

CANCERS

The Problem



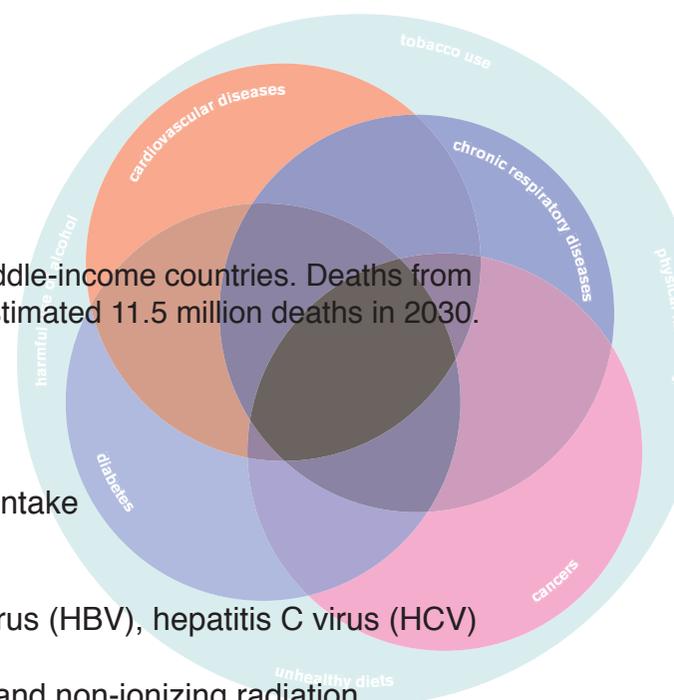
Cancer is a leading cause of death group worldwide and accounted for 7.4 million deaths (around 13% of all deaths) in 2004. The main types of cancer are:

- Lung (1.3 million deaths/year)
- Stomach (803,000 deaths)
- Colorectal (639,000 deaths)
- Liver (610,000 deaths)
- Breast (519,000 deaths)

More than 70% of all cancer deaths occurred in low- and middle-income countries. Deaths from cancer worldwide are projected to continue rising, with an estimated 11.5 million deaths in 2030.

Risk factors for Cancers

- Tobacco use
- Alcohol use
- Dietary factors, including insufficient fruit and vegetable intake
- Overweight and obesity
- Physical inactivity
- Chronic infections from helicobacter pylori, hepatitis B virus (HBV), hepatitis C virus (HCV) and some types of human papilloma virus (HPV)
- Environmental and occupational risks including ionizing and non-ionizing radiation



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The Solution

How to fight cancer

Prevention

More than 30% of cancers are caused by several leading behavioural and environmental risks that are potentially modifiable. Tobacco use is the single largest preventable cause of cancer in the world today. It is responsible for up to 1.5 million cancer deaths a year.

Key strategies:

- **Tobacco control** by implementing the WHO Framework Convention on Tobacco Control (see the WHO MPOWER package, a set of six key tobacco control measures);
- **Promotion of healthy diet and physical activity** (see the WHO Global Strategy on Diet and Physical Activity for a comprehensive set of policy recommendations);
- **Preventing harmful use of alcohol** by means of national alcohol policies aimed at reducing overall level of alcohol consumption;
- Reduce exposure and promote protection against infectious agents associated with cancer, **including vaccination** against Hepatitis B Virus and Human Papilloma Virus
- **Reduce exposure** and promote protective actions, **to carcinogens in the environment and workplace, including ionizing and non-ionizing radiation**

Early detection

Cancer mortality can be reduced if cases were detected and treated early.

There are two components of early detection efforts:

- **Early diagnosis:** is the awareness of early signs and symptoms in order to facilitate diagnosis and treatment before the disease becomes advanced
- **Screening:** is the systematic application of a screening test in a presumably asymptomatic population. It aims to identify individuals with an abnormality suggestive of a specific cancer or pre-cancer and refer them promptly for diagnosis and treatment

Key strategies:

- **Early diagnosis programmes** for common cancer types that provide early signs and symptoms, such as cervical, breast and oral cancers. This strategy is particularly relevant in low resource settings where the majority of patients are diagnosed in very late stages.
- **Screening programmes** for frequent cancer types that have a screening test that is cost-effective, affordable, acceptable and accessible to the majority of the population at risk. Examples of screening methods:
 - visual inspection with acetic acid for cervical cancer in low resource settings;

- PAP test for cervical cancer in middle-, and high income settings
- Mammography screening for breast cancer in high-income settings

Treatment

Treatment is the series of interventions, including psychosocial support, surgery, radiotherapy, chemotherapy that is aimed at curing the disease or prolonging life considerably while improving the patients quality of life.

Key strategies:

Treatment of early detectable cancers: Some of the most common cancer types, such as breast cancer, cervical cancer, oral cancer and colorectal cancer have higher cure rates when **detected early** and treated according to best practice.

Treatment of other cancers with potential for cure:

. Some cancer types, even though disseminated, such as leukemias and lymphomas in children, and testicular seminoma, have high cure rates if appropriate treatment is provided.

Palliative Care

Palliative care is an urgent humanitarian need worldwide for people (adults and children) with cancer and other chronic fatal diseases. It is particularly needed in places where a high proportion of patients present in advanced stages and there is little chance of cure.

Relief from physical, psychosocial and spiritual problems can be achieved in over 90% of advanced cancer patients through palliative care.

Key strategies:

Effective public health strategies, comprising community, home-based care approaches are essential to provide pain relief and palliative care for patients and their families in low resource settings.

Improved access to oral morphine is mandatory for the treatment of moderate to severe cancer pain, suffered by over 80% of cancer patients in terminal phase.

For more information on the cancer burden, see <http://www.who.int/research/en/>.

For more information from WHO on how to develop and implement an effective cancer control plan and its main components, see *Cancer control: Knowledge into action*. WHO Guide for effective programmes at www.who.int/cancer