

Introduction

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In industrialized countries cancer strikes two out of every three families. Cancer is the principal cause of death among men and women in their most productive age and the second commonest cause of death in children in these countries. In Europe during the present decade an estimated 14 million people will die of cancer. Protracted physical and mental suffering are the hallmarks of this most feared disease. Great anxiety affects not only the patient himself, but all his social environment. Significant economic burdens of this disease affect the family and society, not only because of the cost of long and complex care, but also because of the loss of earning power and production. This economic loss from cancer deaths in the USA amounts to almost \$18,000 million a year. However, the toll cancer exacts annually from mankind cannot be measured in monetary terms alone. People are dying in their most creative period when they have gained wisdom from experience and that which they might have contributed to world culture, art and science, is lost. Despite the grim outlook given, a general air of optimism prevails today in oncology. This optimism is based on some advances achieved in cancer research, prevention and therapy.

Two fundamental themes stand out among the resolutions of the last few World Health Assemblies. The first is that the problem of cancer is extremely complex and cannot be settled in a short, sharp campaign, but demands long-term systematic efforts spread over many years to elucidate the aetiology and mechanisms of carcinogenesis, to improve methods of prophylaxis, early diagnosis and treatment of cancer and the rehabilitation of cancer patients, and to strengthen oncological services.

The second important theme stresses that the main effort in carrying out the programme should be made by national organisations. WHO is called upon to coordinate efforts, standardize methodology and to review and evaluate the position in various branches of oncology, and to provide information services and manpower training.

The participants understand only too well the great importance of integrating activities in the struggle against cancer. The transfer of experience from one group to another is necessary to avoid pitfalls, repetition of mistakes, unproductive overlap, etc.

The broad strategy of the WHO programme in cancer is to promote relevant research and its application and to foster a national approach to prevention and the diagnosis and treatment of tumours. Bladder cancer is an universal problem for developed as well as developing countries. Extrapolation of the existing figures suggests that every year 70,000 new cases of bladder cancer will develop in Europe. Only half of them will survive for five years. Although most bladder cancers provide clear examples of environmental aetiology, preventative measures have unfortunately little effect of the immediate control of the incidence. Elimination of carcinogenic agents from the environment is an extremely difficult task. People live in a complex industrial society full of artificial substances.

Through its network of Collaborating Centres, WHO tries to reappraise the possibilities of control of all common types of cancer. Since the Radiumhemmet has such a recognised reputation, rich experience and long tradition as a comprehensive cancer centre, WHO requested it to be one of the WHO collaborating centres for coordination in the field of bladder cancer.