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A New, Harmonized Approach Takes a Stand against Rising Rates and Poor Outcomes for Cancer in Sub-Saharan Africa

National Comprehensive Cancer Network introduces targeted regional resources created in collaboration with the African Cancer Coalition, the American Cancer Society, and the Clinton Health Access Initiative.

FORT WASHINGTON, PA [November 8, 2017] — The National Comprehensive Cancer Network® (NCCN®) debuted brand new NCCN Harmonized Guidelines™ for Sub-Saharan Africa in Kigali, Rwanda today. These targeted recommendations, based on the NCCN Clinical Practice Guidelines in Oncology (NCCN Guidelines®), were created in a joint effort by NCCN and the African Cancer Coalition, and presented for the first time as part of the African Organisation for Research and Training in Cancer (AORTIC) conference. The NCCN Harmonized Guidelines™ creation is part of a collaborative effort to combat the skyrocketing cancer rates and unique care circumstances in Sub-Saharan Africa. The collaboration also includes the American Cancer Society (ACS) and the Clinton Health Access Initiative (CHAI).

“There are unique challenges for patients with cancer in this part of the world, but also many reasons to be hopeful,” said Robert W. Carlson, MD, Chief Executive Officer, NCCN. “Fewer than 10% of people with cancer in Sub-Saharan Africa currently receive pain relief, chemotherapy, or radiation1. But the endless creativity, compassion, and knowledge of the oncologists in the African Cancer Coalition is inspiring. By working together across the global community, we can make tremendous strides to address the rising mortality and poor early detection rates.”

“This extraordinary collaboration between African oncology experts and NCCN will make it easier for oncologists to access up-to-date clinical guidance and ensure the highest standard of care for their patients,” said Meg O’Brien, PhD, managing director of Global Cancer Treatment at the American Cancer Society. “The NCCN Harmonized Guidelines empower patients and providers to focus on what is practical, achievable, and effective at present, while providing a template for future improvements and advances.”

The African Cancer Coalition is comprised of more than 40 oncologists from 12 countries throughout Sub-Saharan Africa. Working with NCCN Guidelines® panel members, they created the first eight NCCN Harmonized Guidelines™ for Sub-Saharan Africa. The NCCN Harmonized

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Guidelines™ offer two tiers of treatment recommendations for breast, cervical, and prostate cancers, as well as B-cell lymphomas, chronic lymphocytic leukemia/small lymphocytic lymphoma, Kaposi sarcoma, adult cancer pain, and palliative care. The different versions provide specific recommendations depending on access to resources like radiation equipment or laparoscopic surgical tools.

“It was a gratifying and inspiring experience to collaborate with, and learn from, our Sub-Saharan colleagues, who do hands-on work solving problems for patients every day,” said Wui-Jin Koh, MD, Seattle Cancer Care Alliance. Dr. Koh was one of several NCCN Leadership and Guidelines Panel Members to travel to parts of Africa for this initiative, along with Dr. Carlson; Joan McClure, MS, NCCN; Maria Dans, MD, Siteman Cancer Center at Barnes-Jewish Hospital and Washington University School of Medicine; James Mohler, MD, Roswell Park Cancer Institute; and Andrew Zelenetz, MD, PhD, Memorial Sloan Kettering Cancer Center.

Dr. Koh continued: “While these physicians know how to provide top-level care, they are often hamstrung by a lack of access to equipment and long wait times before treatment. Working together, we were able to distill the most important elements of care management, and prioritize treatments that provide effective outcomes even when resources are limited. For example, in cervical cancer, which has a very high incidence in this region, combining chemotherapy and surgery helped patients where radiation therapy wasn’t available.”

CHAI also worked closely with NCCN and ACS to support the harmonization process and is engaging the African Cancer Coalition more broadly around access to medicines. CHAI recently worked with ACS to develop partnerships with two leading drug manufacturers, enabling six countries in Sub-Saharan Africa to realize significant savings on the procurement of 16 essential chemotherapies, while simultaneously facilitating a shift to high-quality medicines.

In many ways, this initiative is modeled after the success of past HIV efforts, and also necessary because of them. As life expectancy increases in the area, more and more people are being diagnosed with various cancers. This project also inspired the creation of brand new NCCN Guidelines for AIDS-related Kaposi sarcoma, which accounts for 12% of cancer diagnoses for people living with HIV in the United States, but occurs much more frequently in Sub-Saharan Africa.

“Developing high-quality, standardized treatment guidelines was an important step in the early days of scaling up HIV treatment. These cancer treatment guidelines will help to improve quality of care and organize the market around optimal cancer treatment regimens,” said CHAI CEO Ira Magaziner.

“This work fits perfectly with our vision to define and advance high-quality, high-value cancer care across the world,” said Dr. Carlson. “We’re proud to have played an important role in this collaboration to create Guidelines that help people with cancer secure the best treatment they can, no matter where they live.”

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About the African Cancer Coalition
The African Cancer Coalition comprises oncologists from Sub-Saharan Africa who are working together to improve access to high-quality cancer treatment. Co-chaired by Honourable Minister Isaac Adewole, Nigeria’s health minister, and Dr. Jackson Orem, Director of the Uganda Cancer Institute, the Coalition has 40+ members from 12 countries that are home to 55% of the cancer cases in Sub-Saharan Africa. We are joining forces to strengthen clinical guidelines, training, and

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technical collaboration to ensure that all people with cancer get access to effective, affordable treatment.

About the American Cancer Society
The American Cancer Society is a global grassroots force of nearly 2 million volunteers dedicated to saving lives, celebrating lives, and leading the fight for a world without cancer. From breakthrough research, to free lodging near treatment, a 24/7/365 live helpline, free rides to treatment, and convening powerful activists to create awareness and impact, the Society is the only organization attacking cancer from every angle. For more information go to www.cancer.org.

About the Clinton Health Access Initiative
Founded in 2002, by President William J. Clinton and Ira C. Magaziner, the Clinton Health Access Initiative, Inc. ("CHAI") is a global health organization committed to saving lives, reducing the burden of disease and strengthening integrated health systems in the developing world. Learn more at www.clintonhealthaccess.org.

About the National Comprehensive Cancer Network
The National Comprehensive Cancer Network® (NCCN®), a not-for-profit alliance of 27 leading cancer centers devoted to patient care, research, and education, is dedicated to improving the quality, effectiveness, and efficiency of cancer care so that patients can live better lives. Through the leadership and expertise of clinical professionals at NCCN Member Institutions, NCCN develops resources that present valuable information to the numerous stakeholders in the health care delivery system. As the arbiter of high-quality cancer care, NCCN promotes the importance of continuous quality improvement and recognizes the significance of creating clinical practice guidelines appropriate for use by patients, clinicians, and other health care decision-makers.

The NCCN Member Institutions are: Fred & Pamela Buffett Cancer Center, Omaha, NE; Case Comprehensive Cancer Center/University Hospitals Seidman Cancer Center and Cleveland Clinic Taussig Cancer Institute, Cleveland, OH; City of Hope Comprehensive Cancer Center, Los Angeles, CA; Dana-Farber/Brigham and Women’s Cancer Center | Massachusetts General Hospital Cancer Center, Boston, MA; Duke Cancer Institute, Durham, NC; Fox Chase Cancer Center, Philadelphia, PA; Huntsman Cancer Institute at the University of Utah, Salt Lake City, UT; Fred Hutchinson Cancer Research Center/Seattle Cancer Care Alliance, Seattle, WA; The Sidney Kimmel Comprehensive Cancer Center at Johns Hopkins, Baltimore, MD; Robert H. Lurie Comprehensive Cancer Center of Northwestern University, Chicago, IL; Mayo Clinic Cancer Center, Phoenix/Scottsdale, AZ, Jacksonville, FL, and Rochester, MN; Memorial Sloan Kettering Cancer Center, New York, NY; Moffitt Cancer Center, Tampa, FL; The Ohio State University Comprehensive Cancer Center - James Cancer Hospital and Solove Research Institute, Columbus, OH; Roswell Park Cancer Institute, Buffalo, NY; Siteman Cancer Center at Barnes-Jewish Hospital and Washington University School of Medicine, St. Louis, MO; St. Jude Children’s Research Hospital/The University of Tennessee Health Science Center, Memphis, TN; Stanford Cancer Institute, Stanford, CA; University of Alabama at Birmingham Comprehensive Cancer Center, Birmingham, AL; UC San Diego Moores Cancer Center, La Jolla, CA; UCSF Helen Diller Family Comprehensive Cancer Center, San Francisco, CA; University of Colorado Cancer Center, Aurora, CO; University of Michigan Comprehensive Cancer Center, Ann Arbor, MI; The University of Texas MD Anderson Cancer Center, Houston, TX; University of Wisconsin Carbone Cancer Center, Madison, WI; Vanderbilt-Ingram Cancer Center, Nashville, TN; and Yale Cancer Center/Smilow Cancer Hospital, New Haven, CT.

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