

The IARC-C19 Initiative: ongoing activities and future steps

- building a global cancer surveillance platform to support national planning (before, during and after crises)

Isabelle Soerjomataram

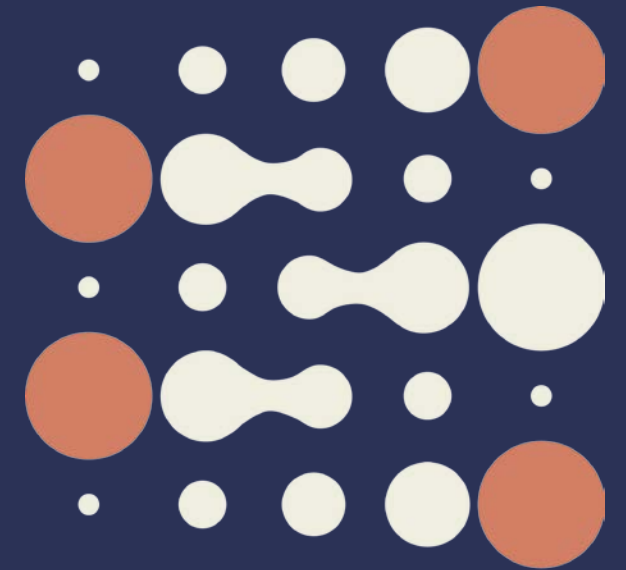
Freddie Bray

Cancer Surveillance Branch

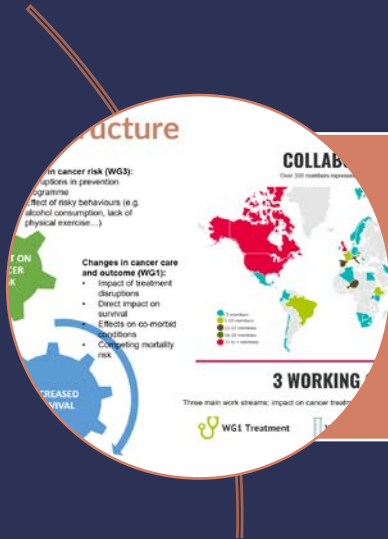
International Agency
for Research on Cancer



Scientific Council 60 ♦ 8 February 2024



The IARC-C19 Initiative: priorities and expected outcomes



IARC-C19: Ongoing activities
& partnerships

IARC C-19 Initiative: aims and ongoing activities



1. Collate **evidence** & strengthen **data collection systems** to better understand linkages between policies and outcomes during the COVID-19 pandemic, especially those related to cancer
Covid and Cancer systematic reviews

Screened for Cancer

- 39%

Cancer diagnoses

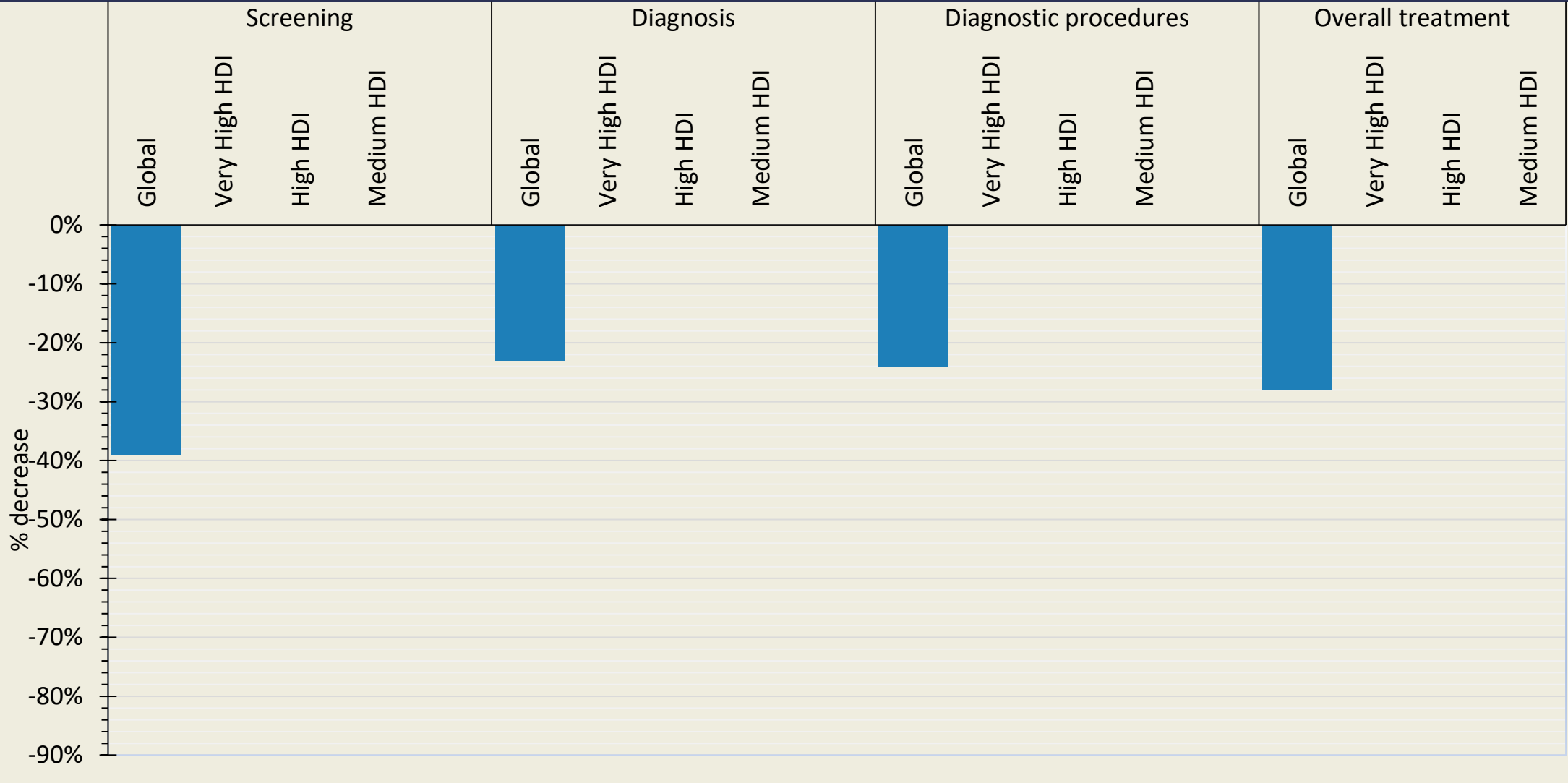
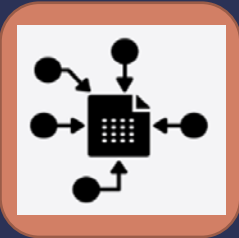
- 23%

Cancer Treatment

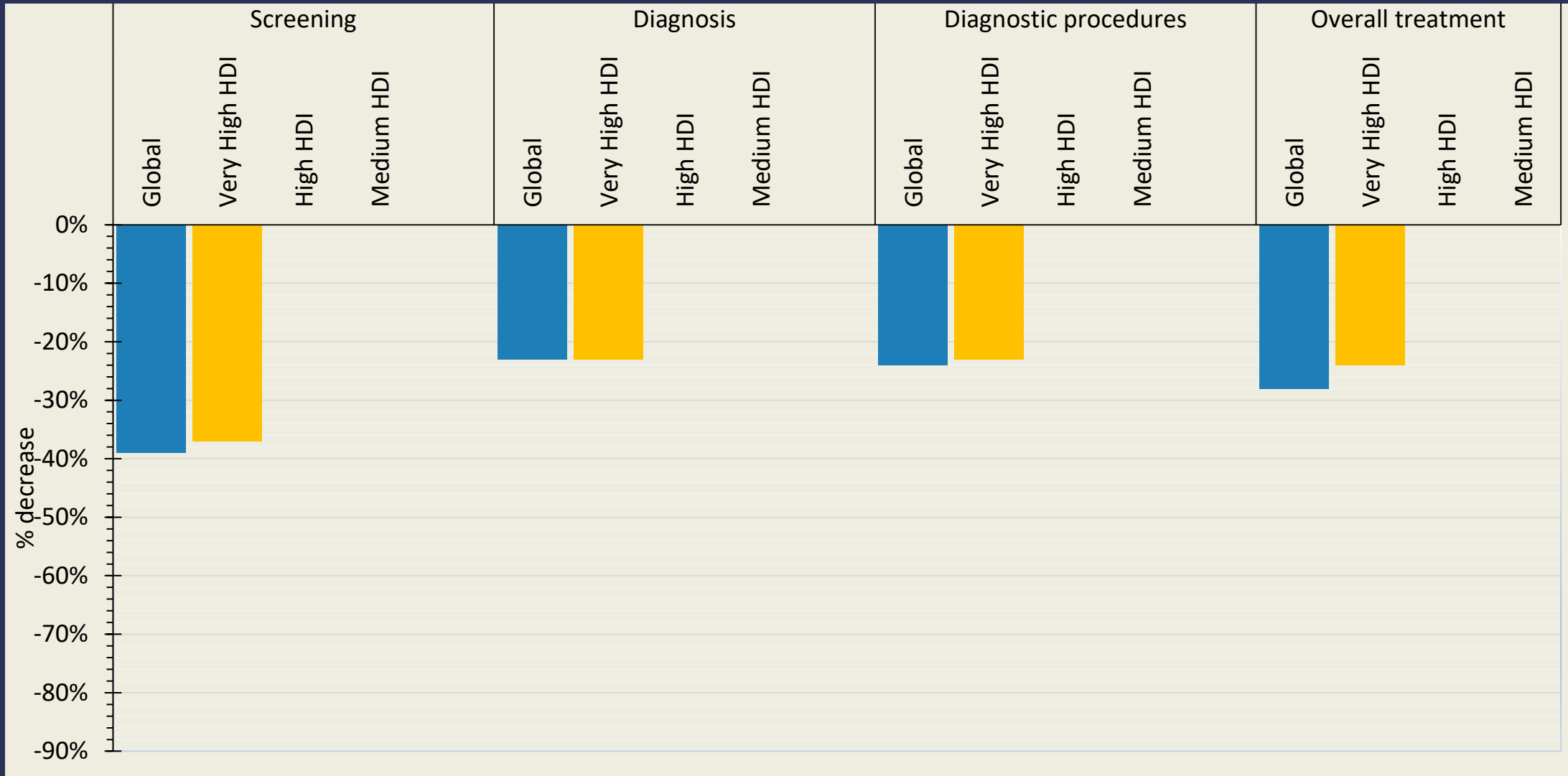
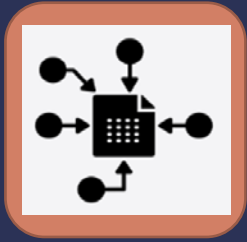
- 28%

Larger impact in lower resource settings e.g. -54% vs -23 in medium vs very high human development

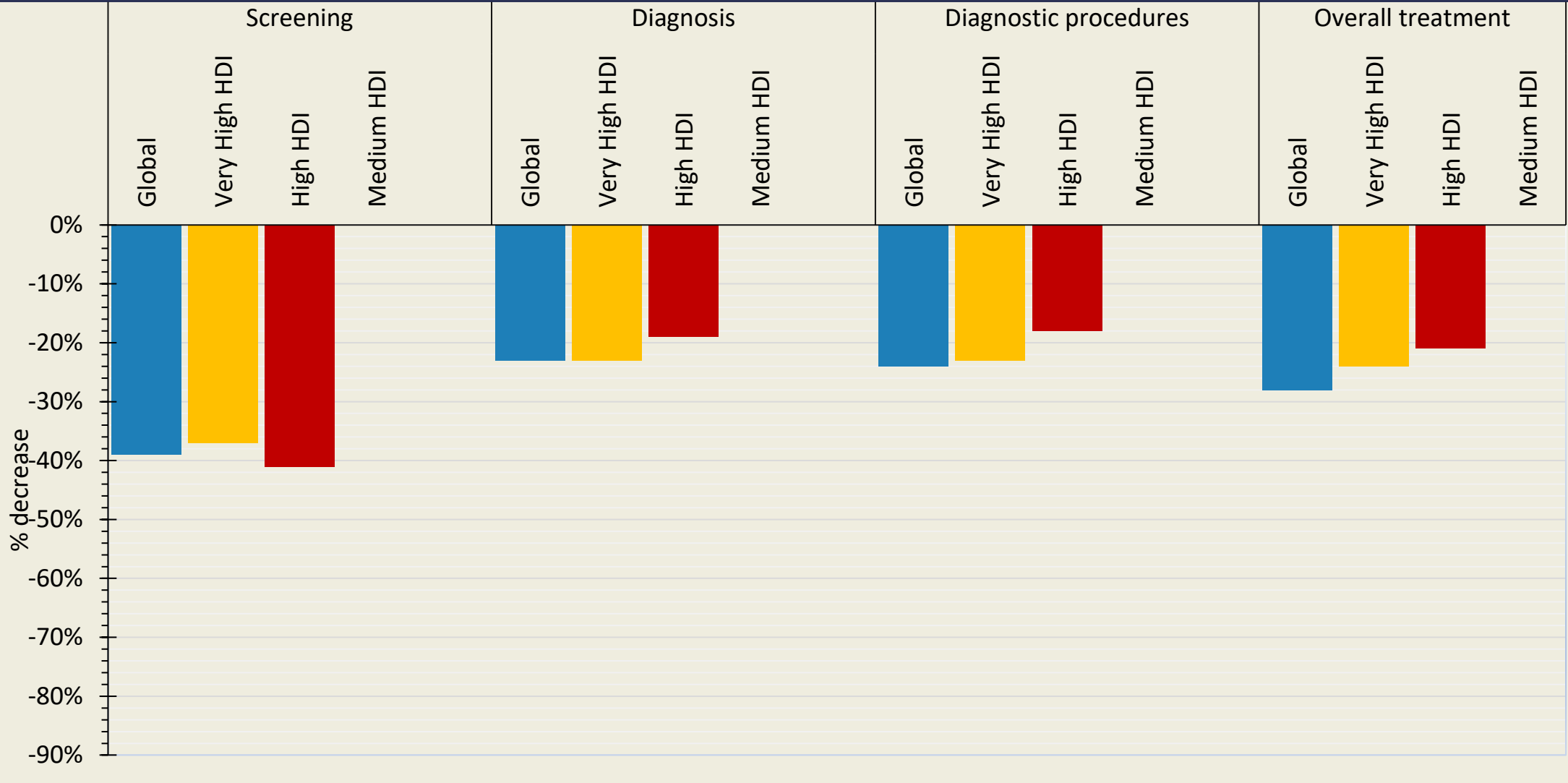
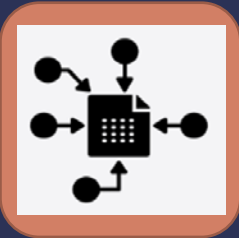
IARC C-19 Initiative: aims and ongoing activities



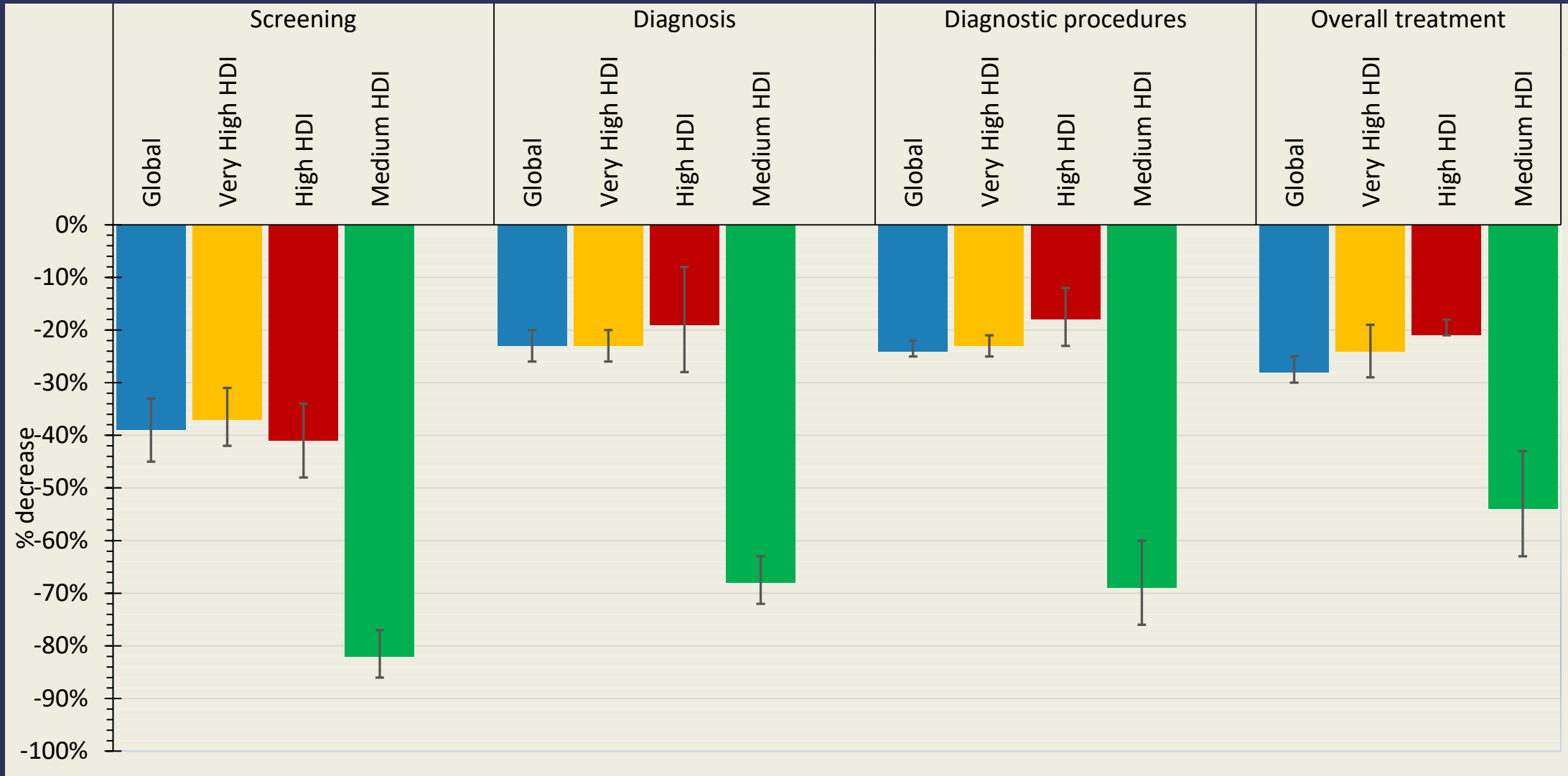
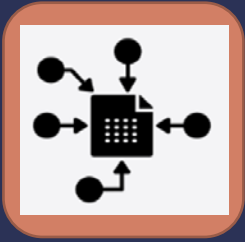
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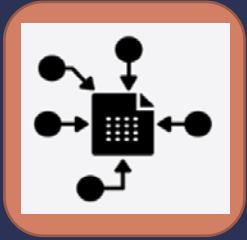
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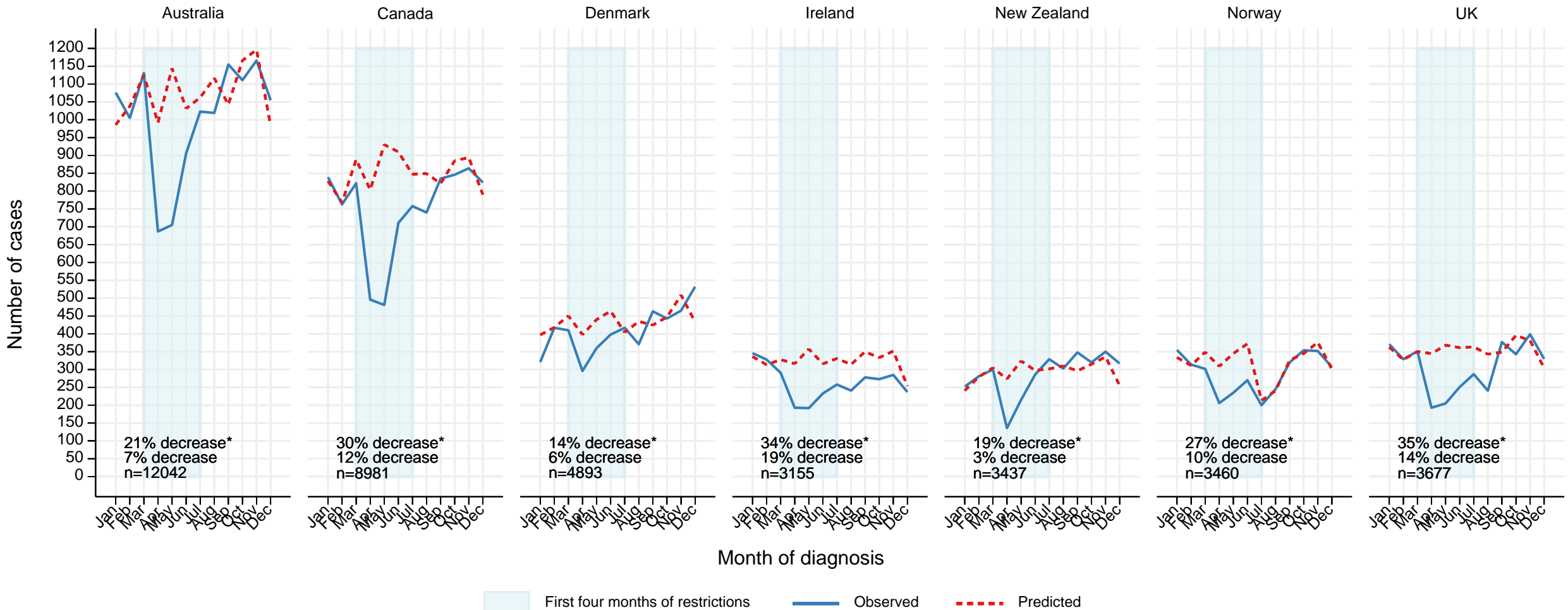
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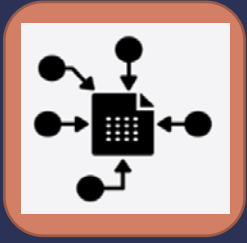
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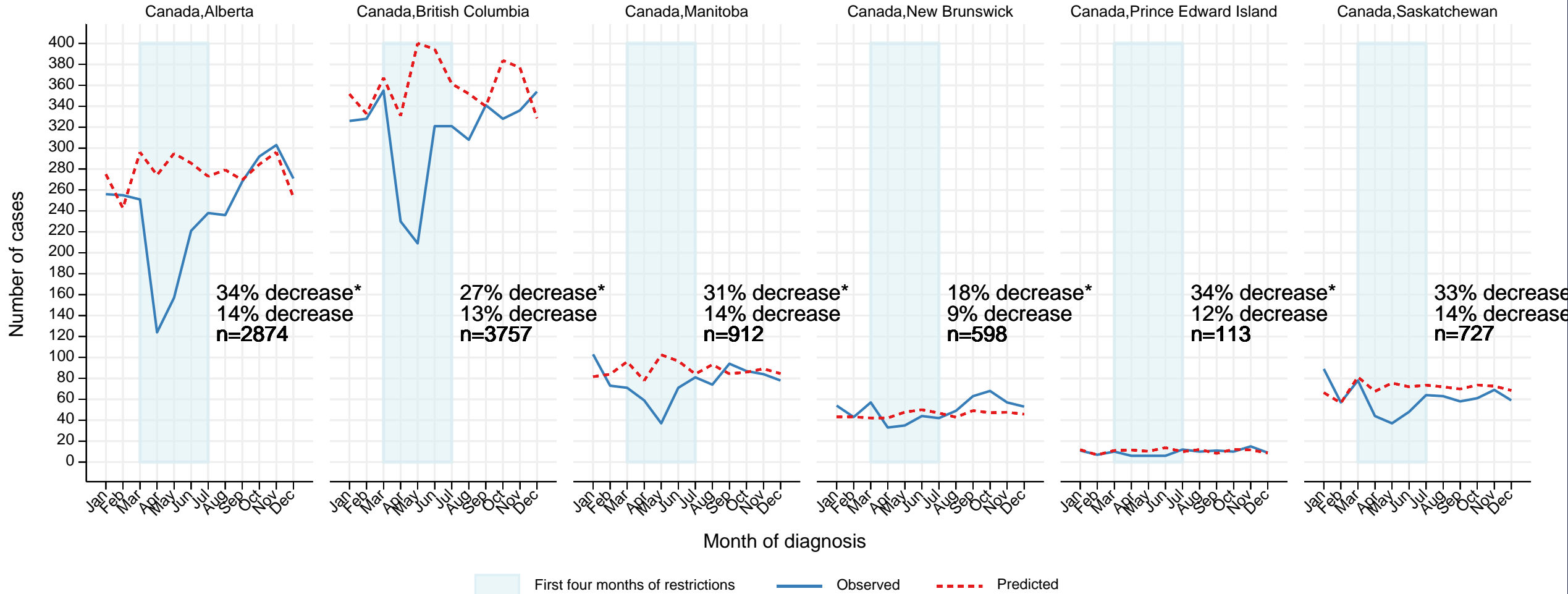
High quality population-based data



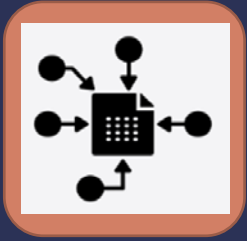
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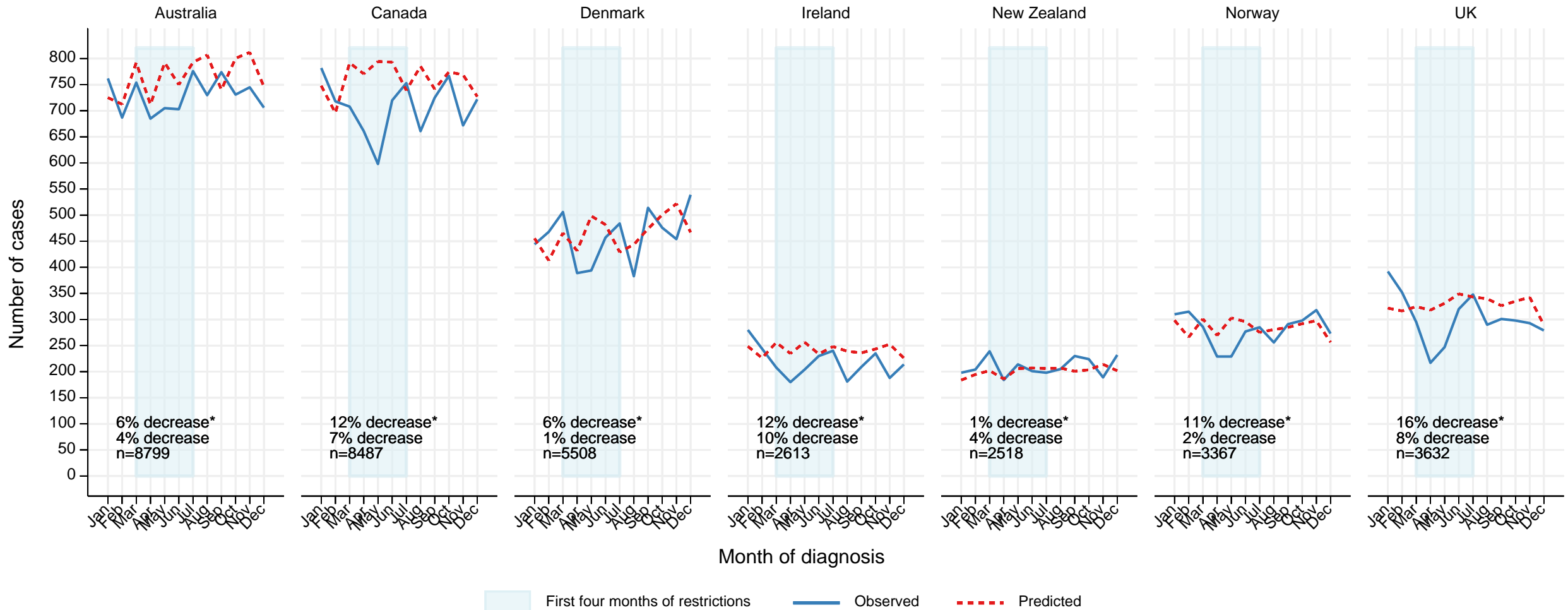
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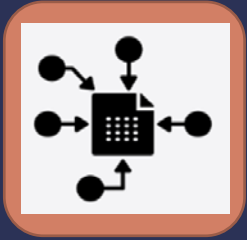
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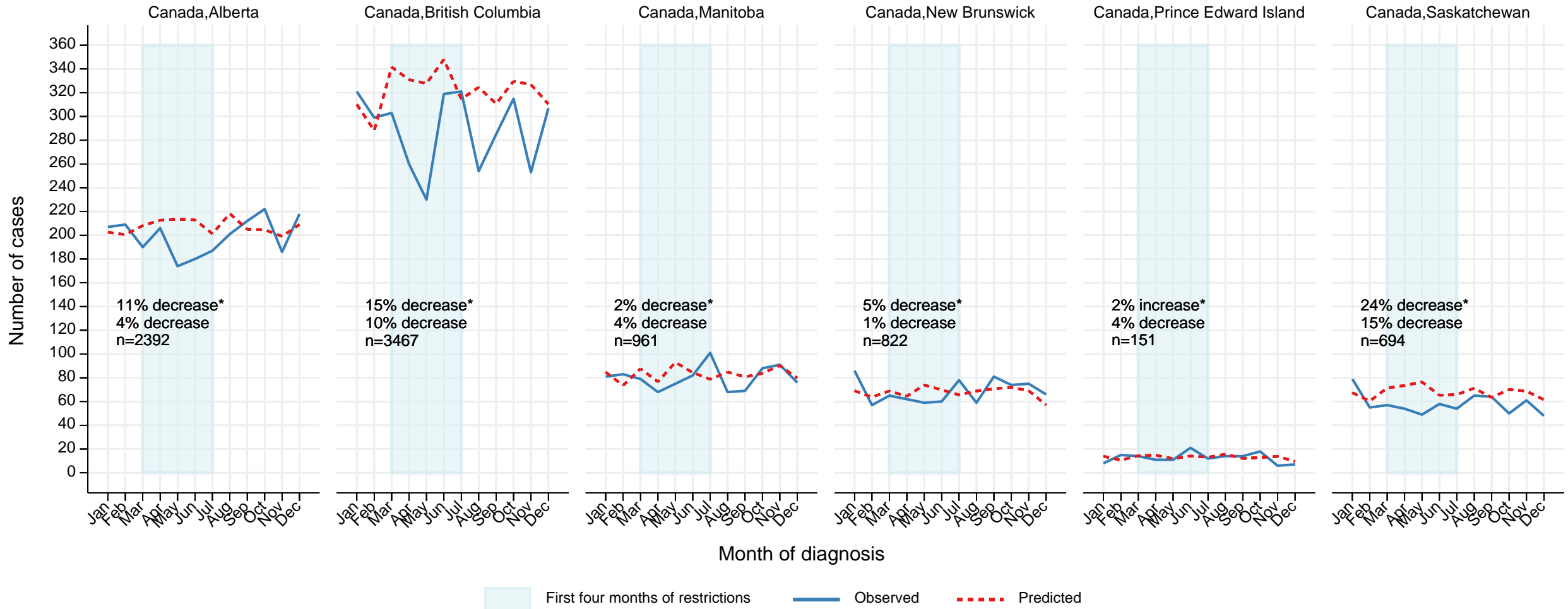
High quality population-based data



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High quality population-based data



IARC C-19 Initiative: aims and ongoing activities



2. Improve **health system resilience** of countries to provide guidance in building back better

International Agency for Research on Cancer | World Health Organization | **CERVICAL CANCER ELIMINATION** | About | Database | Visualization | Factsheets | References

Home / Dashboard | Summary | Cost input (csv) | Scenario description (xlsx) | Full data (csv)

Choose scenario

Populations(s) (1)

India

Scenario

D11

HPV vaccination

Single dose | Double dose

Start Year

90% by 2021 | 70% by 2023 | 90% by 2023

Target year

90% by 2021 | 70% by 2030 | 90% by 2030

Elimination accelerators

No | No | No | No | No | No

Reset

India
Vaccination scale-up starting in 2021, and Screening and Cancer treatment scale-up starting in 2023
Scenario : D11
Number of dose(s) :

Elimination year
2062

Return on investment *
\$4.04
* Per dollar spent over 50 years

Budget Impact

5-year	10-year
\$1.01B	\$1.96B

Cervical cancer ASR (World) (incidence) and elimination threshold

Lives saved

Year	Lives saved
2020	0
2025	~1,000
2050	~10,000
2070	~18,000
2120	~40,000

Cost of treatment (timeframe = 50 years)

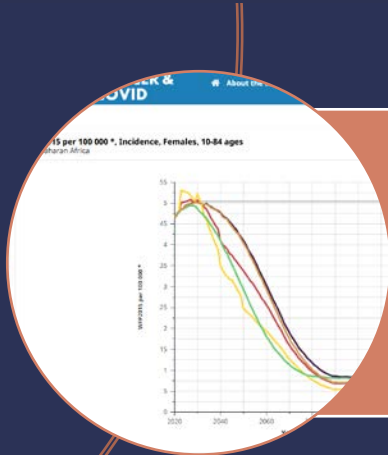
#	Resource	Number required in the first 5 years
1	Total cost	\$7 594M
2	Benefits	\$30 651M

Resource

#	Resource	Number required in the first 5 years
1	Prophylactic HPV vaccine doses	93 984 558
2	Primary screen	16880992

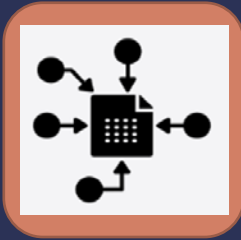
<http://tinyurl.com/cceiarc>

The IARC-C19 Initiative: priorities and expected outcomes



Building for tomorrow –
IARC C-19 and future plans

IARC C-19 Initiative: aim & next steps



Quantitative & qualitative data collection

Data call & workshops:

- Registry data: Incidence and survival by stage at diagnosis and treatment (protocol, support, & quality assurance)
- Qualitative assessment and reviews of cancer service disruptions

Assess impact of cancer service disruption:

- New cancer diagnoses incl. stage distribution)
- Case studies (lessons learned)

Estimate:

- National and global impact of the pandemic on cancer (survival and excess mortality)



Scenarios of delay impact and mitigation

Model hypothetical scenarios to represent range of different scenarios (best-buys) and disruptions of health care system at the national level and their impact on future excess mortality

Model adaptation and scale up strategies that can be adapted to national contexts to reduce expected mortality:

- Achievable and aspirational targets
- Adaptable timelines
- Include resources needed, return of investment



Knowledge dissemination

The global modelling platform will be housed at **IARC's Global Cancer Observatory**

Knowledge transfer

Technology transfer will enable IARC Participating States and partner countries from LMIC to second staff to IARC

Governance

International Advisory Panel

Executive Committee - Stakeholders from PS