Announcing a New Section: Global Health and Cancer

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Cancer is a leading cause of death worldwide, accounting for 7.6 million deaths in 2008 [1] and affecting both rich and poor. By 2030, global projections suggest that 22.2 million new cancer cases will be diagnosed annually worldwide and mortality will increase to 13.5 million deaths [2]. Further, illness due to cancer costs the global economy between 2% and 4% of GDP each year. Yet many cancers are treatable or preventable through well-established and proven actions. Tobacco control and vaccinating girls against HPV are but two of the many examples of cost-effective public health interventions for preventing cancer [3].

This growing global cancer crisis represents a challenge to all health systems, and in particular to low and middle income countries (LMICs), as poverty and income disparities constitute not only barriers of access to cancer prevention and care, but also aggravators that increase and often determine cancer incidence, prevalence, morbidity, mortality, and suffering—including stigma and lack of pain control.

Data on the burden of cancer reflect these inequities: more than half of women diagnosed with breast cancer in LMICs die from their disease, compared with less than a quarter of women in high-income countries [4]. In the case of pediatric cancers, disparities are even more profound. In Canada, on average, 90% of children suffering from acute lymphoblastic leukemia (ALL) are cured, whereas in the poorest countries only 10% of children with ALL can hope for a cure [4].

Closing this global cancer divide—differences in incidence and mortality between the rich and poor—is an equity imperative and a priority for human, social, and economic development. Yet many myths around cancer care in LMICs impede action, and, despite glaring opportunities to address the cancer divide, global leadership to mount an effective response has largely been absent [5, 6].

Knowledge and evidence are essential to closing the global cancer divide and can con-

tribute significantly to preventing thousands of unnecessary deaths and reducing human suffering from cancer. In response to this health and equity imperative, *The Oncologist* is pleased and proud to announce a new section: “Global Health and Cancer.” The main goal of this section is to share novel and far-reaching research at the crossroads of global health and cancer with the global oncology community and to promote interaction between cancer specialists and leaders in the field of global health. Through this new section, *The Oncologist* strives to contribute to closing the global cancer divide, by sharing and promoting new knowledge that will both enhance global health and strengthen the global ability to meet the challenge of cancer. In this way, the new section on “Global Health and Cancer” will become a forum that promotes the joint learning and evidence sharing required to close the cancer divide.

In order to provide the richest possible array of inputs, this section of the Journal will include original research articles, reviews that summarize existing knowledge in novel ways, shorter commentaries on key topics of interest, updates on important health-related policies and development, as well as patient testimonies. We welcome articles that use quantitative and/or qualitative methods of analysis to explore health system and health policy issues related to cancer and cancer control. We are especially interested in empirical studies that will strengthen the evidence base for successful introduction of cancer programs or policies, including instances where implementation has not been successful but may provide policy lessons. A special focus on training will be built into this work. Student contributions are encouraged and a group of editors-in-training has been recruited to participate in the development of the section. All contributions will be subject to the rigorous yet expedient review process that characterizes *The Oncologist* as a leading academic and health journal.

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EDITORIAL TEAM

We are pleased to announce that the Editor of this section is Felicia Marie Knaul, Ph.D. in economics, Associate Professor at Harvard Medical School and Director of the Harvard Global Equity Initiative, where she serves as Secretariat Co-Chair for the Global Task Force on Expanded Access to Cancer Care and Control in Developing Countries.

Dr. Knaul will be joined by two co-editors, Dr. Rifat Atun, Professor of International Health Management at Imperial College London, and Dr. Eduardo Cazap, the founder and first President of the Latin American & Caribbean Society of Medical Oncology (SLACOM), and the immediate past President of the Union for International Cancer Control (UICC).

CALL FOR PAPERS

The Global Health and Cancer section will launch in October of 2013 with a series of papers on women's cancers, and the Editors welcome submissions by July 1, 2013 on this topic, focused on LMICs. Submit your manuscript online at manuscriptsubmissions.theoncologist.com.

We are pleased to announce that Dr. Julie Gralow, Director, Breast Medical Oncology, Seattle Cancer Care Alliance and the University of Washington, will serve as invited editor for this series.

In the first half of 2014, another call will be issued for papers on childhood cancers.

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