Advancing Cancer Prevention and Control Worldwide

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Global Noncommunicable Disease Burden

7 out of 10 deaths worldwide are due to noncommunicable diseases

17.9m Cardiovascular Diseases
9.0m Cancer
3.9m Respiratory Diseases
1.6m Diabetes Mellitus

85% of premature NCD deaths occur in low- and middle-income countries

Source: CDC, Global Noncommunicable Diseases
Barriers to Screening and Preventive Care in the United States

- Low SES
- Transportation
- Lack of knowledge/awareness
- Stigma
- Culture/religion

Source: Barriers and facilitators to preventive cancer screening in Limited English Proficient (LEP) patients: Physicians’ perspectives
Broadening our Reach Through Partnerships
Supporting Sustainable Health System Change

Grantees

Assessment and implementation support

Partnerships

Primary Care Clinic

EBIs
Sustained EBI implementation

EHR improvements

Data reporting

Increased screening rates

Source: Colorectal Cancer Control Program
Evidence-based Interventions and Supporting Activities to increase Cancer Screening

### Evidence-based Interventions*
- Patient reminders
- Provider reminders
- Provider assessment and feedback
- Reducing Structural barriers

### Supporting Activities
- Small media
- Patient navigation
- Community health workers
- Provider education

*The Community Guide
https://www.thecommunityguide.org/topic/cancer
On the Frontline: Community Health Workers

CHWs vital to State and Local Service Delivery and Response

Community Health Workers

- Educates and informs Community
- Builds Trust
- Provides critical links to health/social services
- Culturally competent service delivery
- Facilitates access
- Extends health promotion/disease prevention capacity

Source: American Public Health Association
# PN/CHW Colorectal Cancer Impact

<table>
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<tr>
<th>Parameters</th>
<th>Patient Navigation N=131</th>
<th>Usual Care N=75</th>
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<tbody>
<tr>
<td>Screening completion through 1&lt;sup&gt;st&lt;/sup&gt; encounter</td>
<td>90.1</td>
<td>53.3</td>
</tr>
<tr>
<td>Screening Completion through 2&lt;sup&gt;nd&lt;/sup&gt; encounter</td>
<td>94.7</td>
<td>65.3</td>
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<tr>
<td>Screening Completion through 3&lt;sup&gt;rd&lt;/sup&gt; encounter</td>
<td>96.2</td>
<td>69.3</td>
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<tr>
<td>Incomplete at end of cycle</td>
<td>3.8</td>
<td>30.6</td>
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</table>

Multiple EBIs Improve Indiana Clinic’s Cervical Cancer Screening Rates During Pandemic

This project has changed the way I practice
April Fife, Nurse Practitioner

Cervical Cancer Screening Rates increased 34%
from 65% to 87%

Source: cdc.gov/cancer/nbccedp/success/screening-reminders-indiana.htm
Guam’s Patient-Centered Process Improves Enrollment; Screening During Pandemic

Removing Structural Barriers to Screening

• One location for program enrollment and clinical services
• Same-day service
• 110 women enrolled and screened

Source: cdc.gov/screenoutcancer/success/guam-makes-enrollment-easier.htm
Improving Knowledge and Awareness:

Reengaging the Public in Screening and Preventive Care

• CDC led a collaboration to get the word out
  o American Cancer Society
  o National Comprehensive Cancer Network
  o National Association of Chronic Disease Directors

• Satellite Media Tour
  o 33 interviews January 2021
  o Cumulative reach 90 million (radio, TV, online)

• Public Service Announcements
  o 600 stations nationwide
  o Aired 8,633 times, cumulative reach 62,805,260 with an ad value of $1,611,250

https://www.youtube.com/watch?v=mDIYzBjgNHQ
Role of Cancer Surveillance Data

- Identify needs
- Focus resources
- Evaluate progress
- Improve survivor health and wellbeing

Tangka, Florence et al, Resource requirements for cancer registration in areas with limited resources: Analysis of cost data from four low- and middle-income countries, Cancer Epidemiology 45 (2016) S50–S58.
Establishing a Cancer Registry

Basic Principles:

• Access to medical facilities
• System for reporting clinical and pathological data
• Cooperation from the medical community
• Adequate budget

Planning and Developing Population-Based Cancer Registration in Low- and Middle-Income Settings
Registry Budget Considerations

**Overhead (indirect)**
- Administration/Management
- Registry space/utilities

**Recurring costs**
- Labor
  - Registry staff
  - Contractors/other personnel
- Running costs
  - Computers
  - Other materials
  - Software licensing
  - Training
  - Travel expenses

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Tangka, Florence at al, Cost of Operating Population-Based Cancer Registries: Results from 4 Sub-Saharan African Countries, J Registry Manag. 2019; 46(4): 114–119
## Cancer Registry Costs

### Cost per Case by Budgetary Category, US Dollars

<table>
<thead>
<tr>
<th>Country Income Category</th>
<th>Low Income</th>
<th>Lower-Middle Income</th>
<th>High Income</th>
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<tbody>
<tr>
<td>Kampala Cancer Registry</td>
<td>1.90</td>
<td>5.70</td>
<td>19.82</td>
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<tr>
<td>Zimbabwe National Registry</td>
<td>1.04</td>
<td>2.29</td>
<td>0.72</td>
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<tr>
<td>Nairobi Cancer Registry</td>
<td>2.59</td>
<td>1.80</td>
<td>9.63</td>
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<tr>
<td>Seychelles National Cancer Registry</td>
<td>1.90</td>
<td>2.29</td>
<td>0.72</td>
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<table>
<thead>
<tr>
<th>Budgetary Category</th>
<th>Low Income</th>
<th>Lower-Middle Income</th>
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</thead>
<tbody>
<tr>
<td>Registry personnel</td>
<td>1.90</td>
<td>5.70</td>
<td>19.82</td>
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<tr>
<td>Other personnel</td>
<td>1.04</td>
<td>2.29</td>
<td>0.72</td>
</tr>
<tr>
<td>Computers, travel, training, and other materials</td>
<td>2.59</td>
<td>1.80</td>
<td>9.63</td>
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<tr>
<td>Software</td>
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<td>0.01</td>
<td>–</td>
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<tr>
<td>Overhead/indirect</td>
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<td>0.65</td>
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<tr>
<td>Total cost per case</td>
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<tr>
<td>Total cost per inhabitant</td>
<td>0.01</td>
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^ ranges less than US 1¢-17¢ annually per resident

Understanding the Short-and-Long Term Impacts of COVID-19 on Arkansans with Cancer

Data
- 343,269 COVID records
- 13,427 matches identified

Variables
- First name
- Last name
- Sex
- Race
- Birthdate
- Telephone
- Address

Thank you!

Visit the official federal source of cancer prevention information:
www.cdc.gov/cancer