



ESMO Statement

71st session of the WHO Regional Committee for Europe, 13-15 September 2021 Agenda Item 5: Reinventing primary health care in the post-COVID-19 era

Honourable Chair, Esteemed Delegates,

The [European Society for Medical Oncology \(ESMO\)](#) is a global network of over 25,000 oncologists from more than 160 countries. ESMO's core mission is to improve the quality of cancer care, from prevention and diagnosis to palliative care and patient follow-up. It is to educate – doctors, cancer patients and the general public – on the best practices and latest advances in oncology, and to promote equal access to optimal cancer care for all patients.

ESMO welcomes the 'Draft resolution: realizing the potential of primary health care: lessons learned from the COVID-19 pandemic and implications for future directions in the WHO European Region'.

ESMO supports strengthening primary health care and achieving Universal Health Coverage (UHC) because health is a human right, not a privilege, and no cancer patient should be left behind without access to affordable quality cancer and palliative care services.

Cancer is a leading cause of death, yet many people have no access to essential health services, and many countries do not include cancer and palliative care services in their UHC benefit packages.*

Therefore, we urge WHO and Member States to prioritize high-impact investments in cancer care by accelerating implementation of the 2017 'Cancer Resolution' (WHA 70.12).

We call on governments to show strong, sustained political will to guarantee UHC benefit packages that ensure financial protection, and include a core set of comprehensive, safe, affordable, effective, and high-quality health services for the prevention, early detection, diagnosis, treatment, and palliative care of noncommunicable diseases, including cancer, delivered by an adequate, well-trained, and well-equipped workforce.

This would contribute to reducing cancer deaths worldwide, yield broad economic gains, and provide societal benefits. It requires:

1. Extensive government and community prevention programs inside and outside primary healthcare services. Between 30 and 50% of cancers can be prevented by avoiding risk factors and implementing existing evidence-based prevention strategies.**



2. Strengthening primary healthcare for early diagnosis, screening, immunization, and supportive and palliative care. The cancer burden can be reduced through early detection of cancer and appropriate treatment and care of cancer patients.**
3. Robust referral services across the entire continuum of healthcare to ensure timely access to secondary and tertiary facilities where cancer treatment is provided. Many cancer cases have a high chance of cure if detected on time and adequately treated.** Therefore, early diagnosis and screening are meaningful only if patients identified with cancer can access high-quality treatment options that are timely and affordable. To achieve this, governments must offer and cover a comprehensive set of essential cancer services to people, many of whom may have limited or no access to cancer care.
4. Building up the health workforce to increase treatment capacity by including funding for workforce education and training in national health and cancer control plans.
5. Collecting complete, accurate, and interoperable data through population-based disease registries for evidence-based healthcare planning, measuring health policy effectiveness, and demonstrating the number of lives saved.
6. Community programs to improve patient health and digital literacy.

We invite governments to draw upon ESMO resources for cancer management that can support achieving the 3 dimensions of UHC:

1. The [ESMO-ASCO Global Curriculum in Medical Oncology](#) supports training the necessary workforce to ‘increase population coverage’.
2. The evidence-based [ESMO Clinical Practice Guidelines](#) can guide decisions to cost-effectively ‘expand essential health services’.
3. The [ESMO-Magnitude of Clinical Benefit Scale \(ESMO-MCBS\)](#) can help prioritize cancer medicines to frame appropriate use of limited public and personal resources to ‘reduce the financial burden of health services’.

ESMO is proudly supporting WHO projects that facilitate inclusion of cancer services in national UHC packages to promote healthier lives for everyone everywhere.

Thank you.

*<https://canceratlas.cancer.org/taking-action/universal-health-coverage/>

**<https://www.who.int/news-room/fact-sheets/detail/cancer>