New initiative aims to make breast cancer a global priority
“Breast Cancer Initiative 2.5” launches global website on World Cancer Day

SEATTLE – (Feb. 2, 2016) – World Cancer Day—Thursday, Feb. 4, 2016—is the web launch of a global campaign to reduce disparities in breast cancer outcomes for 2.5 million women by 2025. Called Breast Cancer Initiative 2.5 (BCI2.5), the campaign represents a new commitment to unite the global breast cancer community behind a common goal and make breast health a global priority. To kick-off the campaign on World Cancer Day, BCI2.5 is launching its website, www.bci25.org, which will serve as a platform and resource for policy makers, clinicians and health advocates from around the world.

Breast cancer is the most prevalent cancer in women worldwide. Estimates suggest 5.8 million women will die from breast cancer by 2025, with a disproportionate number of these deaths occurring in low-resource settings around the world. “Incredible progress has been made against breast cancer in the western world,” acknowledged Susan G. Komen® president and CEO Judy Salerno, MD, MS, “but these gains have not have not been realized in many low-resource countries where breast cancer still carries a stigma, and resources to treat it are scarce. The entire breast cancer community must collaborate and use our collective expertise to develop and implement solutions that will save lives.”

The initiative began as a call for action in 2014, supported by the American Cancer Society, Susan G. Komen® and the Union for International Cancer Control. “Women in low- and middle-income countries deserve access to the breast cancer early detection and treatment services that could save their lives,” said Ambassador Sally G. Cowal, senior vice president for global health at the American Cancer Society, “It is only in working together with our global colleagues that we can reduce disparities and save the lives we can – and should – be saving. The American Cancer Society is a proud partner in this initiative.”

Since that initial pledge, BCI2.5 has been engaging partners around the world, assessing needs, identifying priorities, defining a strategy and developing tools to meet this goal. “Mapping global strengths and weaknesses will help us to focus towards more efficient and innovative solutions in order to overcome disparities in breast cancer patients' access to diagnosis and treatment. We can only accomplish this with BCI 2.5,” said UICC board member and volunteer president of FEMAMA in Brazil Maira Caleffi, MD, PhD.

Not only is BCI2.5 engaging partners from around the world to make breast cancer a global priority, the campaign is also leveraging expertise from Seattle Cancer Care Alliance, the University of Washington, Fred Hutch and other local global health organizations, as its secretariat—the administrative functions of the global coalition—is based in Seattle, Washington, a hub for global health innovation.

“The world needs a roadmap to success to improve breast cancer outcomes. It’s complicated but doable. BCI2.5 can provide that framework to help ensure the right decisions are made in the right place,” said Dr. Benjamin O. Anderson, director of the breast health clinic at Seattle Cancer Care Alliance in Seattle, Washington and co-chair of BCI2.5 secretariat.

“We have clear strategies for prevention, detection and treatment of cervical cancer,” said Seattle Cancer Care Alliance director of breast medical oncology and BCI2.5 secretariat co-chair Dr. Julie Gralow. “We can
expect to see reductions in the burden of disease, but we lack the same clarity for breast cancer. It is clear that breast cancer is poised to become an increasing problem for women in low- and middle-resource countries. We need metrics, models and strategies to help ministries of health decide how to address breast cancer.”

Higher breast cancer case fatality rates in low-resource settings have been attributed to a lack of awareness regarding the benefits of early detection and treatment, late stage diagnosis and limited access to appropriate care. “Over the last few decades we have made major progress in the treatment of cancer. For those of us who practice in lower-resource settings, however, these gains represent hope for the future but are not our current reality. Initiatives such as BCI2.5 are therefore fundamental in our fight against breast cancer in low- and middle-income countries. We expect that with multiple stakeholder engagement and technical transfer alongside the development of innovative and culturally-sensitive ways of addressing the disease we will be able to start closing this gap very shortly,” expressed Gilberto de Lima Lopes, Jr., MD, MBA, FAMS, chief medical and scientific officer for Oncoclinicas Group in Brazil.

To reduce this global disparity in breast cancer outcomes for 2.5 million women by 2025, BCI2.5 is exploring innovative ways to implement affordable, appropriate, acceptable and feasible evidence-based strategies. A key element of this initiative is identifying, documenting and fostering dissemination of new and innovative approaches to the delivery of breast health care developed in low-resource settings. This demands a collaborative effort that draws on the collective expertise and resources of individuals and institutions engaged in breast cancer care.

“As an advocate in low-and middle-income countries, where breast cancer patients and the population are still struggling with stigma, lack of awareness about the importance of early detection and treatment, supportive care services and limited government commitment to cancer control, BCI2.5 is vital in our efforts to bridge the information gap between patients, providers, clinicians, policy makers and resource allocation. The strategy of multidisciplinary engagement is a powerful tool in building the capacity of advocates in this part of the world to develop innovative pathways to reduce breast cancer outcomes for 2.5 million women by 2025,” said Gertrude Nakigudde, executive director of the Uganda Women's Cancer Support Organisation (UWOCASO).

The BCI2.5 strategy consists of the following components: (1) outreach to raise awareness and build relationships with partner organizations, institutions and countries; (2) development and testing of analysis, assessment and implementation tools; (3) outcome tracking through a Global Breast Health Analytics Map (GloBAM); (4) situation analysis of existing and evolving breast health care systems; (5) forums and action plans; (6) BCI2.5 Master Courses; and (7) technical assistance and implementation science-based research to improve breast health care delivery at all points in the cancer care continuum.


More information is available at:
- Website: [www.bci25.org](http://www.bci25.org)
- Facebook: facebook.com/BCI2.5
- Twitter: @bci2_5

CONTACT:
Allison Dvaladze, dvaladze@uw.edu