

ESMO statement addressed to: Chairman of Committee A

Agenda Item: 13 - Noncommunicable Diseases, sub-item 13.2 - Draft action plan for the prevention and control of noncommunicable diseases 2013–2020; Document A66/9

Name of NGO: European Society for Medical Oncology (ESMO)

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**Statement by the European Society for Medical Oncology (ESMO)
on the WHO Global Action Plan for the Prevention and Control
of Noncommunicable Diseases (NCDs) 2013-2020
during the 2013 World Health Assembly, 20-28 May, Geneva, Switzerland**

Esteemed Committee A Chair, WHO Officials, Member States, Distinguished Guests:

- The European Society for Medical Oncology (ESMO) welcomes that WHO Member States agreed a comprehensive plan for action for global prevention and control of NCDs.
- ESMO recognizes the effort made to combine into one plan a process to tackle main behavioral NCD risk factors.
- We welcome the recognition that the Global Action Plan must go beyond prevention and address the full continuum of cancer care, including early detection, treatment and palliative care, because this is where major contributions to mortality reduction can be made to meet the 25% reduction in premature mortality target by 2025.
- There is major risk that the action plan will increase inequalities in cancer care between high and reduced income countries if WHO Member States do not invest in a comprehensive health system response to NCDs.
- We emphasize 4 recommendations for national implementation to ensure balance:
 1. National plans must link screening and early detection to an increase in healthcare system capacity to treat people identified as having cancer or NCDs.
 2. National cancer plans must extend treatment options beyond primary healthcare settings, by including opportunities surgery, radiotherapy and systemic therapies offer to cure and improve survival of cancer patients.
 3. National plans cannot exclude the 12 million people diagnosed with cancer each year, two-

thirds of which will be in LMICs, so we recommend prioritization of availability of a basic set of treatment options for them.

4. National plans must include palliative care interventions and morphine for pain relief. International data show huge, urgent needs for pain relief. Morphine is highly cost-effective in managing severe pain. It can be produced inexpensively in sufficient quantities to meet global needs. We call upon WHO to uphold the basic human right to relief from pain and unnecessary suffering.

- ESMO submitted the proposals above during the WHO open public consultation.
- The Union for International Cancer Control, the International Network for Cancer Treatment and Research, and the Pain and Policy Studies Group of the University of Wisconsin Carbone Cancer Center, representing thousands of cancer doctors and health professionals, join with ESMO to alert WHO Member States of critical issues which must be addressed during the plan's implementation and subsequent updates, especially of Objective 4 and Appendix 3.
- ESMO welcomes news that the WHO Executive Board and World Health Assembly will discuss palliative care needs and barriers. We strongly support the call for a palliative care resolution to be tabled at the 2014 World Health Assembly.
- ESMO is prepared to work with the cancer community, WHO, the UN, and the international public health community to find solutions to make cancer treatment accessible and affordable to all patients in need.

Thank you for your attention and consideration of our proposal.