

Global Task Force on Radiotherapy for Cancer Control

A World Cancer Declaration, target 7 commitment

In 2008, cancer accounted for more than 7.6 million deaths worldwide. By 2030, that number is projected to more than double, with 70% of deaths occurring in lower and middle income countries.

Governments of countries around the globe have demonstrated their awareness and concern for this remarkable transition at the highest level¹ and many have embarked on developing and implementing national cancer control plans that focus on cancer prevention, early detection, treatment, and supportive care.²

Prevention and screening are appropriately given significant attention in any cancer control strategy as they provide significant return on investment. However, not all cancers can be prevented, and increased screening and therefore detection of invasive cancers can be expected to increase the opportunity for curative treatment.

Radiation therapy is recognized as an essential tool in the cure and palliation of cancer, and is indicated in 52% of new cancer patients.

In LMICs, the need for radiation therapy may in fact be higher due to more advanced stage of disease at presentation. It has also been established that proximity and timely access to radiotherapy facilities are known to affect clinical outcomes. Unfortunately, access to radiation therapy is limited in some countries and non-existent in others.³ Put simply, the cancer problem is growing fastest in those countries that are least prepared to deal with it.

KEY MESSAGES:

- Treatment is an important element of cancer control (prevention and treatment are complementary).
- Radiotherapy (RT) is an indispensible element of a comprehensive cancer control program.
- 🖶 The societal benefits of RT depend on its accessibility (and its quality).
- 🖶 Access to RT is less than optimal in many parts of the world, both rich and poor.
- Making good quality RT more accessible in lower income countries has the potential to reduce the burden of cancer dramatically.
- Increasing the use of RT in lower income countries presents unique challenges, but none should be regarded as insurmountable.

29 of 52 African nations have no radiotherapy facilities at all, and these 29 countries comprise an estimated 198 million people.

Furthermore, radiation therapy is often perceived as a complex and expensive solution. However, failing to deploy radiation therapy resources will only exacerbate the burden of cancer and will reinforce this continuing health care disparity among nations and at an individual level.

Significant effort and tangible progress have already been made to address this deficiency; most notably through the International Atomic Energy Agency and the Programme of Action for Cancer Therapy (PACT).⁴

The scale of the problem calls for a coordinated global response.

We are challenged to provide the world with a clear assessment of the cancer treatment shortfall of radiotherapy to raise awareness, facilitate planning, attract investment, and improve global access to this powerful, effective, and critical component of cancer treatment.

The Board of the UICC has approved the convening of a Global Task Force on Radiotherapy for Cancer Control (GTFRCC) to address this very challenge under their purpose - "...to unite the cancer community to reduce the global cancer burden, to promote greater equity, and to integrate cancer control into the world health and development agenda."

By bringing cancer leaders together with radiotherapy professionals, industry partners, cancer control organizations, patient groups, economists, and enablers of healthcare change, the GTFRCC seeks to clarify the challenge, identify opportunities, and quantify the investment needed to provide equity in global access to radiation therapy an essential technology that all cancer patients must be able to access.

KEY MESSAGES:

- 🖶 The core elements of a radiation facility are well understood.
- 🖶 Investments in human resources and education are required for safety and stability.
- lacktriangle A systems-thinking approach is required to address the challenges of global RT deployment.
- Radiotherapy systems are complex and require a high level of programmatic sophistication for
- There is a need and opportunity for international collaboration and harmonization of national guidance and standards documents.
- 1. http://www.who.int/nmh/events/un_ncd_summit2011/en/
- 2. NCCP mapping www.iccp.org
- 3. Radiation availability map http://cancer.iaea.org/agart.asp
- 4. http://cancer.iaea.org/mission.asp

For more information please contact advocacy@uicc.org