Comment

THELANCET-D-16-00497 S0140-6736(16)00233-6

Embargo: February 3, 2016-23:30 (GMT)

Tackling cancer: time for a global response

W

World Cancer Day on Feb 4, 2016, offers an opportunity to draw public attention to the plight of millions of people across the globe who are suffering and dying from this disease, and to raise awareness about how much could be achieved if the global community took decisive steps to improve access to cancer prevention, early detection, treatment, and care.

In the continuing absence of such action, however, World Cancer Day risks turning into the day when we wring our hands in frustration and mark yet another year along the catastrophic path that will see the global cancer death toll rise from its 2012 level of around 8 million to more than 13 million by 2030, with half of them being in people younger than 70 years.¹ Once largely confined to rich countries, cancer is becoming a leading health problem across developing countries. Of the more than 14 million new cancer cases and over 8 million cancer deaths in 2013, 56% of new cases, 62% of cancer deaths, and 69% of all disability-adjusted life years lost to cancer were in developing countries.¹² In the next 15 years, three out of four cancer deaths are expected to occur in middle-income countries.³⁴

What makes the present situation so infuriating is that we do know what has to be done to make substantial improvement. Huge efforts have also been made to encourage action on cancer in the global political agenda. 8 years have passed since the Union for International Cancer Control (UICC) published the first World Cancer Declaration,⁵ and 4 years have passed since the World Oncology Forum issued the Stop Cancer Now! Appeal, which called on governments and the global community to work together to implement a 10-point strategy to turn the tide on cancer.⁶ Additional World Oncology Forums in the intervening years have issued detailed policy priorities on action to promote universal access to effective cancer treatment and care.7 In 2011, the UN Summit on Non-Communicable Diseases issued its Political Declaration that was intended to shape global agendas for generations to come.8 4 years has passed since the World Health Assembly adopted a target of reducing premature deaths from non-communicable diseases (NCDs) by 25% by 2025. And within the past year, the world's governments agreed a set of Sustainable Development Goals (SDGs) that include the objective of reducing premature mortality from NCDs by a third by 2030.

Despite these steps, there has been little coordinated global action on cancer. Richard Horton's Offline on chronic diseases, which highlighted the disconnect "between the scale of the problem and the weak international response", will have struck a chord with many of us who have been involved in these efforts, as will his observation that the "NCD community needs an electric shock to its semi-comatose soul". And not just the NCD community. With cancer alone draining about US\$2 trillion from the world economy in terms of direct costs and lost output, this issue should be high up on the global political and economic agenda. A first attempt I made to launch the idea of a Global Cancer Fund at the World Economic Forum in Davos a year ago met with limited success. But two recent developments offer a glimmer of hope.

The first comes from the World Bank, which has published costings for an essential package of sustainable interventions that would enable low-income and middle-income countries to tackle cancer on many fronts, including through tobacco control, palliative care, vaccination against viruses that cause cervical and liver cancer, diagnosis and treatment of breast and cervical cancer, and treatment of selected childhood cancers.³¹²

If fully implemented, this package would cost an additional \$20 billion per year, or 3% of total public spending on health in low-income and middle-income countries. The World Bank argues that this cost should be feasible in most countries. Such external assistance as would be required by low-income and some middle-income countries would total just over \$5 billion, which is similar to the investment made in the fight against HIV/AIDS.¹² Interestingly, the interventions supported by the World Bank go far beyond WHO's own "best buy" proposals for affordable, feasible, and costeffective cancer intervention strategies, which largely focus on prevention rather than on cancer diagnosis and treatment, especially in a primary care setting.13 The World Bank's call for global initiatives is most welcome because it recognises that this approach will be needed to achieve cancer control in low-income and middle-income countries. A global response is something the World Oncology Forum has been advocating for many years, given the absence of international coordination in oncology and the way that neither WHO nor the UICC seem to have the resources to play this part effectively.



Published Online February 3, 2016 http://dx.doi.org/10.1016/ S0140-6736(16)00233-6 A second glimmer of hope comes on the political front. The *pro tempore* presidency of the Union of South American Nations (UNASUR) is currently held by Tabaré Vázquez, the President of Uruguay, whose background is in radio-oncology. During his term of office he will lead a high-level meeting on tackling cancer, which could help generate the momentum needed to get a Global Cancer Fund up and running. It is an opportunity the global community cannot afford to miss, especially since in the past few years much knowledge has been accumulated about what should be done to tackle the cancer problem globally.¹⁴⁻¹⁶

Franco Cavalli

Oncology Institute of Southern Switzerland, Bellinzona CH 6500, Switzerland

franco.cavalli@eoc.ch

I am Chairman of the Scientific Committee of the European School of Oncology. I declare that I have no competing interests. I thank Anna Wagstaff for her editorial assistance in preparing this Comment.

- Ferlay J, Soerjomataram I, Ervik M, Dikshit R, et al. Cancer incidence and mortality worldwide: sources, methods and major patterns. GLOBOCAN 2012. Int J Cancer 2015; 136: e359–86.
- 2 Anderson BO, Flanigan J. Novel methods for measuring global cancer burden. Implications for global cancer control. JAMA Oncol 2015; 1: 425–27.

- Gelband H, Jha P, Sankaranarayanan R, Gauvreau CL, Horton S. Summary. In: Gelband H, Jha P, Sankaranarayanan R, Horton S, eds. Disease control priorities: volume 3, Cancer, 3rd edn. Washington, DC: World Bank, 2015: 1–21.
- 4 Bray F, Soerjomataram I. The changing global burden of cancer. In: Gelband H, Jha P, Sankaranarayanan R, Horton S, eds. Disease control priorities: volume 3, cancer, 3rd edn. Washington, DC: World Bank, 2015: 23–44.
- 5 Union for International Cancer Control. World Cancer Declaration 2008. Geneva: Union for International Cancer Control, 2008.
- 6 Cavalli F. An appeal to world leaders: stop cancer now. Lancet 2013; 381: 425–26.
- 7 European School of Oncology. World Oncology Forum. http://www.eso.net/pagine-interne/about-wof.html (accessed Jan 26, 2016).
- 8 United Nations General Assembly. Political declaration of the high-level meeting of the General Assembly on the prevention and control of noncommunicable diseases 3rd plenary meeting, September 19, 2011. A/RES/66/2. New York: United Nations, 2012.
- 9 Horton R. Offline: Chronic diseases—the social justice issue of our time. Lancet 2015; 386: 2378.
- 10 Cavalli F, Atun R. Towards a global cancer fund. Lancet Oncol 2015 16:133–34.
- 11 Wagstaff A. Knocking on the door of the global agenda setters. Cancer World 2015; 65: 36–40.
- 12 Horton S, Gauvreau CL. Cancer in low- and middle-income countries: an economic overview. In: Gelband H, Jha P, Sankaranarayanan R, Horton S, eds. Disease control priorities: volume 3, cancer, 3rd edn. Washington, DC: World Bank, 2015: 263–80.
- 13 WHO. Scaling up action against non-communicable diseases: how much will it cost? Geneva: World Health Organization, 2011.
- 14 Farmer P, Frenk J, Knaul FM, et al. Expansion of cancer care and control in countries of low and middle income: a call to action. *Lancet* 2010; 376: 1186–93.
- 15 Atun R, Jaffray DA, Barton MB, et al. Expanding global access to radiotherapy. Jancet Oncol 2015: 16: 1153–86.
- 16 Goss PE, Lee BL, Badovinac-Crnjevic T, et al. Planning cancer control in Latin America and the Caribbean. *Lancet Oncol* 2013; 14: 391–436.