com

date

April 2025

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PRIME-ROSE

EU Cancer Mission GA101104269

Croatia

Country Information

Population

3.9 M

Comprehensive Cancer Centres

7

New cancer cases per year

28 809

Precision Cancer Medicine

Does the country have a national PCM initiative? Croatian Health Insurance

Feasibility studies / multi-stakeholder/ extra funding? Since July 2019, memorandum of collaboration with Roche on precision medicine implementation

National guidelines on PCM?
Croatian oncological society published guidelines; since 2023, all patients diagnosed with locally advanced or metastatic disease have right to be tested (comprehensive genomic profiling)

PCM diagnostics

How is genomic testing organised in your country? PCM (CGP) is covered by Croatian Health Insurance, new Institute performs CGP, Roche is the vendor who performs the test- currently only for liquid biopsy testing and a limited number of tissue testings

Reimbursement

PCM (CGP) is covered by Croatian Health Insurance, new Institute performs CGP, Roche is the vendor who performs the test currently for only liquid testing and limited number of tissue testings

Molecular Tumour Boards

weekly MTBs, comprised of different disciplines, including clinical oncologists, medical oncologists, pathologists, molecular biologists, biostaticians

Access to PCM treatments

based on MTB recommendation, possible coverage via Croatian Health Insurance or from donations

DRUP-Like Clinical Trial

no but registries for molecular alterations.

Challenges

administrative burden, shortage of personnel, turnaround times, technical and organisational issues

Opportunities

additional treatment options for patients

Author(s)

Radka Lordick Obermannová

contact
radka.obermannova@mou.cz
date
11 March 2026

Funded by the European Union
PRIME-ROSE
EU Cancer Mission GA101104269

Czechia

Country Information

Population

10.9 M

Comprehensive Cancer Centres

1 OECI Comprehensive Cancer Centre

New cancer cases per year

95 551 (2023)

Precision Cancer Medicine

Does the country have a national PCM initiative? Partially yes, the academic platform Genomic Alterations Platform for Next Clinical Studies (GENESIS)

Feasibility study/multi-stakeholder/extra funding: No.

National guidelines on PCM: Comprehensive NGS diagnostics panels are reimbursed according to official national rules for a defined group of patients with advanced/ metastatic cancer.

Does the country have regional PCM initiatives? Yes – through 11 Centers for Personalized Medicine operating at university hospitals and comprehensive oncology centres linked to the GENESIS network.

PCM diagnostics

How is genomic testing organised in your country? Comprehensive genomic testing is reimbursed through public health insurance according to specific reimbursement rules and is performed by both non-profit and for-profit accredited institutions. In the oncological setting, comprehensive genomic panels (such as TSO500 or OncoDeep) are primarily utilized, whereas validated in-house kits are employed less frequently.

Reimbursement

Comprehensive predictive genomic testing (DNA and RNA panel covering a mandatory minimum set of specified gene) is reimbursed for defined clinical indications, including tumour type and disease stage.

Molecular Tumour Boards

Local Molecular Tumor Boards function at comprehensive oncology centers and are voluntarily integrated and coordinated within the GENESIS platform.

Access to PCM treatments

On-label treatment is recommended based on national oncological guidelines available for nationally approved therapies and is reimbursed through public health insurance.
Off-label treatment must be recommended by a Molecular Tumor Board (MTB). Reimbursement rules have not yet been established and is determined individually by health insurance companies, based on a case-specific review of the clinical evidence.

DRUP-Like Clinical Trial

GENESIS-PRO planned (Q3/2026).

Challenges

Implementation of unified national guidelines for personalized cancer medicine.Harmonization of molecular tumor boards across the country with respect to processes and timelines.
Establishment of GENESIS-PRO and DRUP-like trials to evaluate and recommend novel molecularly driven therapies to stakeholders and regulatory agencies for reimbursement decisions.

Opportunities

Establishment of **GENESIS-PRO** as a **DRUP-like trial** to evaluate novel molecularly guided therapies and provide recommendations to stakeholders and regulatory agencies for reimbursement decisions.

Author(s)

Ulrik Lassen, Tina Kringelbach

contact

Tina.Kringelbach@regionh.dk

date

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PRIME-ROSE

EU Cancer Mission GA101104269

Denmark

Country Information

Population

6 M

Comprehensive Cancer Centres

0 (4 in accreditation)

New cancer cases per year

46 000

Precision Cancer Medicine

Does the country have a national PCM initiative? Yes, including a national PCM strategy.

Feasibility studies / multi-stakeholder/ extra funding? public and private funding; diverse feasibility studies

National guidelines on PCM? in progress

Does the country have regional PCM initiatives? Yes

PCM diagnostics

How is genomic testing organised in your country? Public/ private vendors/ private initiatives- centralised vs distributed : Public and centralised

Reimbursement

Everything is reimbursed

Molecular Tumour Boards

A weekly, national MTB and a monthly Nordic MTB

Access to PCM treatments

- Pts with advanced cancer are offered NGS test
- Results are discussed at weekly MTB
- Treatment proposal based on findings: DLCT, pharma-sponsored trials or in rare cases, off-label treatment
- Fully reimbursed

DRUP-Like Clinical Trial

ProTarget: https://protarget.dk/

https://pubmed.ncbi.nlm.nih.gov/36814246/

Challenges

Running out of drugs for the trial

Opportunities

Collaboration within PRIME-ROSE and JA-PCM

Author(s)

Anni Lepland, Tiina Kahre, Kristiina Ojamaa

contact

anni.lepland@ut.ee

date

03 March 2026

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PRIME-ROSE

EU Cancer Mission GA101104269

Estonia

Country Information

Population

1.4 M

Comprehensive Cancer Centres

0 comprehensive, 1 OECI accredited, 2 associated OECI

New cancer cases per year

9843 (2023)

Precision Cancer Medicine

Does the country have a national PCM initiative? Estonian Cancer Control Plan includes PCM under medical oncology and diagnostics (MTB, NGS testing); long term personalised medicine plan, not specific to cancer, paragraph on PM network

Feasibility studies / multi-stakeholder/ extra funding? Funding difficult, feasibility study of implementing PRS into breast cancer screening

National guidelines on PCM? Guidelines on molecular diagnostics, national cheatsheet for oncologists in works, national ctDNA testing guideline developed in 2026.

Does the country have regional PCM initiatives? All national

PCM diagnostics

How is genomic testing organised in your country? Tartu University Hospital provides centralised molecular testing, TSO500+HRD+PanCancer fusion panel; single gene testing decentralised; ctDNA testing validation ongoing.

Reimbursement

Molecular profiling reimbursed for all cancers; all ovarian and endometrial cancers are tested, other cancers tested based on need

Molecular Tumour Boards

MTB running since 2021, collaboration between different hospitals and University of Tartu. Professions included (but not limited to): oncologists, molecular diagnostics specialists, pathologists, associated professor in bioorganic chemistry, molecular immunologist. Meetings biweekly, hybrid format

Access to PCM treatments

Specialist organisations or pharmaceutical companies filling form (drug, indication) → evaluation by Estonian Health Insurance Fund → decision takes up to 2 years

Open access, Gift of Life foundation

DRUP-Like Clinical Trial

ESTOPRET – the Estonian Precision Oncology trial, will start in Q3 2026

Challenges

- Lack of funding, uncertanties in funding
- Attractiveness to pharmaceutical companies
- Workforce issues: dedicated time, more specialists needed
- Need new funding schemes for PCM treatments

Opportunities

- Creation of Estonian Cancer Network ESTCAN
- Taskforce to improve access to innovative cancer drugs
- ESTOPRET = opportunities
- Excellent molecular testing

Author(s)

Tanja Juslin, Katriina Jalkanen

contact

tanja.juslin@hus.fi, katriina.jalkanen@hus.fi

date

March 2026

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PRIME-ROSE

EU Cancer Mission GA101104269

Finland

Country Information

Population

5.5 M

Comprehensive Cancer Centres

1 + 3 (5 university hospitals)

New cancer cases per year

All cancers: 37 712 (2022)

Precision Cancer Medicine

Does the country have a national PCM: Yes, FINPROVE study runs in all 5 University hospital.

Feasibility study/ multi-stakeholder/ extra funding: No.

National guidelines on PCM: In progress. First draft written.

Does the country have regional PCM initiatives: Not outside of FINPROVE.

PCM diagnostics

How is genomic testing organised in your country? Each region has their own diagnostic tests – lack of national guidance and reimbursement. Costs covered by each hospital

Reimbursement

Only standard of care is reimbursed – fully dependent on tumour type and mainly covers only EMA approved drugs.

Molecular Tumour Boards

Regional MTBs run in 4 sites, National through Helsinki.

Access to PCM treatments

Off-label use is not possible. Patient specific applications can be used but are not accepted unless strong rationale (at least phase 2 data). Funding through hospital budget. National mechanisms do not exist.

DRUP-Like Clinical Trial

FINPROVE, **www.hus.fi/finprove**

Challenges

Lack of sustainable funding, national guidance and national network for comprehensive genomic profiling.

Opportunities

Structured network for collaboration within all hospital districts – applies to both university and regional hospitals. The importance of PCM is well understood. Cancer strategy finalized covering PCM.

Author(s)

Loic Verlingue, Gilly Spurrier-Bernard

contact
Loic.VERLINGUE@lyon.unicancer.fr

date
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PRIME-ROSE

EU Cancer Mission
GA101104269

France

Country Information

Population

68 M

Comprehensive Cancer Centres

18

New cancer cases per year

433 136

Precision Cancer Medicine

Does the country have a national PCM initiative? Yes (PFMG2025)

Feasibility studies / multi-stakeholder/ extra funding? Yes, government

National guidelines on PCM?
Diagnostic PFMG2025, treatments HAS

Does the country have regional PCM initiatives? Yes (eg PROFILER at CLB, FRESH at GR)

PCM diagnostics

How is genomic testing organised in your country? mostly public, some private, distributed. Only centralized are PFMG2025 and PRISM (foundation medicine)

Reimbursement

not consistent; hospitals can partially get reimbursement for the test through the RIHN but under considerable administrative burden

Molecular Tumour Boards

Local MTBs in several hospitals centralizing cases

Some Regional MTBs, e.g. CLB for Rhône Alpes Region

SupraNational MTBs, for e.g CGI-clinics

Access to PCM treatments

Approvals + reimbursements or Early access or Clinical trials or Off-label

DRUP-Like Clinical Trial

MOST, MOST plus, MEGAMOST

https://pubmed.ncbi.nlm.nih.gov/38807312/

SHIVA, SAFIR (completed)

Challenges

number and variety of trials options

Opportunities

Cross-border access, visibility for pharmas, networking, trial matching tools, funding, vision

Author(s)

Albrecht Stenzinger

contact
albrecht.stenzinger@med.uni-heidelberg.de

date
30 April 2025

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PRIME-ROSE
EU Cancer Mission
GA101104269

Germany

Country Information

Population

84 M

Comprehensive Cancer Centres

15 excellence centres (7 involving several univ. hospital/city); 27 major centres

New cancer cases per year

493 000

Precision Cancer Medicine

Does the country have a national PCM initiative? YES- German Network for Personalized Medicine (DNPM), National Network Genomic Medicine (NNGM), NCT One, GenomDE-Model Project

Feasibility studies / multi-stakeholder/ extra funding? YES- within the DNPM network

National guidelines on PCM?
YES – on a national level, usually cancer-type specific; and within DNPM

Does the country have regional PCM initiatives? YES-Based on local Centers for Personalized Medicine (ZPM) within the DNPM network

PCM diagnostics

How is genomic testing organised in your country? Testing is reimbursed through public and private health insurance

Carried out by both non-for-profit and for-profit institutions

(WES and WGS only through non-for-profit institutions)

Reimbursement

Single gene testing and panel sequencing; WES and WGS in a 5-year evaluation period within the model project

Molecular Tumour Boards

Clinically: Mainly local MTB

Research Programs: Partly within national networks (e.g. DKTK MASTER)

Access to PCM treatments

On Label: Treatment is granted according to EMA and HTA-body decisions

Last line: Decision in MTB => i) off-label treatment or ii) inclusion in clinical trial

DRUP-Like Clinical Trial

DNPM nationwide trial structure (in progress)

DKTK-MASTER (young onset/rare cancers)

Challenges

Access to reimbursement for testing is still suboptimal
Access to testing has regional differences
Suboptimal clinical trial landscape

Opportunities

- Improvement of clinical trial infrastructure in Germany
- Broader access to standardized testing
- Awareness for patients

Author(s)

Attila Patocs

contact

patocs.attila@oncol.hu

date

08 March 2026

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PRIME-ROSE

EU Cancer Mission GA101104269

Hungary

Country Information

Population

9.5 M

Comprehensive Cancer Centres

1

New cancer cases per year

70 000

Precision Cancer Medicine

Does the country have a national PCM initiative? Yes. **Feasibility studies / multi-stakeholder/ extra funding? Yes, coordinated by the goverment**.

National guidelines on PCM?
In 2021 the National Molecular Oncoteam was established by NEAK, the National Institute of Health Insurance Fund Management. All comprehensive genetic profiling and treatments are covered by this fund.

Does the country have regional PCM initiatives? All regional precision cancer medicine applications are evaluated by NEAK, all regional patient–centered application are evaluated by National MTB.

PCM diagnostics

How is genomic testing organised in your country? In oncology, the majority of tests are performed within the public health system, and it is centralised. The main centre is the Molecular Pathology Department at NIO (performing approx. 60% of all tests), followed by 3 University centers.

Reimbursement

Yes, under NEAK.

Molecular Tumour Boards

All oncology care providers have MTBs. In addition, a national molecular tumor board was initiated in 2019. Its main role is to evaluate all applications for comprehensive genetic profiling and to issue therapeutic recommendations. In addition, organ-specific MTBs are regularly working at NIO and University Centers.

Access to PCM treatments

All treatments are covered by The National Institute of Health Insurance Fund Management (NEAK)

DRUP-Like Clinical Trial

n/a

Challenges

The best diagnostic procedures are not uniformly accessible within Hungary; therefore, best practice guideline and quality assurance in pathology diagnostics have been initiated

Opportunities

Mandatory, centralised, digital medical informatic system (eHEalth) for all health care providers. All diagnostic and medical reports are available in this system, facilitating and accelerating the introduction of new technologies.

Author(s)

National Cancer Control Programme

contact

STP@cancercontrol.ie

date

14 May 2025

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PRIME-ROSE

EU Cancer Mission GA101104269

Ireland

Country Information

Population

~5.2 M

Comprehensive Cancer Centres

0 (8 adult cancer centres,1 paediatric cancer centre; 4 OECI accredited and 3 in process)

New cancer cases per year

41,654 (NCRI average 2020-2022)

Precision Cancer Medicine

Does the country have a national PCM initiative? Feasibility studies / multi-stakeholder/ extra funding? Does the country have regional PCM initiatives

The National Cancer Control Programme (NCCP) Molecular Diagnostics Advisory Group has developed a framework for the development of precision cancer molecular service which currently lacks dedicated funding. There are no general national guidelines on PCM but testing pathways to support prescribing of reimbursed SACT indications are agreed with pathologists and medical oncologists/haemato-oncologists in the public system. National SACT regimens are developed and available at www.hse.ie/nccpnationalsactregimen

PCM diagnostics

How is genomic testing organised in your country? In the public setting NGS testing is available in five cancer centres and in development in a sixth centre. CGP testing capacity being developed in two of these cancer centres.

Reimbursement

Genomic testing linked to reimbursed SACT indications available in the public setting. NCCP seeks to provide funding for new companion diagnostic testing in first year of introduction. NGS panels in advanced lung, melanoma and colorectal cancer are centrally funded.

Molecular Tumour Boards

Current situation:

- Integration of routine molecular testing into clinical practice by clinicians
- Education based MTB run by Cancer Trials Ireland for complex cases

Plan in development for establishment of a HSE National Molecular Tumour Board

Access to PCM treatments

On–Label treatment: Standard assessment process for reimbursement of new medicines and new indications in place since 2013. Cancer drugs approved for reimbursement available here . Patient specific applications can be used (both on-label and off -label) but are not accepted unless strong rationale. Access to PCM through Compassionate Access programmes in some instances.

DRUP-Like Clinical Trial

PROGRESS Trial

Pilot DRUP-like study, CTIS submission planned Q3 2025

Challenges

~ 2 years to reimbursement decision from application

National funding strategy for PCM diagnostics

Access to “off label” use of drugs

Opportunities

Creation of DRUP-like protocols

Author(s)

Paola Zagami, Edoardo Crimini

contact

Paola.Zagami@ieo.com / Edoardo.crimini@ieo.com

date

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PRIME-ROSE

EU Cancer Mission GA101104269

Italy

Country Information

Population

59 M

Comprehensive Cancer Centres

10- 15

New cancer cases per year

395 000

Precision Cancer Medicine

Does the country have a national PCM initiative? Law 190/2023: establishment of MTBs and definition of the centers that can perform comprehensive genomic profiling.**Feasibility studies / multi-stakeholder/ extra funding?** n/a

National guidelines on PCM?
AIOM guidelines define the biomarkers and the treatment of choice for solid tumors.

Does the country have regional PCM initiatives? The national law is binding for regions; these however have different models for implementing PCM.

PCM diagnostics

How is genomic testing organised in your country? The Italian NHS provides universal healthcare coverage and reimburses testing for biomarkers that have approved TT.

Reimbursement

Comprehensive genomic testing reimbursement is defined at a regional level. In Lombardy, it is reimbursed for certain cancer types (NSCLC, biliary, rare tumors) and for patients without standard options, after MTB discussion

Molecular Tumour Boards

Different models in different regions:

Some regions implemented hub-and-spoke models, others opted for a unique centralized MTB.

Access to PCM treatments

Standard TT available: Oncologist -> genomic testing -> TT reimbursed by NHS

Standard TT not available in the setting of the patient: Oncologist -> MTB -> genomic testing -> MTB discussion -> expanded access/clinical trial/off label (off label possible only for ESCAT I-II alterations).

DRUP-Like Clinical Trial

ROME trial

Challenges

Genomic testing reimbursement for all the patients in early lines of treatment

Simplified access to off-label treatments

Opportunities

Creation of DRUP-like protocols; Nationwide initiatives for PCM data sharing are ongoing; Large, randomized, multicentric studies to grant access to TTs generating high-level evidence (e.g. ROME trial).

Author(s)

Edita Baltruškevičienė

contact

edita.baltruskeviciene@nvc.santa.lt

date

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PRIME-ROSE

EU Cancer Mission GA101104269

Lithuania

Country Information

Population

2.9 M

Comprehensive Cancer Centres

0 CCC, 1 OECI- accredited center

New cancer cases per year

16 413 (2022)

Precision Cancer Medicine

Does the country have a national PCM initiative? No

Feasibility studies / multi-stakeholder/ extra funding? Feasibility study in 2024, PCM dedicated research funding programme started in 2026

National guidelines on PCM?
No

Does the country have regional PCM initiatives? PCM academy, PANTUMOR-LT

PCM diagnostics

How is genomic testing organised in your country? Single gene tests and small panels performed in 3 genetic labs in university hospitals, larger panels, comprehensive gene testing only in research (3 labs)

Reimbursement

- Gene panel (Prosigna) covered by HIF since 2022
- 16 gene panel for solid tumors covered by HIF since 2025
- Large panel testing only in research projects

Molecular Tumour Boards

At NCI since 2024, no National MTB

Access to PCM treatments

- On label use reimbursed from HIF (does not cover all EU-registered indication)
- Ultra rare disease and conditions board at the State Health Fund considers individual applications for ultra rare diseases (1/200 000)
- Off-label treatments usually not reimbursed

DRUP-Like Clinical Trial

PANTUMOR-LT (planned in 2026)

Challenges

- No national PM strategy and coordinated action plan sustained through changing government
- Lack of consolidated PM ecosystem
- Low expenditure for healthcare
- Low availability of innovative drug

Opportunities

A national plan, national MTB, discussion on outcome based shared PM reimbursement model, oncogenomic database, data sharing, clinical trials, EU projects, collaboration

Author(s)

Hans Gelderblom, Soemeya Haj Mohammad, Hans Timmer

contact

A.J.Gelderblom@lumc.nl

date

13 February 2026

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PRIME-ROSE

EU Cancer Mission GA101104269

Netherlands

Country Information

Population

18.1 M (Feb 2026)

Comprehensive Cancer Centres

7,3 OECI- accredited

New cancer cases per year

134.756 (2025)

Precision Cancer Medicine

Does the country have a national PCM initiative? Feasibility studies / multi-stakeholder/ extra funding? National guidelines on PCM? Does the country have regional PCM initiatives? PCM: no general national guidelines but there are national agreements and clinical guidelines for use + reimbursement of molecular diagnostics / targeted therapies with close collaboration between medical oncologists, pathologists, payers/HTA-bodies etc.

National research initiatives for PCM e.g. Drug Rediscovery Protocol (DRUP) and Drug Access Protocol (DAP)

PCM diagnostics

How is genomic testing organised in your country? Extensive molecular diagnostics are mainly performed in the regional academic medical centers. Most of the smaller panel genomic testing is also performed in smaller hospitals. Reimbursed by public healthcare insurers.

Molecular Tumour Boards

Regional MTBs in every academic medical center and the Netherlands Cancer Institute (Comprehensive Cancer Center) Medical oncologists, clinical molecular biologists, pathologists, clinical geneticist, researchers; separate reimbursement for MTBs as service.

Reimbursement

- Small and large NGS panels for DNA analysis, and several targeted NGS panels for RNA analysis are reimbursed for specific indications (i.e. tumour type, disease stage), but no full RNA sequencing.
- WGS is reimbursed for diagnosis of cancer of unknown primary and for fit patients with a solid tumor with no more systemic treatment options left to identify an NTRK gene fusion.

DRUP-Like Clinical Trial

Drug Rediscovery Protocol (**DRUP trial**):

A Dutch National Study on behalf of the Center for Personalized Cancer Treatment (CPCT) to Facilitate Patient Access to Commercially Available, Targeted Anti-cancer Drugs to determine the Potential Efficacy in Treatment of Advanced Cancers with a Known Molecular Profile.

Publications: Van der Velden et al. The Drug Rediscovery protocol facilitates the expanded use of existing anticancer drugs. Nature. 2019 Oct;574(7776):127-131.

Website: www.drupstudy.nl

Author(s)

Kjetil Taskén, Live Fagereng

contact

kjetil.tasken@medisin.uio.no, gfageren@ous-hf.no

date

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PRIME-ROSE

EU Cancer Mission GA101104269

Norway

Country Information

Population

5.5 M

Comprehensive Cancer Centres

1

New cancer cases per year

38 000

Precision Cancer Medicine

Does the country have a national PCM initiative? Yes

Feasibility studies / multi-stakeholder/ extra funding? Yes

National guidelines on PCM? Yes (at high level)

Does the country have regional PCM initiatives? Yes

PCM diagnostics

How is molecular testing organised in your country? Molecular testing is conducted through the public healthcare system. Comprehensive genomic testing, methylation assays, liquid biopsy are accessible as part of a national initiative, InPreD.

Reimbursement

i)TSO500 for all metastatic cancer patients with need

ii) Whole genome sequencing for refractory pediatric patients

iii) Methylation analysis for brain tumours

Molecular Tumour Boards

The National MTB is organised by Oslo University Hospital as part of the national infrastructure of precision diagnostics, InPreD. The diagnostic work-up is done by the six university hospitals.

Access to PCM treatments

On-Label Treatment: i) The company submits documentation to the HTA body. ii)The HTA body provides the HTA report iii) The Procurement Trust negotiates prices iv) The Heads of the four Regional Health Authorities (budget holders) determine if the drug should be reimbursed.
Off-Label Treatment: Reimbursement is approved by the local hospital or department (local budget holder) or the Heads of the four Regional Health Authorthies after request from clinicians

DRUP-Like Clinical Trial

IMPRESS-Norway (impress-norway.no)

Challenges

Long delays in reimbursement decisions (2–3 years); Lack of a structured framework including for outcome-based Managed Entry Agreements (MEA) to facilitate access to PCM treatments outside IMPRESS-Norway.

Opportunities

Strong collaboration between Nordic countries (joint HTA processes and procurement). This collaboration might provide a foundation for broader European cooperation. Pathway for reimbusrement of positive cohorts from IMRPESS-Norway

Author(s)

Iwona Ługowska

contact

Iwona.Lugowska@nio.gov.pl

date

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PRIME-ROSE

EU Cancer Mission GA101104269

Poland

Country Information

Population

37.6 M (2023)

Comprehensive Cancer Centres

2 OECI members + several regional centres

New cancer cases per year

170 000

Precision Cancer Medicine

Does the country have a national PCM initiative? National Cancer Strategy 2020-2030 sets a direction for integrating precision oncology into the national healthcare framework (investment in science and innovation as one of its five priority areas); Center of Excellence for Precision **Oncology at MSCI, Warsaw**

Feasibility studies / multi-stakeholder/ extra funding? Non-governmental organisations supporting PCM developement: **Polish Personalized Medicine Coalition**, **Polish Society of Oncology**

PCM diagnostics

How is genomic testing organised in your country? Decentralized, available in major cancer centers and academic institutions.

Reimbursement

Reimbursed: single-gene tests or small multi-gene panels

Not reimbursed: Comprehensive multi-gene NGS sequencing - only through commercial options (e.g., Foundation Medicine), and commercial clinical trials.

Molecular Tumour Boards

At MSCI in Warsaw, Molecular Tumor Boards (MTBs) are organised on a regular basis, focusing on patients with rare cancers or metastatic disease who have progressed after at least one line of therapy. MSCI is a co-lead in the PMC Joint Action, responsible for the development of supranational MTBs.

DRUP-Like Clinical Trial

ONCOMAP Multicenter, open-label phase II study evaluating the efficacy and safety of molecularly targeted therapy in patients with unresectable or metastatic malignant tumours, including rare cancers and the AYA population - finansed *by the Medical Research Agency for funding*

Opportunities

Poland's participation in European PCM consortia provides access to best practices and expertise while aligning national policies and strategies with EU priorities. As part of the patient pathway agenda, PCM has been identified as a priority of the Polish Cancer Mission Hub.

A strong landscape of cancer patient organisations in Poland offers opportunities to educate the general public and provides valuable insights into patient needs, which can inform the development of more patient-centred PCM strategies and policies.

Author(s)

Beatrice Mainoli

contact

beatrice.mainoli@ipoporto.min-saude.pt

date

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Portugal

Country Information

Population

10 M

Comprehensive Cancer Centres

1

New cancer cases per year

69 567

Precision Cancer Medicine

Does the country have a national PCM initiative? No comprehensive PCM strategy but several initatives (*Estratégia Nacional para a Medicina Genómica* - Portuguese Strategy for Genomic Medicine; PT_ MedGen)

Does the country have regional PCM initiatives? IPO Porto has developed a local molecular screening program (Precision Oncology Program of IPO Porto: POP-IPOP) that is now expanding at regional level, with agreements with already 3 other hospitals in the region currently regularly participating in multidisciplinary MTB discussions.

PCM diagnostics

How is genomic testing organised in your country? Genomic testing is heterogeneous and reimbursement decisions are not made at national level.

In the public sector, the costs of genomic testing are covered by hospitals, and the decision on which panels and kit to use is made locally at hospital level. Frequently, comprehensive genome sequencing is done externally (assigned to third parties or to private vendors), few public hospitals perform comprehensive genome sequencing in-house.

Additionally, private vendors are available to provide NGS testing (in the private sector).

Molecular Tumour Boards

IPO Porto implemented the first formal Molecular Tumor Board in Portugal, to support its molecular screening program (POP-IPOP), with in-house NGS testing and the multidisciplinary cases discussion has been made available to other centers for second opinion consultation at regional and national level. Other initiatives of MTB are being established in other institutions. IPO-Porto MTB is evolving fast to build a national MTB through agreements that are being set with other hospitals and research institutions.

Access to PCM treatments

Currently, there is no HTA formal evaluation for other than market authorization indications. Off-label treatment is not assessed for reimbursement decision at national level: decision is made locally at hospital level.

DRUP-Like Clinical Trial

POP trial – Precision Oncology Platform *in implementation, expected application Q1 2026, pending decisions from pharma companies*

Challenges

Lack of harmonization and standardization in the access to diagnostic and treatment, whit heterogeneity across the country

Opportunities

Possible ease of implementation of structured national strategy in small/medium size country through a network of well-organized cancer centres.

Author(s)

Violeta Astratinei

contact

violeta.astratinei@melanomromania.org

date

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EU Cancer Mission GA101104269

Romania

Country Information

Population

18.9 M

Comprehensive Cancer Centres

Oncology Institutes (3), private Cancer Centers with reimbursed services (2)

New cancer cases per year

100 471

Precision Cancer Medicine

Does the country have a national PCM initiative? The law on personalized medicine

Feasibility studies / multi-stakeholder/ extra funding? None available

National guidelines on PCM? Not available

Does the country have regional PCM initiatives? Romania does not currently have regional PCM initiatives but participates in EU programs such as EPPerMed.

PCM diagnostics

How is genomic testing organised in your country? Genetic and basic molecular tests to guide the use of reimbursed therapies are available, but reimbursement is not ensured for all cancer types. Link Program (ro)

Reimbursement

Since 2023, tumour genetic testing for breast, ovarian, lung and colorectal cancer is reimbursed through the National Oncology Program. PDL1 test is reimbursed for gastric, esophageal, cervical, and urothelial cancers. Use of NGS is limited. Biomarkers number is smaller than ESMO recommended.

Molecular Tumour Boards

Molecular tumor boards are not available. The number of geneticists is very limited, partly due to the lack of specialized training programs for medical professionals.

Access to PCM treatments

Limited to reimbursed therapies; outside of four cancer types, patients lack access to molecular diagnostic s and matched therapies. Romania needs to transition from single-gene testing to larger NGS panels for solid tumours.

DRUP-Like Clinical Trial

Not available

Challenges

Romania lacks data infrastructure, including a national cancer registry, with limited coordination between centers and fragmented oncology care.

Opportunities

Legal framework in place; strong private sector enhancing competition and diagnostic quality.

Author(s)

Irene Braña

contact
ibrana@vhio.net

date
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EU Cancer Mission
GA101104269

Spain

Country Information

Population

48.7 M

Comprehensive Cancer Centres

1

New cancer cases per year

286 664

Precision Cancer Medicine

Does the country have a national PCM initiative? No. Some regions have regional PCM initiatives.

National guidelines on PCM?
There are some joint guidelines from the Spanish Society of Pathology (SEOM) and the Spanish Society of Medical Oncology (SEAP) with a minimum number of biomarkers to be covered by tumor type.

PCM diagnostics

How is genomic testing organised in your country?

Reimbursement

Regional strategies are covered by the funds for the regional health system. Some centers, such as VHIO, have larger and ISO certified panels thanks to the support of charities.

Molecular Tumour Boards

n/a

Access to PCM treatments

n/a

Challenges

Regional health system reluctant to reimburse an off -label medication (even with a shared-risk strategy)

Disparities in the coverage of the NGS (technical challenge), in the certification and in the access of the population

DRUP-Like Clinical Trial

open a DLCT with a stage 3 of Olaparib cohort

Opportunities

Some key stakeholders involved in reimbursement identified in Catalonia.

Support from PCM4EU has been essential in our interactions with AZ

Stage 3 – Olaparib arm is envision as great opportunity to overcome some of the challenges.

Author(s)

Anders Edsjö, Richard Rosenquist, Edvard Abel

contact

Anders.Edsjo@skane.se, richard.rosenquist@ki.se, edvard.abel@vgregion.se

date

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EU Cancer Mission GA101104269

Sweden

Country Information

Population

10.6 M

Comprehensive Cancer Centres

5 CCC, 1 preparing for accreditation

New cancer cases per year

69 000 (2021, incidence rising)

Precision Cancer Medicine

Does the country have a national PCM initiative?

A revision of the National cancer plan has been released in Jan 2026 and regarding PCM it calls for a national infrastructure for PCM via national coordination, establishing MTBs, equitable implementation and competence.

State-funded infrastructures for life science research (SciLifeLab), clinical implementation of precision medicine (Genomic Medicine Sweden) and clinical trials for precision cancer medicine (Testbed Sweden Precision Health Cancer). Newly formed Proteome Medicine Sweden.
Regional Genomic Medicine Centres are in place and closely related Precision Medicine Centres just starting. No substantial specific funding for feasibility studies in any of these (programs at KI an exception).

PCM diagnostics

How is genomic testing organised in your country? Biomarker testing in 30 pathology departments in 21 regions. Genomic testing for cancer performed mainly at the 7 university hospital laboratories (gene panel testing in 2 regional centers as well). Very limited role for private labs.

Reimbursement

WGS/WTS for pediatric malignancies in clinical routine, pilot on WGS/WTS for acute leukemias, gene panels for comprehensive genomic profiling under implementation.

Molecular Tumour Boards

Local, regional and national MTBs but only for specific malignancies. The pan-cancer, late-stage MTB planned for the FOCU.SE trial under formation with expected launch in Q2 2026.

Access to PCM treatments

Swedish patients pay a limited part of the actual treatment costs directly, the rest tax funded. The Board of Pharmaceutical Benefits decide on pricing and reimbursement of new pharmaceuticals for out-patients, county councils procure medicines for hospital use and the cost for PCM treatment is generally covered by the budget of the individual clinical department.

DRUP-Like Clinical Trial

BoB trial running at Karolinska Institutet as part of the CCE collaboration. MEGALiT, a trial at two sites, recently closed. The national **FOCU.SE** trial with expected first inclusion in Q2 2026.

Challenges

National strategy for personalised cancer medicine in place, but responsibilities between stakeholders not clear. Legal framework for data sharing not in place. Upscaling of testing and targeted treatments lagging. Fragmented PCM efforts, lacking coordination.

Opportunities

National infrastructures for cutting- edge PCM research and a high quality clinical implementation in place. Intense activity in several PCM intiatives. Newly awakened, high interest from the regions. FOCU.SE may speed up implementation.

Author(s)

Matthew Krebs

contact
matthew.krebs@nhs.net

date
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EU Cancer Mission
GA101104269

UK

Country Information

Population

67 M (Jan 2024)

Comprehensive Cancer Centres

15- 20 major cancer centres

New cancer cases per year

392 000 (McMillian 2024)

Precision Cancer Medicine

Does the country have a national PCM initiative? NHS Genomic Medicine Service provides routine genomic testing for cancer patients and rare diease; WGS avaailable for paeds and CNS tumours. TARGET National study provides broad-panel ctDNA testing for matching patients to clinical trials.. **Feasibility studies / multi-stakeholder/ extra funding?** 100,000 Genomes project (sequence 100,000 genomes) – completed 2015 **National guidelines on PCM?** NHS England, National Institute for Health and Care Excellence (NICE), Health Technology Assessment (HTA). Genomic Medicine Centres – focus integrating genomic testing into clinical practice, Cancer Alliances – embed and mainstream genomic/genetic testing across oncology pathways, NIHR BioResource – collecting diverse biological and health data from patients, Precision Medicine Catapult – translating scientific discoveries into real-world applications through partnership ecosystem across the UK.

PCM diagnostics

How is genomic testing organised in your country? National Genomics Medicine Service is delivered through seven Genomic Laboratory Hubs within NHS in England – testing according to National test directory (WGS/gene panels etc.)

Reimbursement

Genomic profiling funded by NHS-England as per National Test Directory (NTD), WGS for specific indications, tests for rare diseases. All reimbursed PM therapies have linked genomic testing available (as per NTD). TARGET National funded by Charity and Industry

Molecular Tumour Boards

Regional Genomic Tumour Advisory Boards (GTAB) run by Genomic Laboratory Hubs in framework of the NHS Genomic Medicine service - (assistance to interpret NHS and WGS – multidisciplinary group in NHS interprets complex/challenging genomic cases emerging from the National Test Directory)

TARGET National provides national weekly MTB for interpretation of broad-panel ctDNA results and identification of matched clinical trials across the UK

DRUP-Like Clinical Trial

DETERMINE (cruk.org/determine)

Presented at ESMO
(DOI: 10.1016/j.annonc.2023.09.1902)

Challenges

National Test Directory for genomic testing is linked to reimbursed therapies and diagnostic tests. Gap exists to support identfcation of reseach targets for clinical trial enrolment (being addressed)

Opportunities

Potential for novel route to reimbursement for re-purposed Precision Medicine Therapies.

your country missing? please reach out

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Precision Cancer Medicine Repurposing System Using Pragmatic Clinical Trials