

CANCER IN THE DEVELOPING WORLD

Notes from workshop at the Britain Against Cancer Conference, Westminster, December 2007

Chair: Jeremy Hughes, Chief Executive, Breakthrough Breast Cancer

Speakers: David Kerr, Oxford University
Rt Hon Alan Milburn MP

Attended by around 40 delegates.

Jeremy Hughes introduced the session by highlighting the need for Britain to take a lead in addressing the global spread of cancer. He likened the situation to the spread of HIV Aids where often slow action by national governments and the international community made the situation much worse.

David Kerr's presentation focused on the spread of cancer in Africa as part of an overall increase that will see more cases of cancer in the developing countries than in the industrialized countries by 2020, a 50% increase since 2000.

David Kerr has established *Afrox* to address cancer in Africa and held a conference in London in May 2007 attended by over 130 leaders in all aspects of World Health and Cancer Control and 23 African Health Ministers. www.afrox.org

Life-saving radiotherapy is available in only 21 of Africa's 53 countries, or to less than 20% of the population. Over 250 million people have no access to cancer screening, early diagnosis, treatment or palliative care. Over one third of cancer deaths are due to preventable causes such as viral infection, poor nutrition and widespread tobacco use.

In most African languages there is no word for cancer.

Afrox has identified four priority areas for development: cancer intelligence unit; vaccination programme & prevention; cancer treatment programme; palliative care programme. The first stage in developing all of these is education and training.

A number of UK Cancer Networks and individual hospitals already have international links and these need to be strengthened and widened.

Alan Milburn highlighted that at least one third of the deaths from cancer in Africa are easily preventable. 80% of childhood cancers are successfully treated in the UK and in Africa the figure is 1-2%. Priority action can tackle liver cancer and cervical cancer. Tobacco control programmes must be introduced.

Across Africa there are shortages of basic drugs, including morphine. Equipment is lacking and there is little incentive for even the few trained staff to stay in country. In some places the International Atomic Energy Agency have funded radiotherapy machines but there is no infrastructure support for their maintenance and operation.

Many African Health Ministers have close links with the UK, often from their own education and training.

There is an urgent need for the international medical and scientific community to work together, educating and mobilising resources.

In the **Discussion** key points included the need to tackle stigma associated with cancer; the potential model of EuropaDonna as an international supportive network that shares advocacy skills and expertise (in this case on breast cancer across Europe); the importance of building community health awareness of cancer.

Potential **areas for action** suggested were:

- Strengthening twinning links from Cancer Networks and hospitals / possible role for NHS Confederation. eg each network adopt a country
- UK Health Ministers to lead discussions with DFID and with African Ministries
- UK charities to mobilise public opinion – potential link between Cancer Campaigning Group and BOND
- Pharmaceutical industries to look at what actions can be taken to increase availability of basic drugs

NEXT STEPS

Alan Milburn has kindly agreed to host a meeting on WEDNESDAY APRIL 2nd at 3.00-4.30pm in Room O, Portcullis House, Houses of Parliament, Westminster, London, SW1A 2LW. to develop an action plan.

Please confirm whether you are able to attend this meeting by emailing mishas@breakthrough.org.uk or by telephoning 020 7025 2400 and asking for Misha Seay. Please also send in contact details for anyone else you suggest should be invited to this meeting.