American Cancer Society Outlines Blueprint for Cancer Control in the 21st Century

Eliminating socioeconomic disparity could prevent one in four cancer deaths in the United States

CAA Cancer Journal for Clinicians

The American Cancer Society is outlining its vision for cancer control in the decades ahead in a series of articles that begins publishing today. The series of articles forms the basis of a national cancer control

plan; a blueprint toward the control of cancer and a mortality reduction goal for the year 2035.

"It is our hope that this blueprint will be a call to action for cancer patients, family all Americans members of cancer patients, professional organizations, government agencies, the medical profession, academia, and industry to work together to implement what is known about cancer control," write the authors, led by Chief Medical Officer Otis W. Brawley, M.D., MACP. The

known about cancer control," write the authors, led by Chief Medical Officer Otis W. Brawley, M.D., MACP. The series is being published in *CA: A Cancer Journal for Clinicians*.

Despite a 25-year decline in mortality rate, cancer remains the second-leading cause of death in the United States and is expected to become the leading cause of death in the next decade. To refocus nationwide efforts, the ACS has assessed the successes and challenges in cancer control and oncology, identifying key issues that must be addressed and what interventions must be implemented to most efficiently control cancer. The series will focus on areas such as prevention, screening and early detection, cancer care and treatment, and research.

The first article, <u>now published</u>, assesses progress thus far in cancer control by reviewing trends in cancer mortality and disparities in cancer outcomes. It highlights mortality trends for several cancers that demonstrate successes and challenges in cancer control, and describes gaps in cancer mortality by race/ethnicity, economic and educational level, and region of residence. The report concludes: "Assessment of the outcomes data clearly demonstrates one vital fact. We can do better."

One area of critical disparity is in socioeconomic status. Using educational attainment as a surrogate of socioeconomic status, ACS epidemiologists in this report estimate that one in four current cancer deaths would not occur if all Americans had the cancer death rate of college educated Americans. Applying the death rate for the most educated group (bachelor's degree or above) to the entire population would lead to 59% fewer lung cancer deaths, 32% fewer colorectal cancer deaths, 19% fewer pancreas cancer deaths, and 50% fewer liver cancer deaths. In total, more than 150,000 of the estimated 610,000 cancer deaths in the U.S. in 2018 would not occur if all Americans had the same levels of cancer risk exposure and received the same amount and quality of care as college graduates.

"This calculation speaks volumes," write the authors. "The statistics demonstrate our obligation to deliver the fruits of already completed research to all Americans. They tell us what can be accomplished in cancer control without the development of new technology, new screening tests or new treatments."

Articles: Brawley OW, Gansler T, Wender RC (2018). Toward the Control of Cancer. CA Cancer J Clin. doi:10.3322/caac.21461 and Siegel RL, Jemal A, Wender RC, et al (2018). An Assessment of Progress in Cancer Control. CA Cancer J Clin. doi:10.3322/caac.21460

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