The Latin American and Caribbean perspective

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Access to Global Healthcare Panel Discussion
Disclosures

I have not relevant disclosures related with this presentation
Agenda

• The Global Health agenda; current picture

• Global Cancer Control. Why it is relevant to ALL health related personnel?

• Rich and poor countries; this definition is real?

• Partnerships and collaborations in Latam. Some examples

• Take Home messages
The Global Health agenda
The current picture 1

• Non-communicable diseases, including cancer, are overtaking infectious disease as the leading health-care threat in middle-income and low-income countries. The post-pandemia will redefine the concept

• Latin American and Caribbean countries are struggling to respond to increasing morbidity and death from advanced disease

Ref. www.thelancet.com/oncology Vol 14 April 2013
The current picture 2

• Health ministries and health-care systems in these countries face many challenges caring for patients with advanced cancer:
  
• Inadequate funding; inequitable distribution of resources and services; inadequate numbers, training, and distribution of health-care personnel and equipment; lack of adequate care for many populations based on socioeconomic, geographic, ethnic, and other factors

• Current systems geared toward the needs of wealthy, urban minorities at a cost to the entire population
Global Cancer Control. Why it is relevant to ALL health workers?
Global Cancer Control

• In general, health care is provided by each country
• Health systems depend on public and private policies
• Usually, the primary responsibility is from governments (executive power) or mixed systems
• Legislation provides a regulatory framework
Rich and poor countries; this definition is real?
Low and Middle Income Countries?

- The usual definition of Low and Middle income countries is only economic
- There are rich countries with weak cancer control structures
- Some “LMIC” have strong cancer control systems
- Even in rich countries there are pockets of underserved populations
Networking in Epidemiology
Global Initiative for Cancer Registry Development in Low- and Middle-Income Countries (IARC)

Available at http://gicr.iarc.fr/
GICR

- Cancer information systems based on registries form an essential pathway to achieve better cancer control.
- Six regional centres have been established within a unified framework to provide training and support and to foster networks for cancer registries in all regions of the world.
a Regional Hub for South, East, and South-Eastern Asia, in Mumbai, India (based at Tata Memorial Centre)
a Regional Network Hub for Sub-Saharan Africa (in collaboration with the African Cancer Registry Network)
a Regional Hub for North Africa, Central and West Asia, in Izmir, Turkey (based at the Izmir Cancer Registry)
a Regional Network Hub for Latin America, in Buenos Aires (coordinated by the National Cancer Institute, Argentina).
Medical Oncology

The example of SLACOM
SLACOM
The Latin American & Caribbeann Society of Medical Oncology

- Our vision is of a future where cancer is prevented, early detected and cured or properly treated, for Latin-American patients and all over the world, developing strategies adapted to the local situation and health care resources and availability

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[Image of a globe with labels in English and Spanish]
SLACOM

• Over 2000 members
• A Clinical Research Institute for Clinical trials
• Agreements and / or cooperations with National Oncology Societies, NCI-US, UICC, IARC, WHO-PAHO, ESMO, ASCO, ACS, ICCP and others
• Several ongoing projects and a calendar of educational activities
Key messages for AAPM members

• Global health has a direct influence over our daily practice
• Most countries in the world have inequities, and minorities with poor access to good cancer care
• National cancer plans and good epidemiological data are crucial for the improvement of global cancer control
Thank you very much for your attention