



ANCCA Sub-Committee eMtg.22.6 (Jun 2) – Minutes of Meeting (final)

Meeting Time (70 minutes)	From	To
Sri Lanka	12:30	13:40
Nepal	12:45	13:55
Bhutan, India	13:00	14:10
Indonesia, Laos, Vietnam	14:00	15:10
Brunei, China, Malaysia, Philippines, Singapore	15:00	16:10
Japan, Korea	16:00	17:10

Participants (27 participants from 14 countries & organizations)

1. Bhutan (BT): Mr Kinley Tshering
2. Brunei (BR): Dato Dr Babu Sukamaram, Dr Ong Sok King and Datin Dr Noraslinah Hj Ramlee
3. China (CN): Dr. Zhang Yawei, Dr Wenqiang Wei, Dr Hong Mei Zeng, Dr Yu Tang, Dr Ning Li
4. India (IN): Dr Manju Sengar
5. Japan (JP): Dr. Tomohiro Matsuda, Dr Sarah Abe, Dr Laureline Gatellier
6. Korea (KR): Mr Jong Soo Han
7. Laos (LA): Dr Champadeng, Dr Mai Thitsamay
8. Malaysia (MY): Dr Anis Haron, Dr Siti Norbayah, Dr Nor Saleha, Dr Suhana Yusak
9. Nepal (NP): Dr. Kishore Pradhananga, Dr Prakash Raj Neupane and Dr Savana Pradhan
10. Philippines (PH): Dr. Clarito U. Cairo /
11. Singapore (SG): Mr Koh Liang Kai, Mr. Muhammad Taufiq Bin Jaafar
12. Sri Lanka (SL): Dr Eshani Fernando, Dr Suraj Perera and NCC Sri Lanka team
13. Vietnam (VN) Dr. Huong and Dr. Giang
14. C/Can: Dr Thet Ko Aung

1. SC2 (NCCP) led by Dr Matsuda

1.1. Subcommittee

- Subcommittee that focuses on National Cancer Control programmes. There is an ongoing effort to investigate on the existing cancer control programmes of each country, as well as the pillars of each programme.
- Aim of establishing an Asian common cancer control programme among ANCCA. Although cancer is a non-communicable disease, this effort may align and assist in managing the cancer burden more efficiently.

1.2. Sri Lanka NCCP

- Cancer Control Programme in Sri Lanka launched in 2016. There 7 policy objectives / pillars: 1) Leadership and governance, 2) Prevention through health promotion, 3) Early detection 4) Diagnosis and treatment, 5) Survivorship and rehabilitation 6) Strategic information 7) Research on prevention and control
- Currently, Sri Lanka National Advisory Committee (NAC) has made the decision to establish one Cancer Early Detection centre per district and establish breast clinics in all District General hospitals and above. These clinics are on a walk-in basis. Under diagnosis and treatment, 28 hospitals are equipped with cancer treatment facilities.
- Cancer facilities survey among provincial cancer treatment hospitals was conducted; radiotherapy was not available in two hospitals and brachytherapy is not available in most centres. Palliative care is provided by hospitals and hospices. A standard operating procedure has been developed for the hospice program in Sri Lanka.
- Cancer registries are published annually, and the earliest available data is from 2019. Each cancer treatment centre is to publish their own cancer registry from 2020.



1.3. Nepal NCCP

- Cervical cancer is a public health concern, from the 2018 statistics, approximately 3000 new cases are diagnosed annually.
- Tests for detection are available, potentially curable in the precancerous stage, but are in a primitive stage in Nepal.
- In 2010, national guidelines for Cancer centre screening programmes were developed and implemented under the support of WHO. The goal is to screen 50% or more of the population aged 30 -60 years, once in 5 years amounting to 3 million women per year. However, healthcare service provides to less than 50%.
- Nepal lacks a population-based cancer registry.
- Women in Nepal are unable to enjoy basic health rights due to various reasons, which includes the prevalence of inequality.
- Collaboration with ANCCA will benefit Nepal in combating cancer and eliminating cervical cancer.
→ **Action:** Dr Matsuda will coordinate further with the collaboration of Giang (VN). Other members to add comments in attached SurveyMonkey at the end of these Meeting Minutes

2. SC3 Asian Code Against Cancer Manuscript

- 2.1. Dr Sarah Abe shared on the infographic to be included in the manuscript and welcomed any comments or suggestions
→ **Action:** all members to collaborate whenever contacted by Sokking and Sarah

3. SC4 China Cancer registry

- 3.1. Cancer registry in China dates back to the 1960s but the National Cancer Centre registry was only formally established in 2002. Currently there are 2085 country level registries covering the 1.45 billion population. China has established a system of annual publications to release information on cancer as well as a standard dataset cancer registration through the National Cancer Centre Registry Information Network and Platform.
- 3.2. Ongoing action plan for cancer prevention and control with 8 large actions laterally across the country.
- 3.3. In international communications, China is IARC's regional representative, WHO NCD's Consultant member and IARC-NCC's Collaboration centre
- 3.4. International trainings – China-Japan-Korea and ASEAN training programme for cancer registry saw more than 2500 participants last year. The APEC regional workshop was also organized last year.
- 3.5. In this subcommittee, China would want to promote opportunities that would enhance communication, training, and research. The suggestion was raised to invite directors from IARC and ANCCA with each country having at least one representative. Membership of subcommittee suggested to be extended to professionals from all levels to build up contact information and form an informal network to move forward.
→ **Next steps** to be discussed within **SC4** between China (as leader) and participating members members – To all: Please fill the **SurveyMonkey** at the end of these MoM

4. SC5 Education and Training

- 4.1. UICC-NCCCK Technical Fellowship. 1 participant from Vietnam has successfully completed last year. This year, 1 fellow from China and 1 from Mongolia from the 2021 applicants will be going for training in Korea. Only 3 fellows from ANCCA members have applied in this year's application window. In June, the shortlisted applicants will be informed and in July, the final successful applicant will be notified by UICC directly.
- 4.2. NCC Japan is hosting a seminar on July 5th, 10 a.m. (Japan Time) in English. Zoom Meeting ID : 924 4684 1142 (passcode : 326265). Speaker : Dr. Jae Hee Kang, Harvard Medical SchoolTopic: Updates on dietary studies in the US Nurses' Health Study (in English)



5. SC6 Clinical trials:

5.1. CAM Survey results → Only 5 respondents for the survey, hence it is not enough to share conclusive results. The subcommittee hopes to receive more responses and possibly share the results in the future.

→ **Action:** To All: please fill or forward to relevant members the survey attached

5.2. China clinical centre aims to have more collaborations with ANCCA members and hopefully to share more in the near future.

6. Overall Management of new or active subcommittees

6.1. To confirm the name of the subcommittee and who would be the leader and members.

→ **Optional action: To All:** Please fill the **SurveyMonkey** to allow most efficient management of everyone's time and priorities

<https://www.surveymonkey.com/r/2SXQ7W8>



★ Next ANCCA monthly subcommittee e-meeting: July 7th, same time (1 hour) ★

★ Next ANCCA quarterly regular e-meeting: Aug 11th, same time (1.5 hour) ★

Thank you all for the great participation and contribution to our ANCCA activities!

