

Working Together to Reduce the Incidence of Cancers in Low- and Middle-income Nations: World Health Organization

Abstract

Cancer has been regarded as one of the major global public health concerns owing to the morbidity and mortality attributed to them. In-fact, the World Health Organization has forecasted that in the absence of implementation of targeted strategies on a war-foot basis, we are on the track to see a rise in the number of global cancer cases by 60% in the coming two decades, of which 80% will be in low- and middle-income nations. Considering all these estimates, it is high time that the nations act in a targeted manner and start at least with the strengthening of the prevention activities and expedition of research activities. In conclusion, the battle against the prevention and control of cancer needs to be fast-tracked in low- and middle-income nations and we have to work together as a team if we really want to improve the quality of life of the affected people and reduce the incidence of the cancers.

Keywords: Cancer, low- and middle-income nations, World Health Organization

Introduction

Cancer has been regarded as one of the major global public health concerns owing to the morbidity and mortality attributed to them.^[1] In fact, in excess of 9.5 million deaths were reported in 2018, of which more than two-thirds are in low- and middle-income nations.^[1] Further, it has been highlighted that despite the implementation of multiple strategies, tobacco continues to be the most common behavioral risk factor accounting for more than one-fifths of the deaths linked with cancers.^[1,2] Further, the financial consequences of cancer have been significantly detrimental to the growth and progress of the nations and it will not be wrong to say that the health-care delivery system has taken a significant toll of the cancer.^[1-3]

Cancer in Low- and Middle-Income Nations

At the same time, it is important to acknowledge that the surveillance for cancer in 80% of the nations has not been comprehensive and thus we are failing to create enough evidence to enable policy makers to formulate evidence-based policies.^[1,2] The situation has

been even worse in low- and middle-income nations, with shortcomings in the domains of prevention, screening, early detection, and even the provision of affordable treatment.^[2-5] Further, the issue of accessibility and availability of the prevention and control services has also been a significant cause of concern, and this is quite evident that most of the reported cancers are in the late-presentation stage, which further raises questions about the awareness campaigns.^[3-5]

In fact, the World Health Organization has forecasted that in the absence of implementation of targeted strategies on a war-foot basis, we are on the track to see a rise in the number of global cancer cases by 60% in the coming two decades, of which 80% will be in low- and middle-income nations.^[1,5] This becomes an alarming fact, especially considering that the survival rates have been the least in these nations due to various other competing public health priorities and weaknesses in the health-care delivery system.^[3-5] Moreover, the available estimates suggest that only 15% of these nations have facilities to offer comprehensive therapeutic options, which significantly affects the quality of life, survival rates, and the ultimate outcome.^[1]

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Prevention and control

Considering all these estimates and that what is yet to come in the future, the prevention and control of cancer has to be recognized as a public health priority in these nations and this can happen only when all the concerned stakeholders and sectors work together under the umbrella of accomplishment of the universal health coverage.^[2-4] It is worth noting that if developed nations have succeeded in reducing the premature mortality significantly, the similar thing can be accomplished by adoption of standard prevention, early diagnosis, and screening initiatives.^[1] Obviously, the national policy makers have to take a call about the modality of treatment which can be offered to the affected individuals considering the effectiveness, cost, and feasibility of the treatment.^[1,5]

The lifestyle modification, especially the physical activity, has been linked with reduction in the incidence of cancers. In fact, physical activity has been associated with reduction in the level of sex hormones such as estrogen (breast and colon cancer), reduction in inflammation, improvement in the immunity, and alterations in the metabolism of bile acids, thereby reducing the exposure of the gastrointestinal tract to suspected carcinogens. In addition, exercise prevents the development of obesity, which in turn is a predisposing factor for various cancers.^[6,7]

Need for a Multi-Sectoral Actions

Furthermore, it is high time that the nations act in a targeted manner and start at least with the strengthening of the prevention activities, which essentially includes reduction in tobacco usage, widespread implementation of vaccination against hepatitis B and human papillomavirus, and strengthening of the screening activities.^[2,3,5] In addition, the referral system needs to be strengthened and all steps should be taken to promote early detection and delivery of cost-effective treatment.^[3,5] Simultaneously, the research activities need to be expedited for ensuring early detection and identification of better treatment options. However, it is important to note that none of the strategies

will be sustainable, in the absence of political commitment and active involvement of the community through awareness campaigns.^[1,3]

Conclusion

In conclusion, the battle against the prevention and control of cancer needs to be fast-tracked in low -and middle-income nations and we have to work together as a team if we really want to improve the quality of life of the affected people and reduce the incidence of the cancers.

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Conflicts of interest

There are no conflicts of interest.

References

1. World Health Organization. Cancer - Key Facts; 2018. Available from: <https://www.who.int/news-room/fact-sheets/detail/cancer>. [Last accessed on 2020 Feb 06].
2. Shrivastava SR, Shrivastava PS, Ramasamy J. Public Health Interventions to Reduce the Incidence of Tobacco Associated Cancers. *Int J Prev Med* 2016;7:19.
3. World Health Organization. WHO Outlines Steps to Save 7 Million Lives from Cancer; 2020. Available from: <https://www.who.int/news-room/detail/04-02-2020-who-outlines-steps-to-save-7-million-lives-from-cancer>. [Last accessed on 2020 Feb 06].
4. Shrivastava SR, Shrivastava PS, Ramasamy J. Ensuring early detection of cancer in low- and middle-income nations: World Health Organization. *Arch Med Health Sci* 2017;5:141-2.
5. Saranritichai K, Ussavapark W, Thamrongwarangkoon A, Haengsorn T, Daoruang S, Teeranut A. Community-based approaches to cancer prevention in rural Thailand Based on experiences of accredited health professionals. *Asian Pac J Cancer Prev* 2020;21:7-12.
6. Lugo D, Pulido AL, Mihos CG, Issa O, Cusnir M, Horvath SA, *et al*. The effects of physical activity on cancer prevention, treatment and prognosis: A review of the literature. *Complement Ther Med* 2019;44:9-13.
7. Tsuei J, Chau T, Mills D, Wan YJ. Bile acid dysregulation, gut dysbiosis, and gastrointestinal cancer. *Exp Biol Med (Maywood)* 2014;239:1489-504.