

THE WORLD OVARIAN CANCER COALITION ATLAS 2023 EXECUTIVE SUMMARY

GLOBAL TRENDS IN INCIDENCE, MORTALITY, AND SURVIVAL

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March 2023



EXECUTIVE SUMMARY

In the four years since the first edition of the World Ovarian Cancer Coalition Atlas there has been an encouraging number of new studies exploring the several aspects of this complex disease around the globe. The findings from these studies strengthen our knowledge and determination about the actions needed to tackle the major challenges facing women who develop ovarian cancer around the world. As you will read, these challenges are compounded by a rise in risk factors for the disease particularly as countries develop, and populations grow and age.

In 2020, it was estimated that almost 310,000 women were diagnosed with ovarian cancer worldwide, 200,000 women died from the disease, and there were more than threequarters of a million women living within five years of their diagnosis. Whilst there have been some improvements in overall survival rates, progress remains stubbornly slow, and research is still a long way from producing a reliable screening method for general populations. Within this context, it is important to remember that although we have seen some positive progress, ovarian cancer still has the highest mortality rate of all the female cancers.

New and emerging treatments have the potential to transform the outlook for those women who can access them and for whom they are effective. These include PARP inhibitors¹ which have been described as 'game changing', and more recently new research has involved immunotherapy. However, the majority of The gap between those who can access the best possible care and those who cannot will widen without action.

women who have ovarian cancer live in lowand middle-income countries where access to such innovative treatments is extremely limited. Even access to the mainstay drug treatments of the last 30 years, or expert surgery, can be impossible or financially crippling for many women and their families.

The projected growth in numbers of women developing ovarian cancer (42% increase by 2040, GLOBOCAN 2020) will take place largely but not exclusively in developing countries where access to the best possible care is severely limited through the lack of effective cancer control plans, infrastructure, and strategies that ensure access to necessary cancer medicines without financial ruin.

Without action, the gap between those who can access the best possible care and those who cannot will widen. It is imperative that emerging knowledge about the disease that can drive improvements in outcomes in wealthier countries is also available to inform efforts to close this gap with those in lower resource settings.





¹ A substance that blocks an enzyme in cells is called PARP. PARP helps repair DNA when it becomes damaged. In cancer treatment, blocking PARP may help keep cancer cells from repairing their damaged DNA, causing them to die. PARP inhibitors are a type of targeted therapy. Also called poly (ADPribose) polymerase inhibitor. <u>https://www.cancer.gov/publications/</u> dictionaries/cancer-terms/def/parp-inhibitor

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Key findings in this report reveal that:

- There will be a rapid increase in the numbers of women developing ovarian cancer, particularly in low- and middle- income countries
- Acting on familial history and ways of reducing the risk of developing ovarian cancer through hormonal, lifestyle, and surgical intervention, may slow the rising rates and prevent many women from developing the disease in the future
- Across all countries there are wide variations in availability of clinical guidance, and adherence to it in all countries - from assessing symptoms, to surgery and drug management. In particular, guidance in lower-income countries needs to be implementable as well as aspirational for the local setting
- Developing and maintaining trained workforces with adequate infrastructures is relevant in all situations but particularly in lower-income settings
- Understanding differences in survival rates between countries can inform efforts to get the best possible outcomes

Since the outbreak of the COVID-19 pandemic, the challenges for women in terms of getting diagnosed and accessing treatments have been enormously exacerbated, with potentially devastating consequences. There has never been a more pressing need for action For women right around the world, it is imperative that we continue to study this disease, and understand the driving factors behind the poor outcomes, speeding up our efforts wherever possible. It is important to seize opportunities to prevent ovarian cancer, diagnose it promptly, target treatments more effectively, ensure appropriate workforce and infrastructures, improve access to treatments, and gather data that can inform effective policies relevant to local populations, whether in higher- or lower-income countries.

Finally, women themselves must be at the heart of the process - leading the call for action, informing the debate at every step, and sharing their experiences and data where possible.





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EXECUTIVE SUMMARY

RECOMMENDATIONS

In order to drive forward progress there is a need for the ovarian and global cancer communities and policy makers to:



- Recognise ovarian cancer as a global priority
- Improve the quality of national cancer data or population-based cancer registries to inform cancer control plans
- Use a consistent framework for reporting the stage, type, and spread of the disease
- Improve the knowledge of women and doctors in relation to ovarian cancer to reduce delays in diagnosis
- Reduce variation in guidelines for diagnosis and treatment, but make them relevant to, and implementable in, local populations
- Support the United Nations and the Union for International Cancer Control action on universal health coverage to make drugs included in treatment guidelines available to all, without causing financial hardship on women and their families
- Monitor the availability of new targeted therapies and associated genetic testing around the world, and find ways of ensuring access to lower-income countries
- Consider how to develop centres of expertise for women with ovarian cancer, even in low resource settings
- Invest in the cancer workforce, ensuring imaging, pathology, and other key services better support rather than impede diagnosis, and provide incentives for trained staff to continue to provide experienced care
- Explore how the role of cancer nurses in low- and middle-income countries could be developed
- Further examine the differences in survival between countries, with a view to developing interventions to improve cancer care
- Ensure women's quality of life is not ignored or forgotten









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EMPOWERING THE GLOBAL OVARIAN CANCER COMMUNITY THROUGH KNOWLEDGE, COLLABORATION AND ACTION.

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