

ESMO calls for cancer-specific targets to be included in NCDs' global and national agendas

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ESMO, the leading European professional organisation for medical oncology, was present at the WHO Global Conference on Noncommunicable Diseases (NCDs) that finished last Friday in Montevideo, Uruguay.

From 18 to 20 October 2017, Heads of State, Ministers, top WHO and UN officials, as well as NGOs and other stakeholders, attended the forum hosted by the President of Uruguay with the aim of enhancing policy coherence in order to attain the United Nation's Sustainable Development Goal 3.4 of a one-third reduction of [premature deaths](#) from NCDs by 2030.

Alexandru Eniu, Romania, ESMO Global Policy Committee Chair, and Eduardo Cazap, Argentina, Deputy Chair, attended the Conference on behalf of ESMO. "ESMO welcomes the outcomes of the WHO Global Conference on NCDs in Uruguay. NCDs are considered a major health challenge of our times and the meeting's conclusions represent many hours of careful debate," said Eniu.

"It is important to stress that most premature deaths from [cancer](#), or other NCDs, are preventable or curable if health systems respond more effectively to the needs of their populations. Therefore, influencing public policies in sectors within and outside health (such as environmental, fiscal, educational, agricultural policies, among others) is

essential," he explained.

"Based on the slow rate of decline in premature mortality from the four main NCDs seen today, if nothing is done, the world will not be able to meet the Sustainable Development Goal target 3.4, let alone achieve universal health coverage," Eniu pointed out.

Eniu highlighted that addressing cancer specifically is a must: "Cancer is on the rise globally with the number of new cases expected to reach about 70% over the next two decades. National cancer-specific targets and indicators need to be included now in the emerging NCD global and national agendas. Global recommendations are important, but change happens at the local level," he stressed.

"No one should be left behind!" emphasized Cazap. "Health authorities must make sure that [universal health coverage](#) is available. Countries should offer basic packages of cancer services that promote prevention, but also provide timely access to care and to essential cancer medicines. With inexpensive and easy-to-implement measures we could reduce mortality now," he said.

"The oncology community is ready to help," explained Eniu. "ESMO and other organisations can provide valuable tools and guidance that will help authorities achieve their goals. For example, ESMO worked together with other societies to propose updates to the most recent WHO Model List of Essential Medicines in Oncology (6). There are about 20 inexpensive essential medicines used in the treatment of 80% of cancers. The 2013-2020 WHO Global Action Plan on Prevention and Control on NCDs has a target of 80% availability of essential medicines for NCDs by 2025. The WHO Model List is a reliable tool supporting national efforts to identify and improve access to essential cancer medicines and to help develop sustainable treatment of cancer."

"Cancer patients need proper and timely care today, as set out earlier this year in the 2017 World Health Assembly (WHA) Resolution on Cancer prevention and control in the context of an integrated approach (7)," said Eniu. "Cost effective measures to detect and treat cancer exist. They should be implemented without further delay to reduce the inequalities in cancer care we see today," he concluded.

More information: Andreas Ullrich et al. ESMO and WHO: 14 years of working in partnership on cancer control, *ESMO Open* (2016). [DOI: 10.1136/esmoopen-2015-000012](https://doi.org/10.1136/esmoopen-2015-000012)

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