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Our commitment to help accelerate progress against cancer

Cancer affects everyone, regardless of age, gender, or social status, and represents a tremendous burden for patients, families, and societies. In 2020, one in six deaths were caused by cancer, accounting for 10 million premature deaths worldwide. Cancer has been a leading cause of mortality since the 1970s, but only in 2016 did it become part of the UN global agenda, as part of Sustainable Development Goal target 3.4, aiming to reduce premature mortality from non-communicable diseases. This step has helped raise the profile of cancer worldwide and led to an increased political commitment to accelerate cancer research.

In 2016, Joe Biden, then the US Vice President, launched the cancer moonshot initiative as a pledge to accelerate progress against cancer. The relaunch of this initiative was announced earlier this month, as part of Biden’s determination to “end cancer as we know it”. The EU’s Mission on Cancer began in 2021, with the goal of improving cancer prevention, control, and care. Increased knowledge and awareness of cancer has been translated into enormous gains in cancer control and survival during the past decade. However, progress has not been even, and cancer disparities continue to reflect inequitable access to cancer prevention, control, and care both within countries and globally.

The growing challenges contributing to the rising cancer burden are complex. The global population is ageing, obesity is increasing, and unhealthy diets and sedentary lifestyles have become commonplace. The COVID-19 pandemic caused major delays in cancer diagnosis and treatment worldwide, and increased engagement in well established risk behaviours like tobacco use and harmful alcohol consumption. Some countries, such as South Africa, issued COVID-19 regulations temporarily prohibiting sale of tobacco and alcohol. However, in most countries, the effects of COVID-19 on behavioural risk factors remain a major concern. The cancer burden is also tied closely to the social determinants of health, many of which have been impacted by COVID-19, and exacerbated in many places by political instability, social unrest, migration, conflict, and climate change. These challenges affect people of all incomes, but the most disadvantaged groups are hit particularly hard.

Impressive advances in imaging, genomics, radiology, and personalised treatments have greatly improved cancer treatment, contributing to remarkable improvements in cancer survival, particularly in high-income countries. However, in low-income countries, inadequate access to essential core technologies in surgery, radiotherapy, pathology, and chemotherapy is a huge barrier to effective cancer care. To take just one example, between 2015 and 2019, the average global 5-year childhood cancer survival ranged from 11.6% in Africa to 83.0% in North America. An ethos in cancer that focuses on health systems and better care, and not just on innovation, is essential to ensure the best outcomes for all.

Social inequalities also heavily influence cancer prevention. For example, cervical cancer could be eliminated if all girls had access to human papillomavirus vaccination. Yet nine out of ten women who die from cervical cancer live in low-income and middle-income countries, because of limited access to vaccination, as well as a lack of screening and good quality care. According to WHO, 30–50% of all cancers are preventable and prevention is the most cost-effective long-term strategy for cancer control. Countries that have adopted evidence-based policies to address behavioural risk factors (eg, tobacco and alcohol taxation, counselling, and awareness programmes) show encouraging reductions in the related cancer burden. However, many countries are still not adequately implementing the most effective practices due to poor governance, scarcity of good quality cancer registries, and health-care workforce shortages.

The Lancet has long been committed to accelerating progress in tackling cancer. As many parts of the world emerge from the worst of the COVID-19 pandemic, we want to reposition cancer and cancer care to have a far more prominent position in health and health care worldwide. We will continue to publish the best peer-reviewed research and Commissions, and hope to motivate a global conversation about how to advance cancer care. In a coordinated initiative across the Lancet journals, we have issued a call for oncology papers. We invite you to join our mission. [The Lancet]