

Vision for the Global Health and Cancer Section

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Disclosures of potential conflicts of interest may be found at the end of this article.

Vision and Motivation

The global vision of cancer control expanded exponentially when the United Nations (UN) held a historic high-level meeting in September 2011 to consider the prevention and control of noncommunicable diseases with the aim of adopting “a concise, action-oriented outcome document that will shape the global agendas for generations to come” [1]. Before that time, “cancer control” focused primarily on education, prevention of avoidable cancers, and palliative care, and only secondarily on efforts in early detection and treatment to manage uncontrolled malignant disease.

The UN resolution called on the World Health Organization to direct new attention toward heart disease, lung disease, diabetes, and cancer as problems for countries at all economic levels to address. Nonetheless, specific recommendations by international health organizations are still largely limited to prevention strategies and only superficially address cancer diagnosis and treatment. A clear need exists to take a more comprehensive approach to global cancer management: preventing the cancers that are preventable, treating the cancers that are curable, and palliating the cancers that are neither.

The burgeoning field of global oncology is called upon to develop strategies to diminish cancer incidence and improve curability and survival by promoting cancer awareness, public and professional education, implementation research, primary prevention, secondary prevention through early detection and screening, prompt and accurate cancer diagnosis, multidisciplinary cancer treatment, survivorship, and supportive and palliative care. In support of this mission, the Global Health and Cancer section of *The Oncologist* seeks to publish articles on the full spectrum of global cancer issues, including public and health policy issues, the unique nature of cancer in underserved regions, partnerships for improving training and care with institutions in developed countries, the economic impact of cancer, regional disparities in drug availability, and regulatory authority or approval of new agents. The scope of our interest will include all aspects of cancer medicine that affect prevention and care, and will extend to advocacy to promote patient access to high-quality cancer care. Although no approach to cancer control fits all regional global circumstances, translatable models of care can be developed in one region and applied to others of similar circumstances.

Editorial Team, Authors, and Reviewers

The Oncologist's editorial team, authors, and reviewers include global health and cancer control experts from around the world. Their expertise allows our readers to learn about regional variations that affect patients in disparate regions of the world, as well as at home. Global oncology requires an open-minded perspective that integrates research on detection and treatment strategies with evidence about real-world applications, taking into account the feasibility of these applications according to existing resources. As such, this section regards as a core value implementation science as related to global oncology.

The Editors dispute the idea that cancer is only a medical problem, believing instead that advancing cancer care depends on understanding cancer from cultural and sociological perspectives. Belief systems, including cancer fatalism as well as social taboos that promote stigmatization, determine patient participation in all regions of the world and at all economic levels, reinforcing the need for interdisciplinary research.

High-Priority Objectives and Goals

The Global Health and Cancer section has pledged to foster and promote all types of cancer-related topics. Special attention will be granted to innovative strategies and “north-south,” “south-south,” and “east-west” comparisons and collaborations. The section will encourage the submission of the latest information on new developments, including recent approaches to low-cost interventions and groundbreaking public health methods.

Of note, research about new high-cost drugs or treatments will not be a priority, because these approaches, while exciting and important, are generally not available in lower-income settings. Our focus continues to be on access to proper care, policies that promote an improved standard of care, and the development of stratified guidelines according to existing resources.

Priority Article Types

We prioritize two categories of papers:

1. Studies on cancer concerns from countries and populations in which data have historically been limited. Today, most published information originates from a handful of

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countries that represent a small fraction of the world cancer population. Most journals that review global oncology studies apply the same review criteria to global studies that are routinely used in judging studies about cancer in the U.S. or in Europe. *The Oncologist* recognizes the unique circumstances under which medical research may be conducted in low- and middle-income countries, and will take this perspective into consideration in its editorial decisions while adhering to high standards for its choice of papers to be accepted.

2. Studies containing updated information in areas where existing data may have different implications or outcomes when applied in different genetic, economic, or cultural settings. Examples of this are treatments approved in certain countries that are tested in different patient populations, as well as studies about underdeveloped populations, diverse environments, and different genetic patterns. Although the use of new drugs and treatments is not a focus of this section, studies on the innovative application of a new drug, a less expensive treatment with a new drug, or a procedure adapted to a resource-limited environment will be considered suitable and given review priority.

Global oncology is an evolving field with major implications for world health. New approaches that define how existing

health infrastructure can be adapted to resource-appropriate use are needed but largely unreported. The dissemination of innovative and applicable global cancer information is a fundamental component in this endeavor. It is our responsibility as physicians and investigators to alert our colleagues and the world about the epidemic of cancer in the coming years and to apply pressure to governments and society as a whole for urgent action in cancer control. We are confident that our Global Health and Cancer section will contribute in a meaningful way to the global oncology community.

“To raise new questions, new possibilities, to regard old problems from a new angle, requires creative imagination and marks real advance in science.”

—Albert Einstein

DISCLOSURES

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