

# Improving cancer care coordination & screening in Latvia & Slovakia

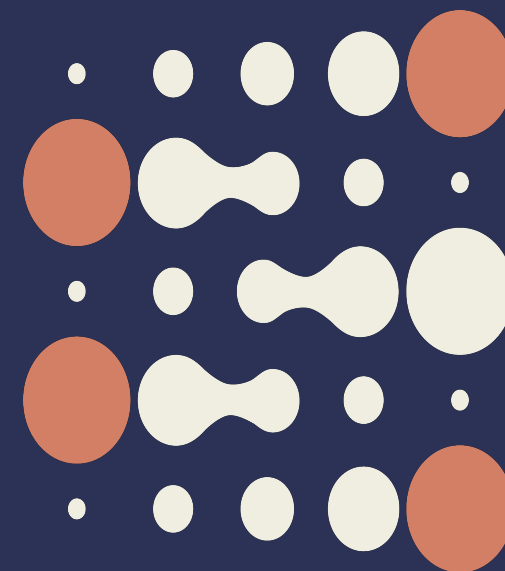
## *13CS Project – objectives & implementation plan*

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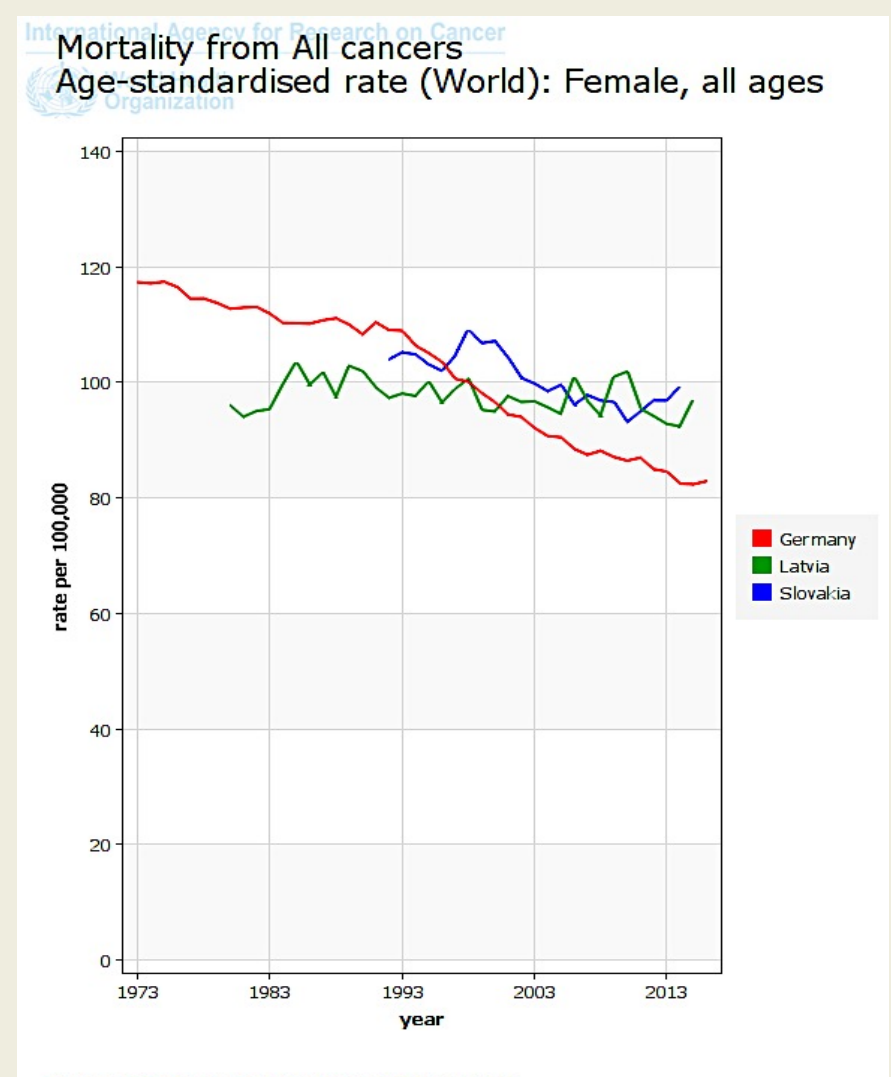
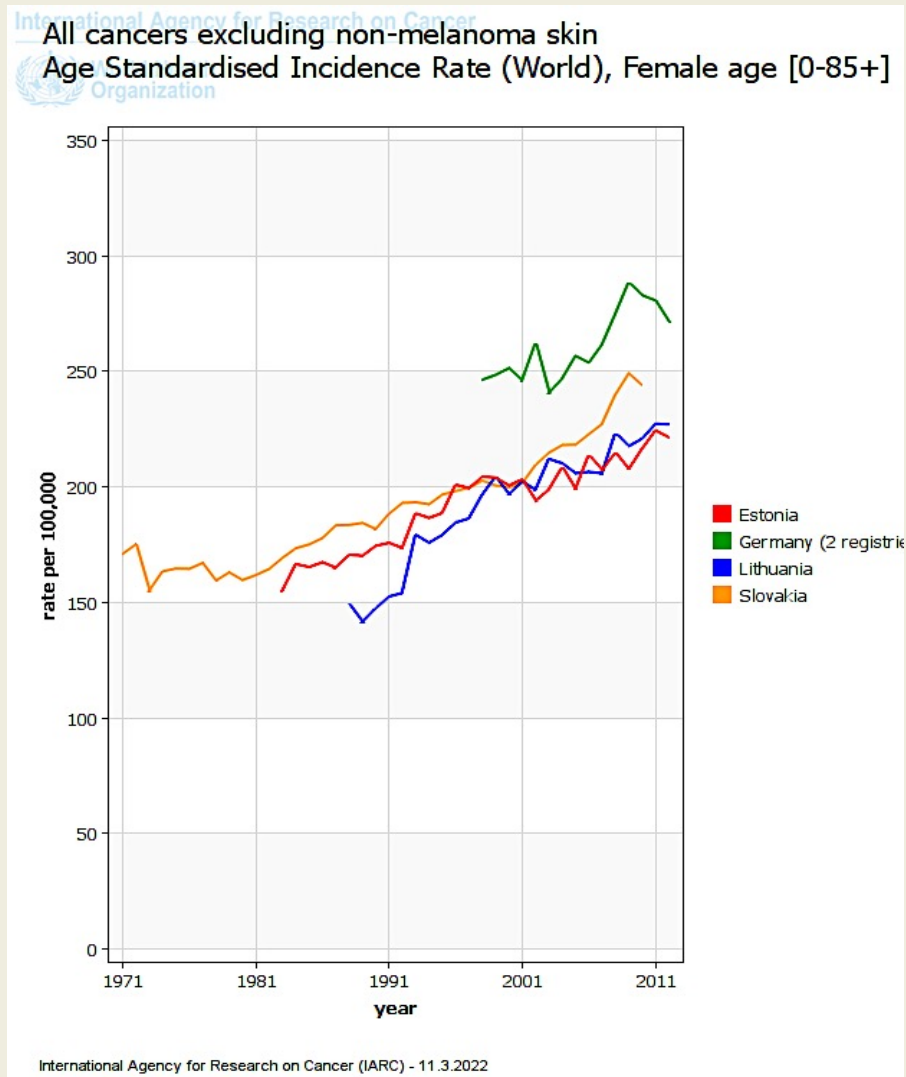


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# Reducing the inequalities in cancer care within Europe: primary objective of *13CS Project*

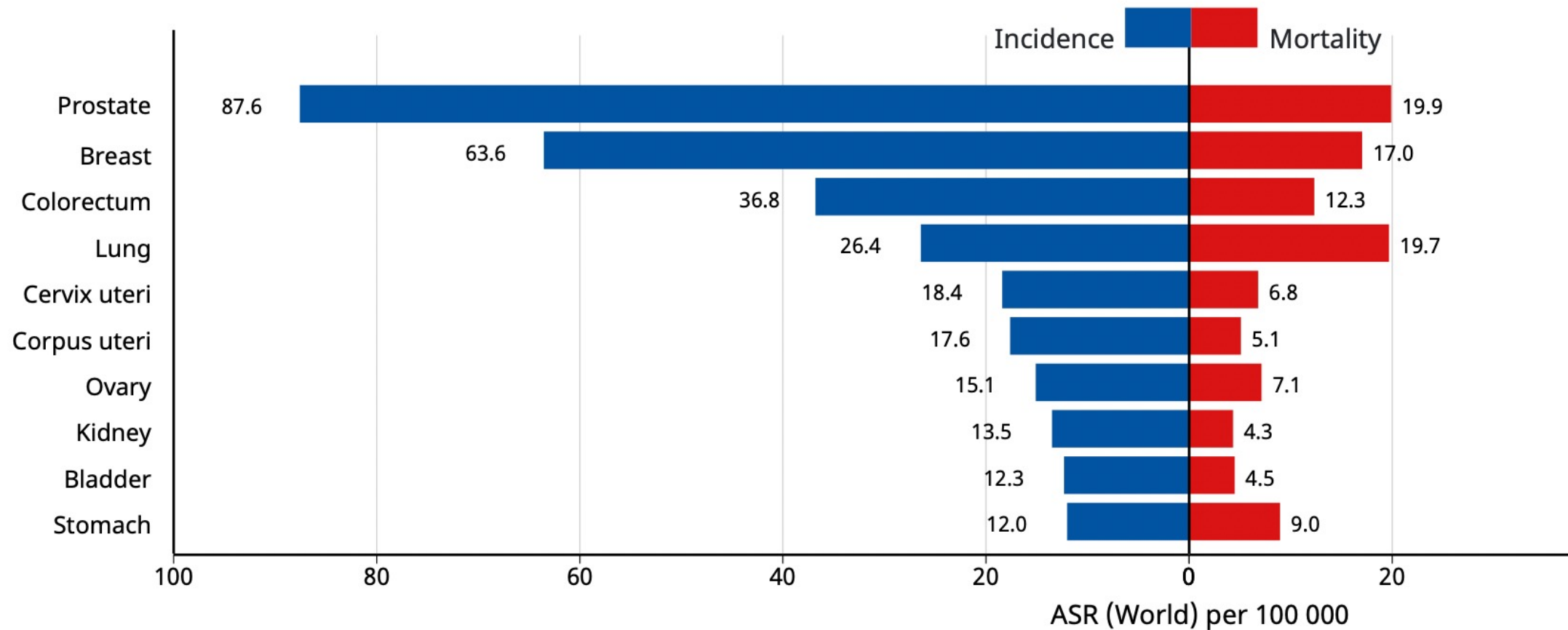


For Latvia: 12,373 new cases and 5,827 cancer deaths were estimated in 2020

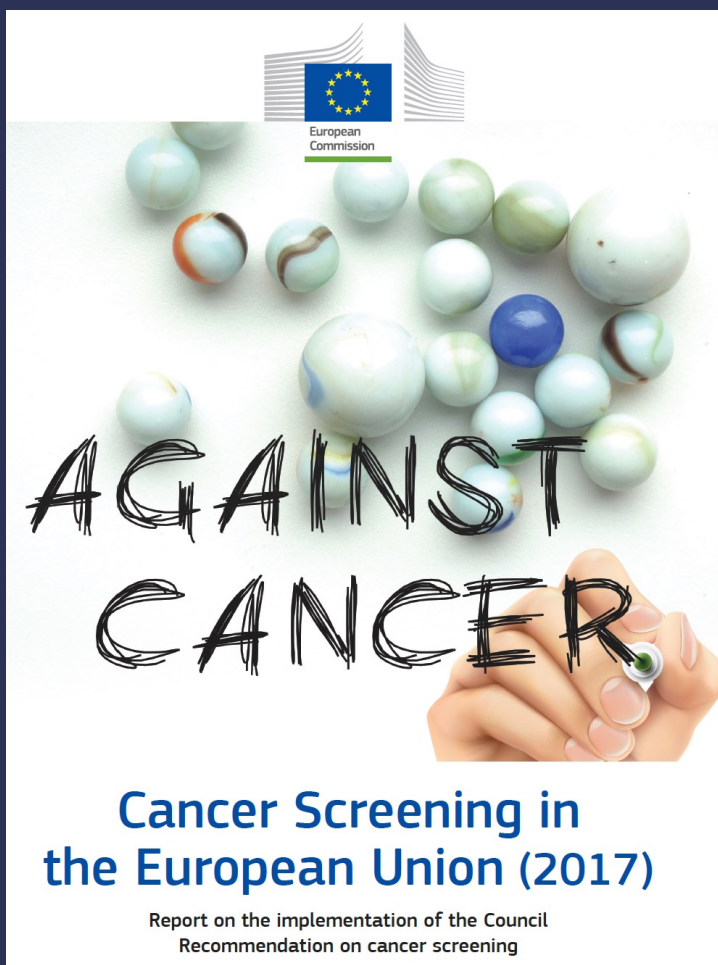
Rates (2003-2012) projected to 2020 and applied to 2020 population

# Latvia: Most common cancers are highly preventable &/or treatable

Age-standardized (World) incidence and mortality rates, top 10 cancers

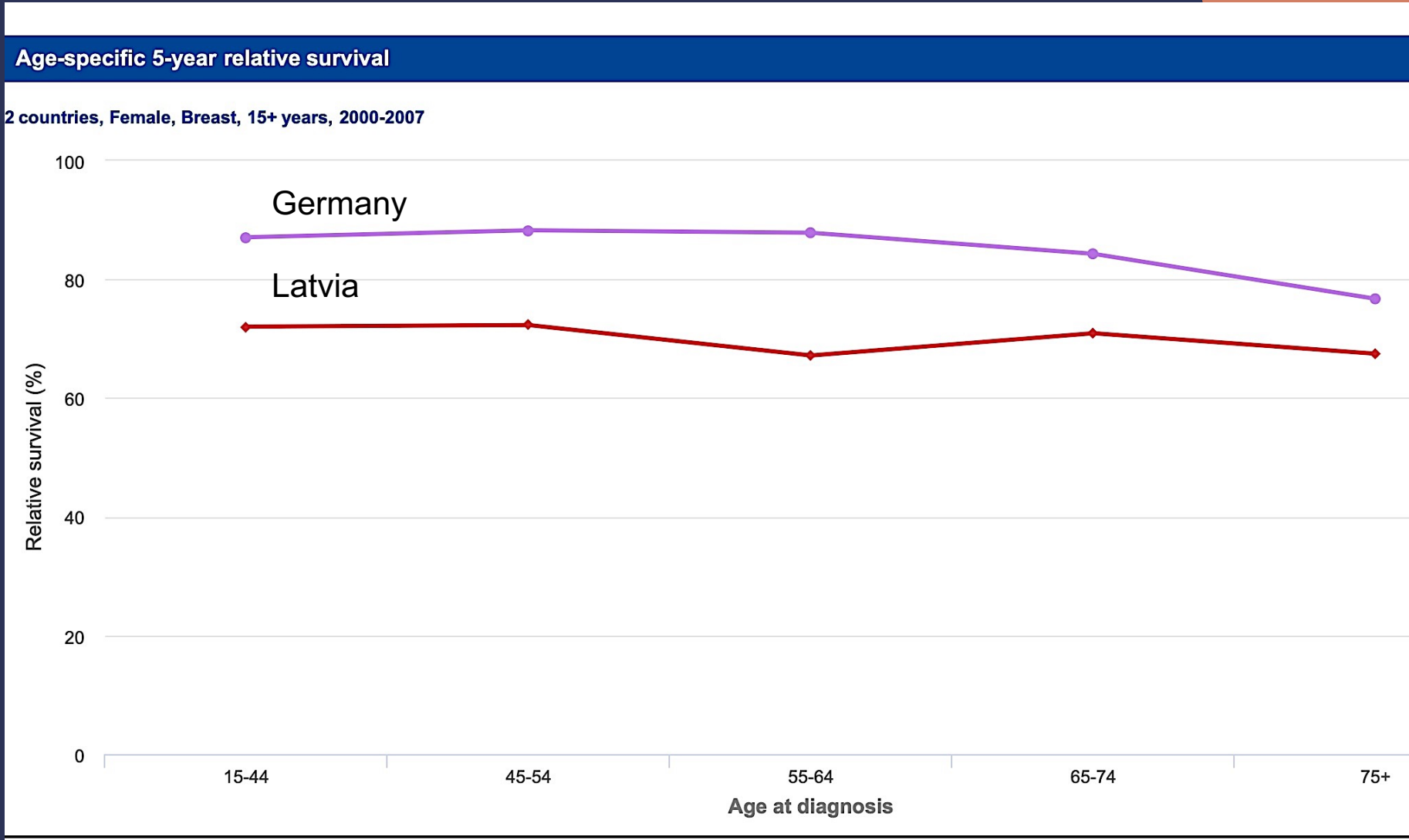


# Cancer screening performance in Latvia- the gaps



Key performance indicators	Breast cancer screening (initiated in 2009) (50-69 yrs; 2 yrly)	Cervical cancer screening (initiated in 2009) (25-69 yrs; 3 yrly)	CRC screening (initiated in 2009; 50-74 yrs; not yet po-based)
Invitation coverage (%):	98.4%	93.7%	
Participation rate (%):	53.8%	35.1%	
Examination coverage (%):	33.6%	32.9%	11.1%
Completeness of data related to screening test results (%):	0	0	100%
Further assessment rate (%):	?	?	?
Detection rates (%)	?	?	?

# Cancer survival – significant scope for improvement



# European Guide on Quality Improvement in Comprehensive Cancer Control



- Successful Cancer screening needs a **competent, multidisciplinary & transparent governance structure** with political, financial & stakeholder support
- Successful implementation of cancer screening requires **significant resources for quality assurance**
- Implementation of population-based screening should be a **multistep process**
- The **mandate and resources for the electronic information systems** must be secured before starting the population-based screening service
- **Routine linkage between various registries** for defining the population, performance and outcome is essential and an ethical requirement
- Regular monitoring of cancer screening should **detect social inequalities** and trigger research and interventions

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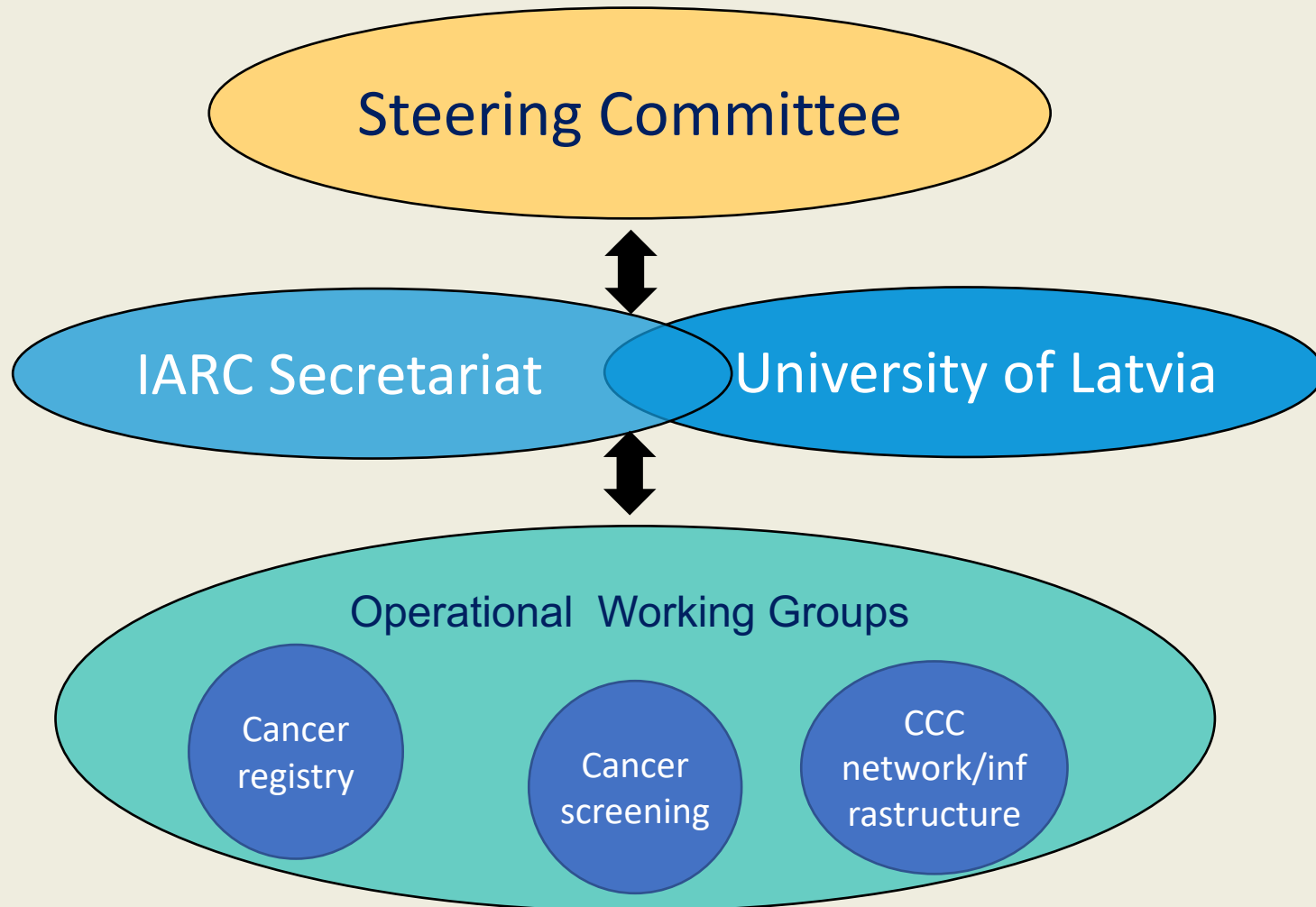


# *13CS Project-* **Specific Objectives**

- ✓ Develop **standard operating procedures** for population-based cancer registries with specified **quality control** procedures;
- ✓ Review national guidelines to implement population-based cancer screening programmes, **strengthening quality assurance**;
- ✓ Support introduction of a **tailored information system** to monitor and improve the screening programme
- ✓ Support a comprehensive cancer care and research infrastructure/network **accreditation process**

# Engaging the stakeholders

The SC will be composed of members representing the key stakeholders and contributions to the field of cancer continuum, representing all relevant aspects of the project.



The OWG will be composed of members with significant technical, scientific and programmatic experience and contributions to the field of cancer control



# Implementation of WP3

Map the services & data flow related to cancer screening continuum

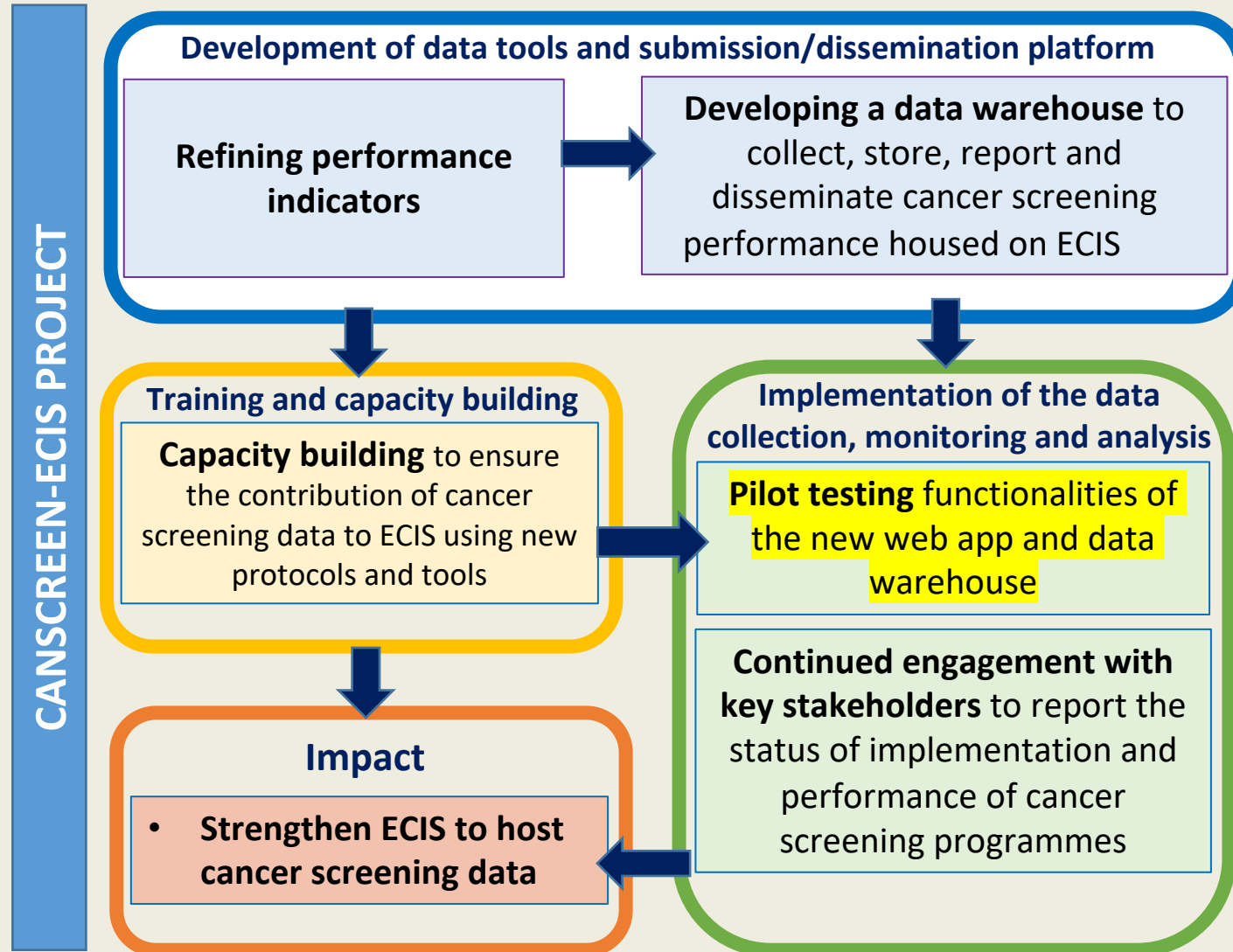
Site visits & interviews with stakeholders

Design the tools for screening evaluation and align the tech specifics of HIS to the tools

Collect data on organization/performance of cancer sscreening

Perform a SWOT analysis

# CanScreen-ECIS Project- (EU4H supported)



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*PI: Dr. André Carvalho*

Thank you

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World Health  
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