On World Cancer Day, 4 February, the International Union Against Cancer launched “Today’s children, tomorrow’s world”, a five-year cancer prevention campaign, focusing in particular on parents and their children.

The environment in which children grow up powerfully influences their behaviour in later life. Simple changes in lifestyle can prevent more than one-third of all cancer cases.

This year’s World Cancer Day was an even bigger success than last year, with greatly improved media coverage and more organizations in every region taking part. The World Health Organization issued an official statement in support of World Cancer Day, attracting major interest from the UN press corps. The International Atomic Energy Agency issued a joint press release with UICC.

Among UICC members, Australia took the lead. The Cancer Council Australia, its eight state and territory organisations, and the Peter MacCallum Cancer Centre all scheduled events. “World Cancer Day helped us get coverage here we would otherwise not have,” reports David Hill of Cancer Council Victoria, president-elect of UICC.

The Chinese Anti-Cancer Association launched a “Focus on cancer prevention, promote public health” campaign on 4 February. The Spanish Association Against Cancer (AECC) observed World Cancer Day as part of a year-long campaign within the framework of “Today’s children, tomorrow’s world”.

The National Cancer Institute (INCa) organized a soirée at Versailles as part of a two-year campaign to raise cancer awareness in France. In Lyon, the Léon Bérard regional cancer centre signed an agreement to work with Hospital K, Hanoi, to develop paediatric oncology in Vietnam. Thierry Philip, the centre’s director, and paediatric oncologist Raphaël Rousseau will visit Hospital K to organize a two-way traffic of French medical specialists and students from Vietnam.

The prize for persistence goes to the Indonesian Cancer Foundation, which went ahead with a planned interactive dialogue and media gathering despite major flooding in Jakarta. Metro TV and the foundation are sponsoring a media competition, with the winners to be announced on 4 February next year.

“World Cancer Day is a good way to get coordinated publicity on cancer issues,” says Satu Lipponen of the Cancer Society of Finland, which worked closely with Finnish TV. Effective media campaigns were also staged in many other countries. The Turkish Association for Cancer Research and Control placed stands in major shopping malls in Ankara, Istanbul and Izmir, distributed posters and leaflets all around the country, and ran radio and TV spots on national and local stations. The Israel Cancer Association had a major impact on radio and TV, including an interview with Miri Ziv, its director general, on Israel’s main radio station. In the USA, St Jude Children’s Research Hospital threw its extensive public relations machinery behind World Cancer Day. Also new this year: World Cancer Day featured in many web blogs.

From Washington to Wellington, news media in every region covered the launch of “Today’s children, tomorrow’s world”. Our key messages reached a diverse global audience in more than two dozen languages. CNN and China Central Television reported on healthy habits parents can share with children to help prevent cancer later in life.

World Cancer Day was supported by former US First Lady Barbara Bush, Princess Lalla Salma of Morocco, President Olusegun Obasanjo of Nigeria, President Gloria Macapagal-Arroyo of the Philippines, Gursharan Kaur, wife of the Indian prime minister, Tanzanian First Lady Anna Mkapa, and many ministers of health.
Tennis star Steffi Graf also supported UICC, receiving wide media coverage, with articles in sports magazines such as Tennis World that also featured our members in Germany.

“The news coverage generated this month will echo over the next five years of our campaign," says Isabel Mortara, the executive director of UICC. “Together, we can have a lasting impact on the health of the next generation.”

For more information, visit the “World Cancer Day 2007 activities and events” page at www.worldcancercampaign.org. For the IAEA and WHO press releases, see www.uicc.org/news/other_news

“**My child matters**” awards 2007

At its meeting in December 2006, the “**My child matters**” advisory steering committee made grants of up to €50k to 12 new projects in six resource-constrained countries. This is in addition to the 14 pilot projects in 10 low- and middle-income countries already receiving support. For more information, contact mychildmatters@uicc.org or see www.thelancet.com/journals/lanonc/article/PIIS1470204506709822/fulltext

**Bolivia**
1. Learning to grow under special conditions – Lucia Parejas, Fundación Amigos y Familiares de Niños con Cáncer, Santa Cruz
2. Free leukaemia diagnosis for Bolivian children – Ricardo Amaru Lucana, Cellular Biology Unit, Oncohaematology, School of Medicine, Mayor de San Andrés University, La Paz
3. Early diagnosis and follow-up of childhood cancer in East Bolivia – Yolanda Ernst, Instituto Oncológico del Oriente Boliviano, Santa Cruz

**Indonesia**
4. Integrated community-based early detection, referral and treatment of leukaemia and retinoblastoma – Melissa Luwia, Indonesian Cancer Foundation, Jakarta
5. Early detection and prompt treatment of retinoblastoma – Rita S Sitorus, Department of Ophthalmology, Faculty of Medicine, University of Indonesia, Dr Cropto Mangunkusumo Hospital, Jakarta

**Kenya**
6. Establishing awareness of the occurrence of Burkitt's lymphoma for the purposes of early detection and treatment, and determining environmental and familial factors associated with its occurrence in Kenya – Nicholas Anthony Orthieno Abinya, Kenya Medical Research Institute, Nairobi

**Mali**
7. Oncopaedia Mali – Boubacar Togola, Hopital Gabriel Touré, Bamako

**Peru**
8. Update in paediatric oncology: an eLearning service – Gustavo Sarria Bardales, National Institute of Neoplastic Diseases, Lima

9. Developing the care facilities and improving the support services of the Albergue para Enfermos de Cáncer “Señor de la Divina Misericordia” – Nelly Isabel Therese Huamani, ALDIMI, Surquillo, Lima

**Romania**
10. Improving the diagnostic services for children with cancer – Doina Mihaila, St Mary’s Emergency Children’s Hospital, Iasi
11. Assessing the childhood cancer burden in Romania and ways of improving it – Adela Ranu, Institute of Oncology “Prof Dr Al Trestioreanu” Bucharest

**Cancer prevention in Europe urgent, IARC says**

Cancer incidence in Europe rose by 300,000 in the last two years. A report in the *Annals of Oncology* this month estimates that in 2006, there were 3.2 million new cases of cancer (up from 2.9 million in 2004). Lung cancer remains the biggest killer, followed by colorectal, breast and stomach cancers.

Peter Boyle, director of the International Agency for Research, who co-authored the report, says that preventive action is urgent, especially in central and eastern Europe, with strong and effective measures to curb the tobacco epidemic and more widespread screening programmes for breast, cervix and colorectal cancers. “Diet and physical exercise are just as important in helping the European populations reduce soaring levels of obesity and risks for major killers, such as colorectal cancer,” he adds.

Read more: www.uicc.org > news > other news

Every country can plan to control cancer

National cancer control plans are based on a systematic review of the cancer burden and scientific knowledge of what has proven effective in reducing it. Some countries have already developed national cancer plans and others are currently developing them. Most countries, however, have yet to begin a systematic planning effort and many are just becoming aware of the opportunity to do so.

**World Cancer Declaration**

*Increase the number of countries that have national cancer control plans covering cancer prevention, early detection, treatment, palliative care, and support for cancer patients, their families and caregivers. These plans should be realistic and appropriate to country conditions and include dedicated budgets for implementation.*
Cancer control planning is necessary in any resource setting, the World Health Organization emphasizes. “With careful planning, a substantial degree of cancer control can be achieved, even where resources are limited. Without careful planning, there is a risk that the resources available for cancer control will be used inefficiently and the benefits to the population that should flow from these resources will not be realized.”

UICC members and other NGOs can play a critical role in raising awareness of the cancer problem and developing effective partnerships for cancer planning.

Cancer is generally low or absent on the health agenda of low- and middle-income countries (LMCs), even though its share of their disease burden is growing. Each year, 6 million new cases of cancer occur in these countries, and each year, 5 million die from cancer – 2 million more than from AIDS.

Cancer causes and outcomes in the developing world differ from those in more affluent countries. Cancer Control Opportunities in Low- and Middle-Income Countries, a new report from the Institute of Medicine (USA) published for World Cancer Day, rejects a “one-size-fits-all” response, recommending targeted, resource-appropriate cancer control strategies in each country.

The most effective approach to controlling cancer is to prevent it occurring in the first place, and the report identifies several practical measures – above all, ratifying and implementing the Framework Convention on Tobacco Control.

The second line of defence is treatment. “Resource-level-appropriate guidelines” similar to those from the Breast Health Global Initiative should be developed for other cancers, the report says. It also recommends that LMCs develop centres of excellence to serve as focal points in fighting cancer.

Cancer can be very painful, particularly for those with advanced and fatal disease. The report recommends that LMCs provide palliative care as much as is feasible and remove unnecessarily strict limits on morphine and other strong opioid painkillers – the only drugs that work.

Without reasonably accurate data collected over time, it is impossible to understand the existing cancer burden or to gauge the effect of interventions. The report therefore recommends that LMCs institute surveillance and monitoring efforts at an appropriate level.

Finally and crucially, each country should decide on a national cancer control plan that takes into account its own priorities and goals. Only such a deliberate and sustained approach can ease the burden of cancer in LMCs.

“It’s very clear that cancer will become an increasingly heavy burden on low- and middle-income countries,” says Joe Harford of the US National Cancer Institute, UICC’s strategic leader for knowledge transfer. “Now is the time to begin in earnest to prepare and to address what can be done in these venues.”

To show what can be done, UICC is working with the IAEA’s Programme of Action for Cancer Therapy (PACT) on demonstration projects in six countries: Albania, Nicaragua, Sri Lanka, Tanzania, Vietnam and Yemen.
**Bulgarian National Association of Oncology**

The Bulgarian Oncological Society was a full member of UICC until 1989. Now the Bulgarian National Association of Oncology, founded in 2001, has brought Bulgaria back to the UICC family. The association, with a staff of nine, aims to contribute to the development of oncology, to promote public health, and to convey to the public the key message that cancer can be both avoided and cured.

Care, Organization, Public Enlightenment, Nigeria

Breast cancer is the leading cancer among women in Nigeria, with 12,000 new cases each year and over 8,000 deaths. Care, Organization, Public Enlightenment (COPE), founded in 1995, aims to save lives and diminish suffering through treatment, advocacy, education, research and service. On 4 February (World Cancer Day), it launched its new breast cancer information service and its website.

“In Nigeria, breast cancer is now a prominent public health concern,” says Ebunola Anozie, president of COPE. “Over the years, we have found out that breast cancer is not just an individual illness, it affects the whole family. We know that early detection improves the survival rate but unfortunately, most women still present late.”

Read more: www.copebc.com

**Centre hospitalier de l’Université de Montréal, Québec, Canada**

The Centre hospitalier de l’Université de Montréal (CHUM) comprises three hospitals – Hôtel-Dieu, Hôpital Notre-Dame and Hôpital Saint-Luc – treating more than 500,000 patients each year. It offers general care in the Montreal area, promotes health in continuity with front-line services, and also provides specialized and ultra-specialized care for a wider, regional and supra-regional clientele. All of these services contribute to the CHUM’s teaching, research, assessment of technologies and health-care methodologies and health promotion mission.

On the oncology front, a multidisciplinary research team of clinicians, basic researchers and epidemiologists work in six main areas: treatment and chemo-prevention; genetic and environmental risk factors; growth, apoptosis and angiogenesis; biology of tumoural cells; immuno-oncology; and molecular medicine.

Read more: www.chumontreal.qc.ca

**Een Häerz fir Kriibskrank Kanner, Luxemburg**

Founded in 2000, Een Häerz fir Kriibskrank Kanner (a heart for kids with cancer) supports children and adolescents with cancer and their families in Luxemburg and is also active in twinning programmes. It was instrumental in setting up its sister association in Bosnia and Herzegovina in 2003, and for some years, it has also supported the Gomel project in Belarus and the activities of the Groupe francoafricain led by Jean Lemerle.

“Our statutes allow us to support not only our families in Luxemburg, but also to extend our assistance to children abroad,” explains Marie-Marthe Bruck-Clees, president of the association. “We are a small country, but people are very generous. Separately, we can do nothing, but together we can!”

Read more: www.kriibskrankkanner.lu (under construction)

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**Stop cervical cancer**

Thirty years after Harald zur Hausen showed that cervical cancer is caused by infection with the human papilloma virus (HPV), vaccines to prevent infection are becoming available. Nearly 300,000 women die each year from cervical cancer – 85 per cent of them in low- and middle-income countries.

In a new position paper (www.uicc.org/index.php?id=1359), the UICC Board of Directors supports:

- the development of a comprehensive global strategy to eliminate cervical cancer
- regional cervical cancer strategic planning activities
- the identification of specific target countries

- screening programmes to ensure maximum protection for all women (vaccines are not a substitute for screening)
- the mobilization of UICC members, health professionals, and advocacy and supportive care networks to lobby governments

On the subject of HPV vaccines, the Board supports:

- rigorous governmental clinical evaluation and licensing of any vaccines
- HPV vaccination of all females in the target age bracket
- social marketing for HPV prevention
- information/education of all adolescents on HPV prevention
Hope Society for Cancer Care, China (Taiwan)

Hope Society for Cancer Care, founded in 2002, has a staff of 15 and 200 volunteers. It aims to provide accurate information about cancer, guide patients to proper medical treatment, and help them return to an active, healthy life. It offers education in home care and psychosocial support, operates a helpline, and engages in public policy advocacy. “Currently, we focus on cancer care for patients,” says Teresa Tsai, international affairs coordinator of the society. “In the future, we would like to be involved in more public health services.”

Read more: www.cancers.org.tw/ehope

International Confederation of Childhood Cancer Parent Organizations

Founded in 1994 in Valencia, Spain, the International Confederation of Childhood Cancer Parent Organizations (ICCCPO) brings together almost 100 organizations of parents of children with cancer in over 60 countries. On 15 February each year, ICCCPO members organize activities to mark International Childhood Cancer Day. The related photo-project, Through My Eyes, invites children with cancer around the world to take photographs of their life. In 2005 the topic was life in hospital, in 2006, cancer in the classroom. This year, the theme is cancer in the home and community, and the children’s photos will be on display at the ICCCPO/SIOP meetings in Mumbai at the end of October and beginning of November (see Conferences, p.8).

“We are delighted that more and more of our members are taking an active part in International Childhood Cancer Day,” says Marianne Naaft-Wilstra, immediate past president of the ICCCPO. “The Through My Eyes project has been a tremendous success. We hope that this year’s pictures, taken by children with cancer in their homes, will again offer us insight into what the world likes through their eyes.”

Read more: www.icccpo.org

St Jude Children’s Research Hospital, USA

St Jude Children’s Research Hospital in Memphis, Tennessee, is unlike any other paediatric treatment and research facility. According to its website, “discoveries made here have completely changed how the world treats children with cancer and other catastrophic diseases.” The hospital was founded by the late entertainer Danny Thomas, who also created one of the largest health-care charities in the United States to fund its operating costs, now well over a million dollars a day. It has treated children from all over the United States and from more than 70 foreign countries.

“This year, we expect from UICC membership,” says Raul Ribeiro, director of the international outreach programme at St Jude, “to collaborate in education of health-care providers, advocacy for paediatric cancer, and specific actions to improve the survival of children with cancer in the developing world.”

Read more: www.stjude.org

Shaukat Khanum Memorial Cancer Hospital and Research Centre, Pakistan

The Shaukat Khanum Memorial Cancer Hospital and Research Centre was founded by Imran Khan, one of Pakistan’s most illustrious cricketers. Fund-raising started in 1989, and the institution began work in 1994. It aims to act as a model institution to alleviate the suffering of cancer patients though modern curative and palliative therapy, educate health-care professionals, and research the causes and treatment of cancer. This pioneering, state-of-the-art hospital in the heart of the Punjab has established itself as a centre of excellence, providing comprehensive care free of charge to thousands of indigent cancer patients.

Read more: www.shaukatkhanum.org.pk

• mobilization of financial/human/technical resources through partnerships
• work with companies to supply vaccines below market cost
• more research, to ascertain how long the protection lasts, what the recall interval is, what the costs are
• the development of next-generation vaccines that are economically applicable to resource-constrained countries in the greatest need

The position paper represents the opinion of the Board of Directors and not necessarily that of all UIACC member organizations, but several members, including the American Cancer Society and the Cancer Council Australia, have also published statements along similar lines.

Last September, an international symposium convened by the Princess Lalla Salma Association in Rabat, Morocco, issued an appeal to developing countries to write the struggle against cancer, and cervical cancer in particular, into their national health policies (www.contrelacancer.ma/declaration_prevention.asp). In December, UIACC co-convened an international roundtable in London on accelerating global access to HPV vaccines (www.uicc.org/index.php?id=1344).
New Malawi centre to fight AIDS-related growth in cancer

Cancer incidence is growing rapidly in Malawi, due in large part to a dramatic increase in Kaposi’s sarcoma. This AIDS-related malignancy accounts for one-third of new cancer cases in the country. It is the main cancer in men, and second only to cervical cancer in women and to Burkitt’s lymphoma in children.

In response, the National Cancer Trust of Malawi launched an ambitious project this month to raise almost 7 million US dollars for a new cancer treatment facility in Blantyre.

Malawi currently has no facilities to treat and palliate cancer. Cancer patients who can afford the cost travel to South Africa, Tanzania or Zimbabwe for treatment, but the vast majority of Malawians are sent home without treatment, where they suffer a painful death.

Faced with this daily tragedy, doctors at Malawi’s main hospitals took the initiative to establish the National Cancer Trust of Malawi and develop a two-year business plan for a National Cancer Centre. The trust also encouraged the Malawian government to join the International Atomic Energy Agency last year, which will open channels to funding.

“This decision flies in the face of all the independent scientific evidence on the harm caused by passive smoking,” says Luk Joossens, UICC’s strategic leader for tobacco control. “It also ignores the fact that European citizens and the bureau’s constituents overwhelmingly support smokefree workplaces.”

European countries and other EU institutions are invited to submit their responses to the green paper by 31 May.


Involuntary smoking can double lung cancer risk

A new “meta-analysis” by the International Agency for Research on Cancer of various work settings where workers were exposed to tobacco smoke from fellow workers strengthened the evidence for an association between workplace exposure and lung cancer.

For the first time, a clear dose response between exposure to co-workers’ smoke and lung cancer risk was demonstrated, showing a two-fold increased risk among highly exposed workers.

The IARC review of 21 studies, totalling 4,305 lung cancer cases, was published online by the American Journal of Public Health on 31 January and will appear in print in the March issue.

France, Hong Kong go smokefree

Smokefree legislation in Hong Kong came into effect at the beginning of the year. Smoking is no longer permitted in government offices, shops, markets, schools and most restaurants, although the legislation will not apply to bars and other places of entertainment until July 2009. The new law also prohibits the use of misleading terms, such as “lights” and “mild”, on cigarette packaging.

Smokefree legislation in France came into force on 1 February. French workplaces are now smokefree, with bars, night clubs and restaurants required to follow suit next year.

Read more: www.smokefree.hk/cosh/cs/index.xml?lang=en

European Union says one thing, does the opposite

On 30 January, Markos Kyprianou, the European commissioner for health and consumer protection, called for comprehensive smokefree legislation to be introduced across the European Union.

Towards a Europe free from tobacco smoke, a European Commission green paper, considers five options and concludes that a comprehensive smokefree policy would bring the greatest health benefit to the population. “The evidence from European countries with comprehensive smokefree policies is that they work, produce results and are popular,” says Kyprianou.

On 12 February, the European Parliament Bureau voted to scrap a ban on smoking in Parliament buildings in Belgium, France and Luxemburg. The ban, scheduled to come into effect at the beginning of next year, was the result of a 2004 case to the European Ombudsman, who found that the parliament was failing to protect the health of its staff.

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Knowledge transfer

ICC’s international cancer fellowships provide opportunities for professional development to cancer investigators, clinicians, nurses, and cancer society staff and volunteers. Through the generous financial contributions of sponsors and the expertise of volunteer reviewers, over 5,000 health professionals have benefited from UICC fellowships.

Last year, 155 fellowships were awarded. For further information concerning the awardees, please consult fellows.uicc.org

New training opportunities

Fellows are finding it increasingly difficult to obtain visas for North America and Europe. Consequently, we have reorganized two of our fellowship schemes as workshops, which will be widely promoted in resource-constrained countries.

For both workshops, the competitive selection is based on expert review of the workshop design, programme, follow-up and evaluation procedures and the profiles of the faculty and host organization. The aim is to provide an opportunity for qualified applicants to augment their professional knowledge and to share their newly acquired knowledge and skills with others in their countries.

ICRETT workshops

These 3-5 day workshops will be hosted in cancer institutes, universities, laboratories, clinics, or hospitals in resource-constrained countries. An international faculty of one to three experts will be supported by UICC to train groups of up to 50 appropriately qualified health professionals.

Subjects addressed in these workshops include basic, preclinical, clinical, behavioural, and epidemiological areas of cancer research, cancer prevention and control, clinical management, palliative care, diagnostic skills, and clinical trials.

In 2006, 10 workshop fellowships were awarded: Brazil (1), Cyprus (1), Jordan (1), Romania (1), India (3), Niger (1), Uganda (1) and Uruguay (1).

Cancer nurses training workshops

These workshops, sponsored by the Oncology Nursing Society, are 3-5 day long teaching and training sessions held at cancer institutes, clinics, treatment centres or hospitals in resource-constrained countries by an international faculty of one to three nurse educators for groups of up to 30 appropriately qualified nurses.

Workshop subjects include cancer education programmes for prevention and early detection, patient counselling, safe drug handling, pain assessment, palliative care, and quality of life issues.

Prevention-oriented workshops are especially encouraged.

Patient support

New Hope Lodge in Turkey opens its doors

People living with cancer come from all over Turkey to Hacettepe University Oncology Hospital in Ankara. Many face a major problem – where to find safe, clean and affordable lodging while they are being diagnosed and treated. On 23 January, Hacettepe Hope Lodge, next door to the hospital, welcomed its first guests.

The lodge, with 10 rooms for patients and their families, was built by the Hacettepe Oncology Institute Foundation, in partnership with the Turkish Association for Cancer Research and Control and UICC. Construction began in March 2005, thanks to a generous donation from the BNP Paribas Foundation, Switzerland.

“The new Hope Lodge is a home away from home for needy cancer patients and their families,” says Tezer Kutluk, president of Hacettepe University Institute of Oncology and the Turkish Association for Cancer Research and Control. “It’s the first in Turkey, but we hope that it will serve as a model for similar projects elsewhere in our country, and in other countries too.”

Tezer Kutluk and guests at the new Hope Lodge

eLearning

Try and buy Cancer Basics for All

UICC’s first e-learning series, Cancer Basics for All, is now available for download from web.uicc.org/cancerbasics, which also provides an opportunity to try a lesson for free.

Cancer Basics for All was launched at the UICC World Cancer Congress in Washington DC in July 2006, and over
Towards True Cancer Control
UICC World Cancer Congress 2008
Geneva, Switzerland, 27-31 August 2008
The congress will focus on public health, prevention, cancer and tobacco control, palliative care, patient advocacy, and other issues in both resource-rich and resource-limited countries. The rapid progress in treatment will be the centre of many symposia. Together we can move the cancer control agenda forward and bring hope to millions.

Note: UICC’s Board of Directors has decided that the World Cancer Congress will be held in Beijing in 2010 and in Montréal in 2012.

Uniting in Recovery
14th UICC Reach to Recovery International Breast Cancer Support Conference
Stockholm, Sweden, 30 May-2 June 2007
The conference, hosted by the Swedish Breast Cancer Association (BRO) and the Swedish Cancer Society, will give UICC’s Reach to Recovery International support network an opportunity to discuss all the new developments concerning breast cancer, focusing on increased chances for survival, cure and supportive care.

Oncology Nursing Society
32nd Annual Congress
Las Vegas, Nevada, 24-27 April 2007
The congress, held under UICC auspices, will provide educational experiences and networking opportunities that promote excellence in oncology nursing and enhance the provision of quality cancer care.

Asia and cancer management in the 21st century
Suntec, Singapore, 21-22 April 2007
Asia is on the cusp of a major cancer epidemic. Under current prevention and management strategies, new cancer cases are set to rise from 3.5 million (2002) to over 8 million in 2020. The Lancet Asia Medical Forum 2007, supported by UICC, will offer a unique opportunity for leading regional and international experts to discuss the provision and future needs of effective cancer care in Asia.

To download the series, buy either a single user licence for US$50 or a discounted multiple user licence online at web.uicc.org/cancerbasics. Each licence comes with a complimentary CD-ROM if required. Orders from UICC member organizations benefit from a 30 per cent discount.

Negotiations are underway to translate Cancer Basics for All into Portuguese, Spanish and Hebrew. If you are interested in translating the series into your language, please contact us at cancerbasics@uicc.org

For a full listing of international cancer conferences, visit our online calendar: www.uicc.org/index.php?id=748