Disease Without Borders

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THE GROWING GLOBAL BURDEN OF CANCER

We have all seen the tragic images of death and suffering caused by the infectious diseases that affect millions of people in developing nations each year. Adding to this international public health tragedy are the less visible epidemics of cancer, heart disease, diabetes, and other noncommunicable diseases that are growing at an alarming rate.

Unlike more developed nations where chronic diseases account for the majority of deaths, infectious diseases remain the main threat to health in many developing nations. However, as public health and economic progress continue to reduce incidence and mortality from infectious diseases in many nations, we must take steps to avoid the emergence of cancer and other chronic diseases associated with the “Western” lifestyle.

Cancer accounts for a significant portion of the increase in noncommunicable disease in the developing world. In 2000, an estimated 10 million new cancer diagnoses and 6 million cancer deaths occurred throughout the world. By 2020, the number of new cancer cases will grow to 15 million, and the number of deaths could double to as many as 12 million. An estimated 70% of these deaths will occur in developing countries, which are least prepared to address their growing cancer burdens. Between 80% and 90% of cancer patients in these countries will have incurable cancer at the time of diagnosis, leading to long-term survival rates that are one half those of the United States and other developed nations. And while tobacco-related deaths will increase slightly in the developed world over the next 30 years, they will more than triple in the developing world.

The cancer burden differs regionally, in large part because of lifestyle factors and exposure to infectious agents. Throughout most of the developed world, the four deadliest cancers—lung, breast, colorectal, and prostate—are strongly influenced by tobacco use, diet, reproductive patterns, and sedentary lifestyle. In much of the developing world, cancers related to infection—stomach, liver, and cervix—remain leading killers but lung cancer is now the major cause of cancer death in developing countries.

Control of cancers related to infection remains an important public health challenge. Although effective preventive measures exist, their availability is limited in developing countries. For example, although Pap tests have markedly reduced cervical cancer mortality in developed nations, they are not available to most women in developing countries, where 80% of cervical cancers occur. Hepatitis B vaccination at birth prevents chronic infections that result in liver cancer; however, many countries lack the resources to implement infant vaccination.

As developing countries struggle to cope with their current public health challenges, they are facing emerging threats, including the tobacco pandemic. Almost 50% of men in developing countries now smoke, and smoking is increasing rapidly among women and children. In addition to its impact on cancer, increased smoking prevalence in developing countries impairs the health and well being of children, diverts family resources from the provision of food and other necessities, and increases death rates from respiratory and cardiovascular disease. By 2020, the global burden of mortality is expected to exceed 8 million deaths, with 5.6 million deaths occurring in developing countries.

EMPOWERING PEOPLE: THE AMERICAN CANCER SOCIETY (ACS) INTERNATIONAL PROGRAM

The first step in the fight against cancer is a community-based cancer control effort. Hope begins when a community or a country moves beyond recognizing advanced cancer and adopts a more balanced approach to cancer control that
includes prevention, early detection, and effective treatment. More than 100 cancer societies in the world today are doing just that, and many more organizations have a cancer control mission. While each organization has its own unique priorities, all are committed to reducing suffering and death from cancer. With the right training and support, cancer societies can play a significant role in helping people adopt healthy lifestyle choices, provide cancer patients and their families with high-quality cancer information, and advocate on behalf of policies and laws that advance cancer control efforts.

There is no question that cancer can be controlled. Declining incidence and mortality rates in developed nations prove it. Working with key partners like the World Health Organization and the International Union Against Cancer (UICC), the ACS is helping the global cancer community, especially emerging cancer societies, lay the foundation for long-term success in cancer control. In addition to stabilizing incidence and reducing mortality, these efforts help emerging societies act earlier and more effectively to prevent them from ever reaching the terrible levels of cancer now seen in the developed world.

With more than 90 years of experience, the ACS is uniquely positioned to share detailed, hands-on knowledge about nonprofit activities such as advocacy, fundraising, management, community-based cancer control and prevention, and the dissemination of high-quality cancer information. This experience could prove invaluable to many cancer societies in other parts of the world. If we take the right steps now to support the world’s cancer societies, we can:

- Strengthen the global cancer community. Working with the UICC, the only cancer control organization (or nongovernmental organization) that is global in both membership and outreach, we can mobilize individuals and organizations throughout the world who share our commitment to eliminating death and suffering from cancer. Few entities are more powerful than committed individuals united in the pursuit of a common goal.
- Avert one of the greatest pandemics in history. Unless we intervene now, we will be faced with a staggering number of cancer deaths, up to 1 billion in this century. The economic and social costs of this pandemic will be immense.

Over the last 5 years, the ACS has developed a comprehensive International Program with four strategic directions, which are discussed below.

**Capacity Building**

**ACS University**

ACS University is an intensive training and development program for cancer control leaders to enhance nonprofit management practices and cancer control activities.

**International Partners Program**

The International Partners Program is a collaborative arrangement between the ACS’ Division Offices and emerging cancer societies designed to share knowledge and expertise and to build cancer-control capacity.

**Support for the UICC**

An ongoing effort is being made to create a strong and effective UICC capable of coordinating the world’s cancer organizations and leading the global fight against cancer.

**Tobacco Control**

**ACS University Tobacco Control Fellows Program**

The ACS University Tobacco Control Fellows Program is a focused training and development program for leaders of the tobacco control community.

**Framework Convention on Tobacco Control**

The ACS has made the commitment to support the world’s first public health treaty through direct participation in negotiations, technical assistance, and small grants to tobacco control advocates working for ratification in their countries.
Tobacco Control Research and Advocacy Grants

The tobacco control research and advocacy grants are a series of small grant programs administered by the ACS in collaboration with international public health partners designed to provide seed support for the development of larger programs aimed at tobacco control research and advocacy.

Information Delivery/Exchange

Cancer Information Program

The cancer information program is an effort to provide high-quality cancer information throughout the world, building on the ACS’ vast cancer information resources.

Research

UICC Fellows Program

The UICC Fellows Program supports beginning investigators and clinicians in the early stages of their careers to conduct cancer research projects.

The public health challenges facing the international community are immense, and the challenges related to cancer are growing. Working to conquer cancer goes hand in hand with efforts to promote human and economic development and to improve standards of sanitation, health, education, and medical care throughout the world.

As I view photographs of the graduates from recent ACS University programs, I wonder who among them will take our relatively small investment in them and go on to lead the fight for cancer control in their countries. They are the faces of hope. For in them we have the opportunity not only to share the fruits of our medical and public health research with others but also to reduce our own nation’s cancer burden by decreasing cancer risk for foreign-born Americans before they immigrate to the United States.

The power to save lives on an epic scale is within our grasp. If we have the courage and the conviction to do what must be done, we can lay the foundation for a cancer-free future. Together with the international cancer community, we can reverse the alarming trends in disease incidence and mortality, both in this country and worldwide.

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