

# **CDC Cancer Conference**

Meeting Future Challenges

Atlanta Hyatt Regency

August 13-16, 2007

# Major Themes

- Cancer Surveillance (Mon)
- Building Partnerships (Tues)
- Cancer Prevention Workforce & Public Health Policy (Wed)

# Day 1: Surveillance

- Meeting had 1,000 participants and 23 countries represented
- Brenda Edwards, PhD; Assoc Director, NCI
- Declining **death rates** from
  - Cervical cancer (steep decline)
  - Female breast cancer
  - Colon cancer
  - Prostate cancer

# Rising trends (incidence rates)

- Esophageal adenocarcinoma in men
- Thyroid papillary carcinoma in women
- Second primaries in cancer survivors
  - 15% of new cases are subsequent primaries
- Continuing disparities by race, ethnicity

# Future of Surveillance

- By Holly Howe, NAACCR Exec Director
- Better prognosis data for individuals
  - 16 y/o white female with HL and xyz genetic markers from Idaho: expected survival and future fertility
- Customized treatment choices for physicians
  - Consider genotypes, biomarkers

# Day 2: Partnerships - ACS

- John Seffrin, PhD; CEO of ACS
- Cancer is potentially the most preventable disease of our time
- 60% of cancer is preventable with lifestyle modifications
- Get active with CCCCs and partner with others (AHA, ADA, RWJ)

# Cancer Risk Factors

- Cigarette smoking attributable risk: 85% of lung cancer, 46% of oral and bladder cancer, 29% of all cancer combined
- Obesity: accounts for almost 40% of endometrial and esophageal cancer, 11% of colon cancer, and 9% of breast cancer
- Sun Exposure: 50-90% of skin cancer (melanoma, BCC, SCC) is due to solar ultraviolet radiation

# Forming Partnerships

- Arthur Himmelman, Consultant
- 4 Levels
  - Networking: information exchange
  - Coordinating: Altering activities for mutual benefit
  - Cooperating: Also share resources
  - Collaborating: All above, plus enhance the capacity of another (selfless)
- Partnership toolkit:  
<http://depts.washington.edu/ccph/>

# Day 3: Workforce and Public Policy

- Dr. Halverson, AR Director of Health
- Broad trends
  - Aging workers (avg age = 46)
  - Gen X want fun working environment
  - Technology – necessary, not optional

# C Change

- Collaborating to conquer cancer
- <http://www.c-changetogether.org/>
- Comprised of the nation's key cancer leaders from government, business, and nonprofit sectors
- Initiatives: Cancer workforce, Summer internships

# Cancer workforce shortages

- With the aging population, severe shortages in the cancer workforce are anticipated:
  - Oncology nurses
  - Radiation therapists
  - Cancer registrars
  - Social workers
  - Public health workers

# Building the Cancer Workforce

- C-Change Careers in Cancer Speaker Kit ( <http://www.speakerskit.org/> )
- Power Point for High School, College Students
  - What do you enjoy?
  - Consider the problem (cancer in society)
  - Consider your options
  - Careers in cancer

# Political Scientist's Perspective on Cancer Policy

- Thomas Oliver, PhD, MHA; U of MD
  - Success of breast cancer screening, awareness, and research couched in women's movement of the 1970s
  - Tobacco control tipping point after evidence re addiction, child targeted advertising, effects of 2<sup>nd</sup> hand smoke, and cost of medical care to taxpayers

# Oliver on HPV Vaccine

- Public outrage regarding
  - Perception that Merck over reached its bounds in lobbying for its vaccine
  - Perception that giving the vaccine would send mixed messages to young girls (age 11-12), just like distributing condoms at school when the message at home is abstinence
  - We'll see what happens next

# Summary

- Cancer Surveillance – Getting more and better information
- Partnerships – Academic, corporate, and public health
- Workforce – Building capacity
- Public Policy – Driving cancer prevention