

# World Cancer Declaration



global cancer control

On July 8–12, 2006, the International Union Against Cancer (UICC) World Cancer Congress 2006 and the 13th World Conference on Tobacco OR Health brought together about 8,000 international cancer and tobacco control leaders representing 139 countries. As a result of the conference, a World Cancer Declaration was issued outlining nine strategies (reprinted here) to be implemented by the next World Cancer Congress in 2008. The criteria for the strategies include that the actions are achievable in the next two to three years, can be monitored, are evidence-based, and can be implemented in middle- and low-income countries. The declaration's preamble calls for "a world where cancer is eliminated as a major threat for future generations" and requires "a global movement that makes cancer control an important worldwide priority of this decade." To read the declaration in its entirety as well as updates on its progress, go to [www.worldcancercongress.org](http://www.worldcancercongress.org).

## Investing in Health

- Identify arguments that make the case that a country's investment in solving the cancer problem is an investment in the health of the population and therefore an investment in the economic health of the country.
- Create new opportunities to consistently deliver a set of compelling messages that can be tailored to different country settings and to traditional (e.g., public, media, politicians) and non-traditional partners (e.g., business, finance, agriculture).

## Cancer Control Planning

- Increase the number of countries that have national cancer control plans covering cancer prevention, early detection, treatment, palliative care, and support for cancer patients, their families and caregivers. These plans should be realistic and appropriate to country conditions and include dedicated budgets for implementation.

## Cancer Surveillance/Registries

- Increase the number of countries with viable and adequately funded cancer surveillance systems, including cancer

registries. These systems should collect and analyze data on the magnitude of cancer burden and its likely future evolution, prevalence and trends in risk factors, mortality, person-years of life lost, and survival and monitor the effects of prevention, early detection/screening, treatment and palliative care.

## Tobacco Control

- Increase the number of countries implementing strategies that have been identified as being successful in the WHO Framework Convention on Tobacco Control (FCTC), such as price and tax measures; protection from exposure to tobacco smoke; regulation of tobacco products; tobacco use cessation; restriction of tobacco advertising, promotion, and sponsorship; strengthening tobacco product packaging and labeling; controlling illicit trade of tobacco products; and banning sales to and by minors.

## Vaccines

- Develop a collaborative international plan for implementing HPV vaccination programs in low and middle income countries where the burden of cervical cancer is high which outlines specific actions to reduce costs and provide public and professional education, public policy and research.
- Integrate Hepatitis B vaccine with other routine infant vaccination programs in countries, particularly those with high rates of liver cancer.

## Early Detection/Treatment

- All countries should adopt appropriate evidence-based guidelines for early detection and treatment programs and deliver relevant priority actions tailored to different socioeconomic, cultural and resource settings. Concurrent with these services should be national public and health professional

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education programs which stress the benefits of early detection. Additional investments in health services infrastructure may be required for the extra disease burden resulting from early detection.

Palliative Care

- Increase the number of countries with national cancer control programs that make pain relief and palliative care an essential service in all cancer treatment institutions and home-based care, including access to opioids such as oral morphine, symptom control, psychological support and family support.

Mobilizing Individuals for Action

- Increase the number of opportunities that empower people living with cancer and those touched by cancer to fully participate in community, regional, and country cancer control efforts. Examples include training (e.g., media and advocacy) and partnership development (e.g., coalition building

and collaboration) that create compelling voices for action.

Support of Action Steps

- Develop and implement a process for the monitoring of these actions

and development of future actions which includes evaluation of progress, reports on progress and identification of roles of organizations working in international cancer control.

Spot on the Development of the 2006 World Cancer Declaration ...

The process began in December 2005 when an international group of experts, leaders, and organizations identified priorities that would reduce the burden of cancer. The priorities were narrowed down into a draft that was presented at the opening session of the 2006 World Cancer Congress. All attendees were encouraged to provide input online through computers available at the conference. They had 36 hours to submit their feedback. The World Leaders Summit, a meeting of approximately 35 invited leaders from government, business, and nongovernmental organizations, also was meeting during the World Cancer Conference and provided its input on the draft.

The criteria used in determining the priorities for the declaration are as follows.

- Actions are achievable in the next two to three years.
- Actions can be monitored.
- Actions are evidence based.
- Actions can be implemented in middle- and low-income countries.
- Actions are high priority and need emphasis.
- The number of actions is limited.

For more information on the World Cancer Declaration or the International Union Against Cancer World Cancer Congress, visit [www.worldcancercongress.org](http://www.worldcancercongress.org).