IDENTIFICATION OF SPECIFIC CHALLENGES IN AFRICA

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ESMO Summit Africa 2017
## CONFLICT OF INTERESTS DISCLOSURE

<table>
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<tr>
<th>Company Name</th>
<th>Honoraria/Expenses</th>
<th>Consulting/Advisory Board</th>
<th>Contract Research</th>
<th>Funded Research</th>
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CANCER GLOBALLY

• Cancer is a global epidemic and a leading cause of death worldwide.

• Worldwide, cancer now causes more deaths than HIV/AIDS, tuberculosis, and malaria combined.

• Cancer is increasingly recognized as a public health problem in Africa.

• There are almost 80,000 South Africans being diagnosed with cancer annually, according to the National Cancer Registry, which was last updated in 2011.

• Cancer mortality is projected to:
  ✓ decrease by approximately 30% in more developed countries by 2030
  ✓ increase by >70% by 2030 in less developed countries
Since the 1990’s, mortality down, survivorship up.
In the United States...
MYTH
Cancer is a disease of developed countries

FACT
Low and middle-income countries now bear a majority share of the burden of cancer
More than 70% of deaths occur in low and middle income countries
By 2030, 85% of all cancer deaths may be occurring in low-middle income countries
TRENDS IN CANCER MORTALITY
Developed vs. less developed countries

According to the WHO:
• 1/3 of cancer can be prevented, another
• 1/3 of cancer can be effectively treated with early diagnosis
• the last 1/3 can have their QoL improved through palliative care

However Africa, as a continent is ill equipped for the devastation cancer will cause by 2030

Poor understanding of the burden of disease
CHALLENGES IN AFRICA

Poor socio-economic conditions (will become a bigger challenge in the future)

- High levels of illiteracy
- Severe poverty
- Unemployment rates high
CHALLENGES IN AFRICA

Urgent need for prevention, screening and early detection programs

• More that 80% of cancer cases in Africa present with very late disease (palliative care the only treatment modality)

• Every effort must be made to expand the capacity of health care delivery systems to provide timely and effective treatment to patients diagnosed with early stage disease

• Increasing awareness initiatives will result in improvement of patient outcomes
CHALLENGES IN AFRICA

Urgent need for prevention, screening and early detection programs

Cancer detection and prevention programs that are tailored to resource levels

- Strategies to reduce risk factors that have an impact on reducing the burden of cancer is urgently required

- Eight environmental or lifestyle risk factors account for ~50% of all cancer deaths

- Prevention of exposure to cancer-causing agents or risk factors, including infections, tobacco use, and obesity, is by far the most feasible and cost-effective approach to cancer control in Africa.
% of Cancers Caused By Infectious Diseases

North America: 4%
Europe: 7%
Global: 16%
Sub-Saharan Africa: 33%

# A Third of Cancers in Africa Are Related to Infection and Other Risk Factors

<table>
<thead>
<tr>
<th>Cancer Sites</th>
<th>Infectious Agents</th>
<th>Other Risk Factors of High Public Health Relevance</th>
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<tbody>
<tr>
<td>Breast</td>
<td></td>
<td>Hormonal/ reproductive factors, obesity, physical inactivity, alcohol</td>
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<tr>
<td>Cervix</td>
<td>HPV</td>
<td>Tobacco</td>
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<td>Liver</td>
<td>HBV, HCV</td>
<td>Aflatoxins (produced by <em>Aspergillus</em> moulds), alcohol</td>
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<td>Prostate</td>
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<td>Lymphomas (non-Hodgkin and Burkitt)</td>
<td>EBV, malaria, HIV (indirect), HCV</td>
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<tr>
<td>Colon and rectum</td>
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<td>Diet, obesity, physical inactivity, alcohol, tobacco</td>
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<tr>
<td>Kaposi sarcoma</td>
<td>HIV (indirect), HHV8</td>
<td>Tobacco, alcohol</td>
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<tr>
<td>Oesophagus</td>
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<td>Tobacco</td>
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<td>Lung</td>
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<td>Stomach</td>
<td><em>Helicobacter pylori</em> (bacterium)</td>
<td>Diets low in fruit and vegetables and high in salt, tobacco</td>
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<td>Bladder</td>
<td><em>Schistosoma haematobium</em> (fluke)</td>
<td>Tobacco, occupational exposure</td>
</tr>
</tbody>
</table>

Source: Adapted from: *Parkin 2006; Sylla & Wild 2012*

Abbreviations: HPV Human papilloma virus; EBV Epstein-Barr virus; HBV hepatitis B virus; HCV hepatitis C virus; HHV8 human herpes virus 8
CHALLENGES IN AFRICA

Lack of public educational programs

Community outreach, including education, prevention programs, and community-based palliative care with pain management using oral morphine

Delay in accurate diagnoses

- Pathologists and radiologist able to provide accurate diagnoses and staging of cancers are in short supply
- Laboratory services fall far short of need

Lack of awareness about cancer and potential value of therapy

Lack of access and ability to deliver potentially curative therapy

Lack of expert personnel and treatment facilities

- Clinics, and the number of doctors and nurses to serve populations is often severely inadequate
CHALLENGES IN AFRICA

• Lack of government involvement
  ✓ poor policy support
  ✓ financing
  ✓ no national budget for cancer research

• Cultural response and behavior to health care

• Spiritual interpretation of chronic medical problems including cancers
CHALLENGES IN AFRICA

Social connectedness

• Whatever the constraints, high-quality information technology and low-cost advanced communication technology can be available and will be important in the future to link African countries with the rest of the world.

• Language can be a barrier as most of the published literature and other material on the Internet is in English.
Opportunities for reducing suffering and death from cancer in Africa exist across all stages of the cancer control spectrum, from prevention, to early detection, treatment, and palliative care.

SASMO is committed to collaborating with other oncology societies to find solutions to the specific challenges in Africa and supports education, research and access to quality care in South Africa and on the African continent.

Welcome to ESMO AFRICA 2017