

ADVANCES IN CANCER PREVENTION AND TREATMENT

Advances in understanding risk and prevention, early detection and treatment have revolutionised the management of cancer leading to improved outcomes for patients.



EVIDENCE

- With few exceptions, early stage cancers are less lethal and more treatable than late stage cancers.
- In the United States alone, there are 12 million Americans living with cancer today.
- In countries with more than a decade of experience with organised breast
 cancer screening programmes, the reduction in mortality from breast
 cancer is significant, with for example, Australia's mammographic screening
 programme established in 1991, integral to achieving an almost 30%
 reduction in mortality from breast cancer over the last two decades.
- Cervical cancer rates in wealthier nations plummeted once Pap testing was introduced broadly - and rates continue to lower, with recent figures showing that in some countries such as the UK, mortality has halved between 1990 and 2010.



GLOBAL ADVOCACY MESSAGE

Cost-effective strategies for cancer control such as breast and cervical cancer screening as well as early detection exist for all resource settings and can be tailored to the population-based need.

ACCESS TO CANCER SERVICES

Sadly, access to comprehensive cancer services, including access to essential medicines, is largely restricted to wealthy countries and individuals.



EVIDENCE

- Globally, closing the gap in cancer outcomes between rich and poor countries is an equity imperative.
- We know it is possible; there are proven examples of low resource settings
 providing effective cancer services that span the spectrum of cancer control
 and care from prevention through to palliation, dispelling the myth that this
 approach is only feasible in high resource settings.



GLOBAL ADVOCACY MESSAGE

The core elements of a cancer control and care continuum must be decided within each country based on existing health resources and infrastructure, the burden of cancer based on information from population-based cancer registries, country-specific cancer risks, political and social conditions, and cultural beliefs and practices. National cancer control plans (NCCPs) should consider the full spectrum of multidisciplinary cancer services and infrastructure across the continuum of cancer control and care.

DELIVERY OF CANCER SERVICES IN ALL RESOURCE SETTINGS

Increasing public and political awareness that solutions exist and can be implemented and integrated in all resource settings is essential to achieving equity in cancer prevention and care.



EVIDENCE

- It is a common misconception that cancer solutions are too complex and expensive for developing countries.
- The cost of interventions does not have to be prohibitively expensive. A recent report estimates that most of the off-patent generic cancer medicines required for developing countries are available for less than \$US 100 per course of treatment, and nearly all for under \$US 1000. For life-saving vaccines, such as the human papillomavirus (HPV) vaccine, progress towards affordable pricing is being driven by the GAVI Alliance, with GAVI recently opening a window of support for eligible countries for the introduction of the HPV vaccine at either the national level or as a demonstration project.



GLOBAL ADVOCACY MESSAGE

Team-based, multidisciplinary treatment programmes that include access to quality, affordable and effective cancer medicines and screening should also incorporate other cost-effective treatment solutions including radiotherapy which should be seen as an essential component of every country's national cancer control plan.

All people should have access to proven effective multidisciplinary cancer services on equal terms, ensuring that cancer is diagnosed early when the chance of cure is greatest.

worldcancerday.org

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