Mr Chair,

In regards to the agenda item under discussion, the IAEA welcomes the discussion on the draft of the global strategy to accelerate the elimination of cervical cancer for the period 2020-2030. The inclusion of treatment in the strategy will save the lives of millions of women in our Member States. Under the global strategy, IAEA would continue to provide support in areas of radiotherapy, especially brachytherapy, medical physics and in some cases, as needed, nuclear medicine, for instance, PET/CT. The IAEA’s contributions are guided by the work plan for each country and the already completed inception missions resulting in workplans, which we have started implementing.

The IAEA also welcomes the publication of the Global Report on Cancer, called for in WHA Resolution 70.12 on “Cancer prevention and control in the context
of an integrated approach”. In 2019, the IAEA and WHO developed a new guidance document to help countries design national cancer control programmes and provide consolidated information on available tools and resources for implementing services related to cancer prevention, diagnosis, treatment, and palliative care, with a particular focus on diagnostic imaging, nuclear medicine and radiotherapy. This document can assist our Member States in understanding the universal elements of cancer control and where to seek support for these different elements.

Examples of additional specific activities include: The design of a curriculum for professionals working in Brachytherapy; establishment of a robust Brachytherapy and external beam radiotherapy auditing methodology supporting SSDL network through the IAEA dosimetry lab; making the case for investment in Brachytherapy. Furthermore, the IAEA provides guidelines for comprehensive audits in radiation therapy implemented through the Quality Assurance Team for Radiation Oncology (QUATRO) and provides support for implementing quality assurance in radiotherapy and produces safety standards and training in radiation safety.

Mr Chair,

The IAEA has supported its Member States in developing their capacity to apply nuclear technologies for the diagnosis and treatment of diseases, in areas where these technologies can be highly effective. For instance, in establishing radiation
medicine facilities covering both diagnostic imaging and radiation treatment; combatting malnutrition; supporting capacity in dosimetry for quality assurance in radiation medicine; conduct in coordination with WHO reviews on the status of the cancer care and control through what is known as imPACT review missions with the objective to strengthening national cancer control programmes to maximize investments in radiation medicine. The IAEA in cooperation with WHO and IARC has conducted more than 100 imPACT review missions since the establishment of PACT at the IAEA.

The IAEA has trained over 2000 health professionals and provided more than €172 million since 2011 to assist countries in developing national cancer services. In 2019 alone, we supported more than 125 cancer-related projects worldwide. The goal is to work with our Member States, particularly from low- and middle-income countries, to build and strengthen their capacity in cancer control so that a greater number of patients can be treated safely and effectively.

The IAEA and the WHO have a long and successful history of cooperation. The IAEA looks forward to continuing and further expanding our collaboration through among others, the IAEA/WHO Joint programme on Cancer Control, the United Nations Inter-Agency Task Force on Non-communicable Diseases, the Joint Programme on Cervical Cancer Prevention and Control and controlling vector-borne diseases.
We would like to join the expressions of condolences on the passing of Dr. Peter Salaama, Executive Director of WHO’s Division for Universal Health Coverage – Life Course.

Thank you, Mr Chair.