



## MYTH 02

### THERE ARE NO SIGNS OR SYMPTOMS OF CANCER

**Truth:** For many cancers, there are warning signs and symptoms and the benefits of early detection are indisputable



#### RECOGNISE SIGNS AND SYMPTOMS

**It is important for individuals, communities, health professionals and policy makers to be aware of, and educated in recognising the signs and symptoms for cancer (where possible).**

##### Evidence

- It is true that early signs and symptoms are not known for all cancers, but for many cancers, including breast, cervical, skin, oral and colorectal cancers, and some childhood cancers, the benefits of early detection are indisputable.
- Awareness is the first step to early detection and improving cancer outcomes. Whilst some of the cancers with the poorest survival rates, such as ovarian and pancreatic cancers, rarely show early warning signs, cancer researchers globally are seeking innovative ways to improve early detection and develop new tests for early diagnosis for these cancers.
- With few exceptions, early stage cancers are more treatable than late stage cancers.

## Evidence (continued)

- Equipping primary healthcare workers with the appropriate knowledge and tools to recognise the warning signs and symptoms of cancer is essential to reduce the likelihood of misdiagnosis and ensure prompt referral to specialist medical care at an early stage of the disease.
- Strategies for help-seeking behaviour should be encouraged.
- Recognition of early warning signs of some cancers is particularly relevant in low resource settings – it is cost-effective and in some cases does not require any specialist diagnostic technologies. E.g. clinical breast examination (CBE) performed by primary healthcare workers has the potential to detect cancers earlier, particularly in areas where the majority of breast cancers are diagnosed at an advanced stage.

## EARLY DETECTION

Early detection is multifaceted. Strategies that raise awareness about cancer and the importance of seeking care when symptoms are present, along with interventions for early diagnosis have the greatest chance of improving cancer outcomes.

## ACHIEVING EQUITY IN EARLY DETECTION

### Achieving equity in cancer early detection and care should be a priority.

#### Evidence

- In low resource settings, many cancers are being diagnosed at a late stage due to:
  - A lack of investment in cancer services, particularly at the primary healthcare level.
  - Limited awareness about the value of early diagnosis and the importance of seeking care when signs and symptoms are present, even among health professionals.
  - Proliferation of myths and misconceptions about cancer diagnosis and treatment, stigma, gender and social inequities, can lead individuals to seek alternative care in place of standard treatment or to avoid care altogether.
- For cervical cancer, studies have shown that even a single screening between the ages of 30 and 40 can reduce a woman's lifetime risk of cervical cancer by one third.
- For colorectal cancer, there is a wide and growing range of testing options that can be tailored to a country's resources and burden of disease.
- The critical issues for all screening programmes are to select the test that is most appropriate for the context in order to achieve high screening coverage, high quality testing and reliable follow up.



#### Global Advocacy Message

The success of early detection programmes can be measured by a reduction in the stage of the cancer at diagnosis with earlier diagnosis associated with a reduction in the risk of dying from cancer.

## BUILDING CAPACITY OF HEALTHCARE WORKERS

### For many developing countries, the provision of a skilled cancer workforce to diagnose and manage cancer remains a challenge, with most facing a severe shortage of oncologists, and other specialists including pathologists.

#### Evidence

- Whilst specialty care is essential, this can be complemented by a skilled workforce at the primary care level, facilitating greater access to cancer control and care initiatives.
- It is possible for tasks to be shared among health workers with differing levels of training to effectively engage community health workers, clinical health assistants, nurses and physicians working in primary care level facilities.
  - Primary healthcare workers can be trained to perform effective clinical breast exams, especially where the objective is to reduce the number of very late cases that are easily detected with clinical examination.
  - For colorectal cancer, studies have shown that nurses and non-medical endoscopists can satisfactorily perform diagnostic tests.
- The potential exists to address the gaps in the training of healthcare workers by increasing the use of Information and Communication Technologies (ICTs) including mobile and online approaches to complement traditional teaching methods.
- Developing education and training programmes for healthcare workers that build on existing materials, training networks and infrastructure is essential.



#### Global Advocacy Message

The provision of a skilled and supported cancer workforce is critical to the success of early detection programmes for cancer.

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