

The EUROMED Cancer Screening Network - lessons learned

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In 2010 the EUROMED Cancer Screening Network (ECSN) was instituted under the coordination of the Cancer Prevention Center of Piedmont (CPO) – WHO Collaborating Center for early detection and screening (financed by the Italian ministry of Health). Its aim is to assist public health decision-makers and healthcare professionals from non-EU Mediterranean countries* to develop cancer early detection programs through regular meetings, site visits, training activities, and data collection and analysis.

Lessons learned:

- Network sustainability: the political instability in some country with the related high turnover of country representatives and shortcoming of financial resources are the main constraint to the ECSN sustainability.
- Beyond the screening test: Screening is a process that goes from recruitment to the therapy. All the elements in this chain must be linked and a quality assurance system must be guaranteed. Without such an approach screening becomes ineffective and even unethical.
- From international guidelines to tailored recommendations: International cancer screening guidelines are highly context-related mainly referring to high-income countries. Introducing them in low-middle income settings requires a challenging but compulsory process.
- Promoting dialogue and enhancing alliances: To be part of an international networks increases the opportunity to share knowledge, open windows of dialogue and mobilize resources. Furthermore it encourages North-to-South and South-to-South cooperation.
- Competing health needs: attention given in high income countries to screening, due to its effect on cancer incidence and mortality, make it a 'must have' in areas presenting most compelling health needs. To adopt a global approach in setting health priorities is challenging when public health initiatives are conditioned by conflicting interests.

Conclusion

Notwithstanding difficulties and the need to adopt a public health approach, which is not complete fully grown everywhere, the ECSN has accepted these challenges and represents an opportunity to reduce the burden of cancer in limited resource settings.

* Albania, Algeria, Bosnia & Herzegovina (BiH), Republic of Srpska (BiH), Croatia, Egypt, Jordan, Kosovo, Lebanon, Montenegro, Morocco, Palestinian National Authority, Serbia, Syria, Tunisia, and Turkey.