

Liver Cancer in the Western Pacific Region: a scoping review of existing evidence

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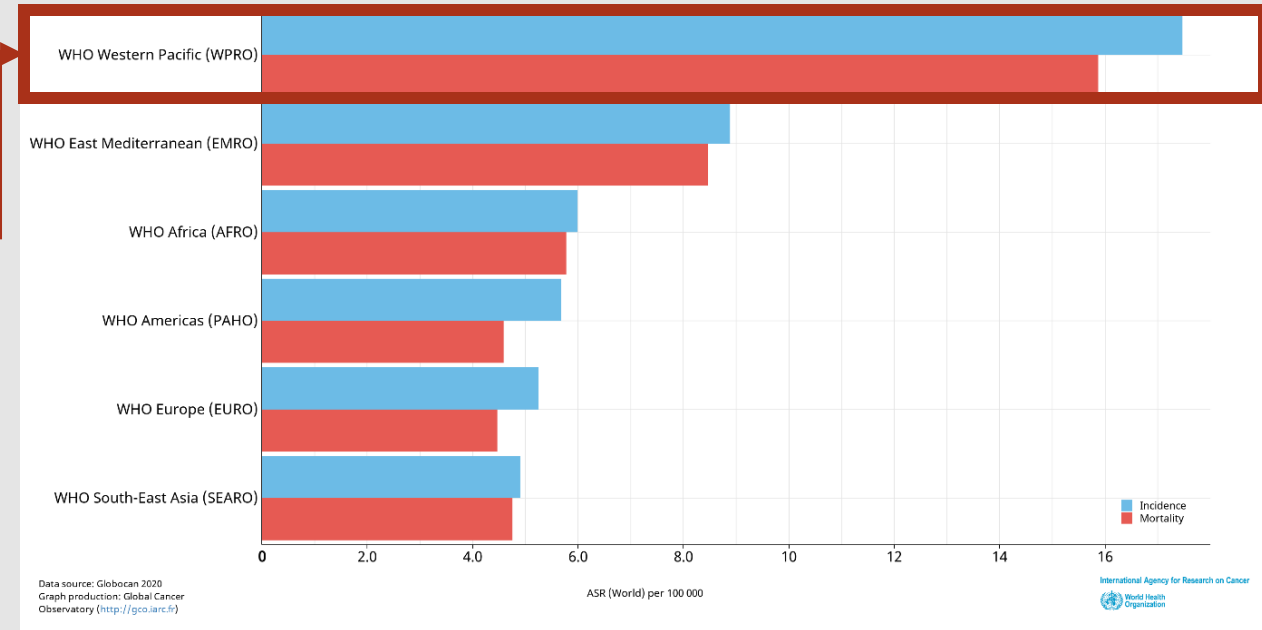
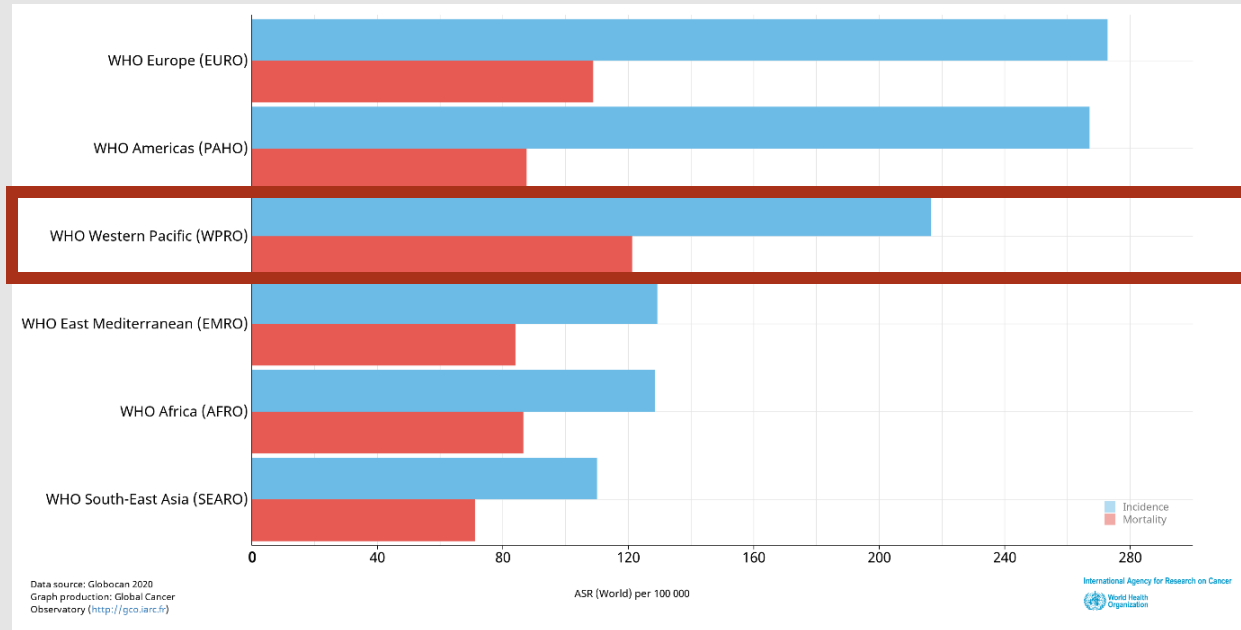
Acknowledgements

A scoping review, commissioned by the WHO Western Pacific Regional Office, was conducted in 2021 to highlight liver cancer prevention and control including the major risk factors in the Western Pacific Region.

Incidence and Mortality by WHO region

Cancer age-standardised incidence and mortality rates

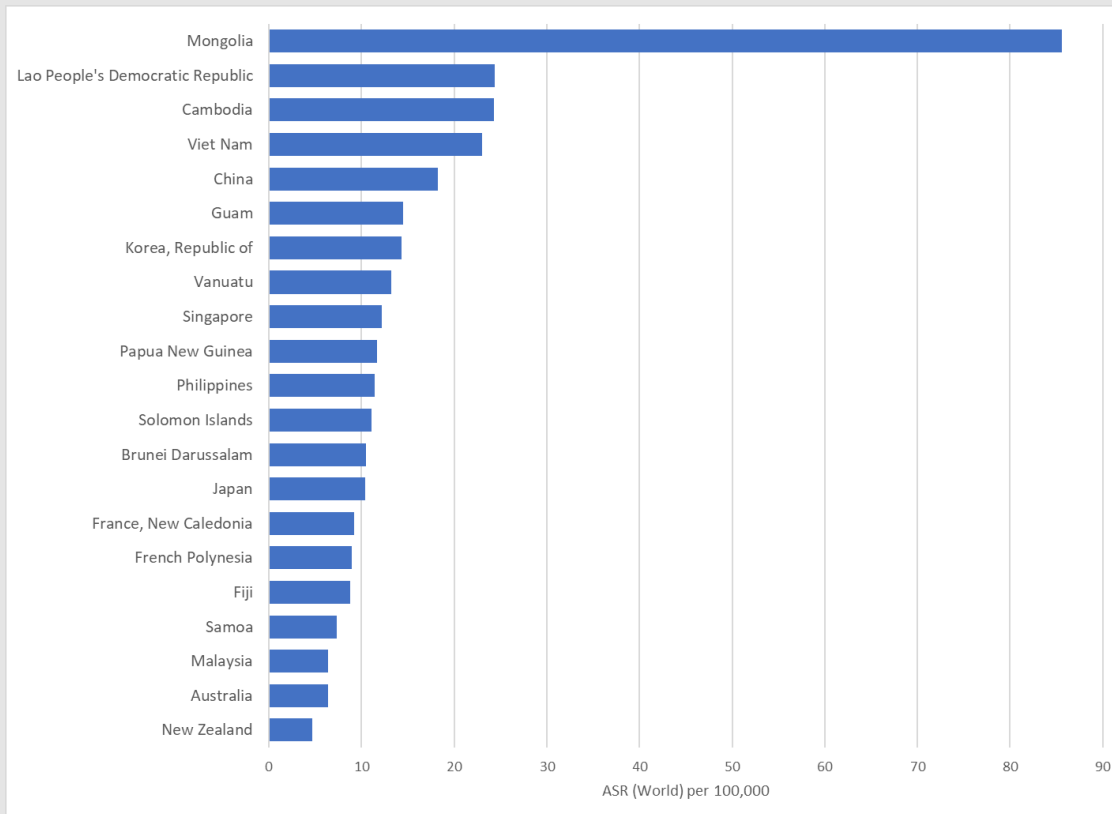
Liver cancer age-standardised incidence and mortality rates



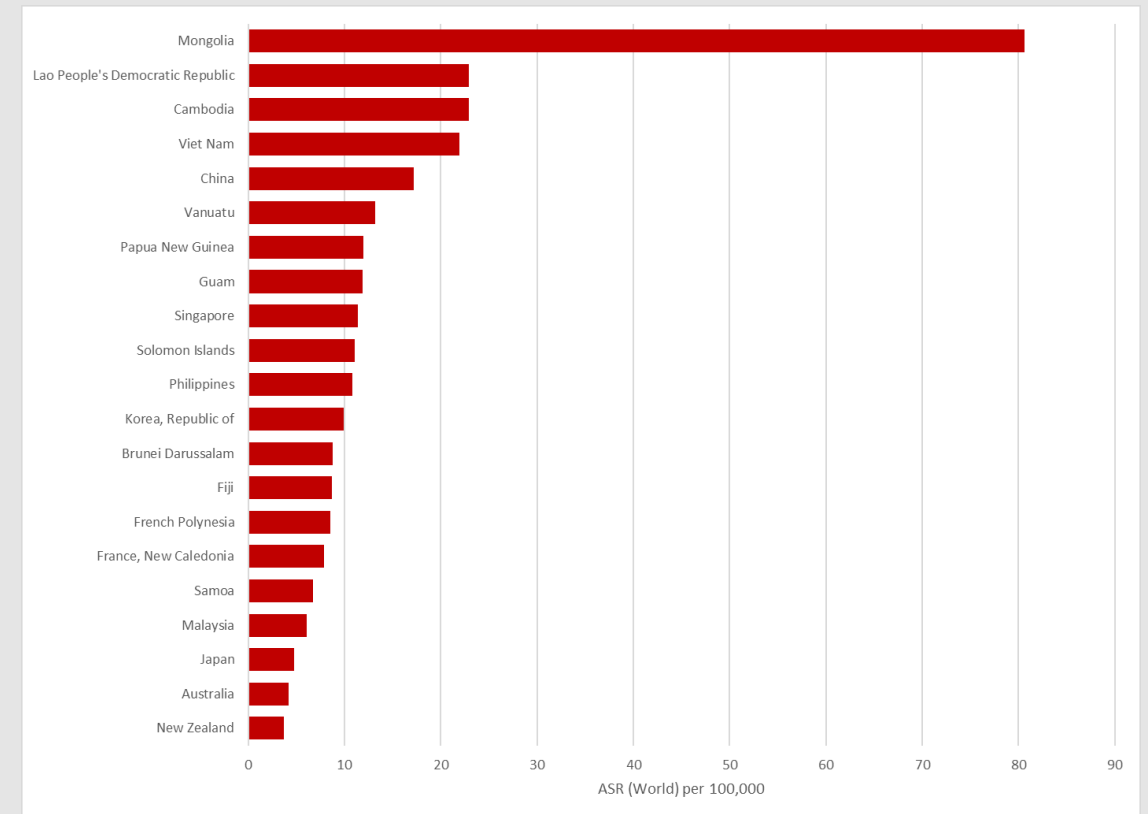
Source: GLOBOCAN 2020

Western Pacific Region Countries

Liver cancer incidence



Liver cancer mortality

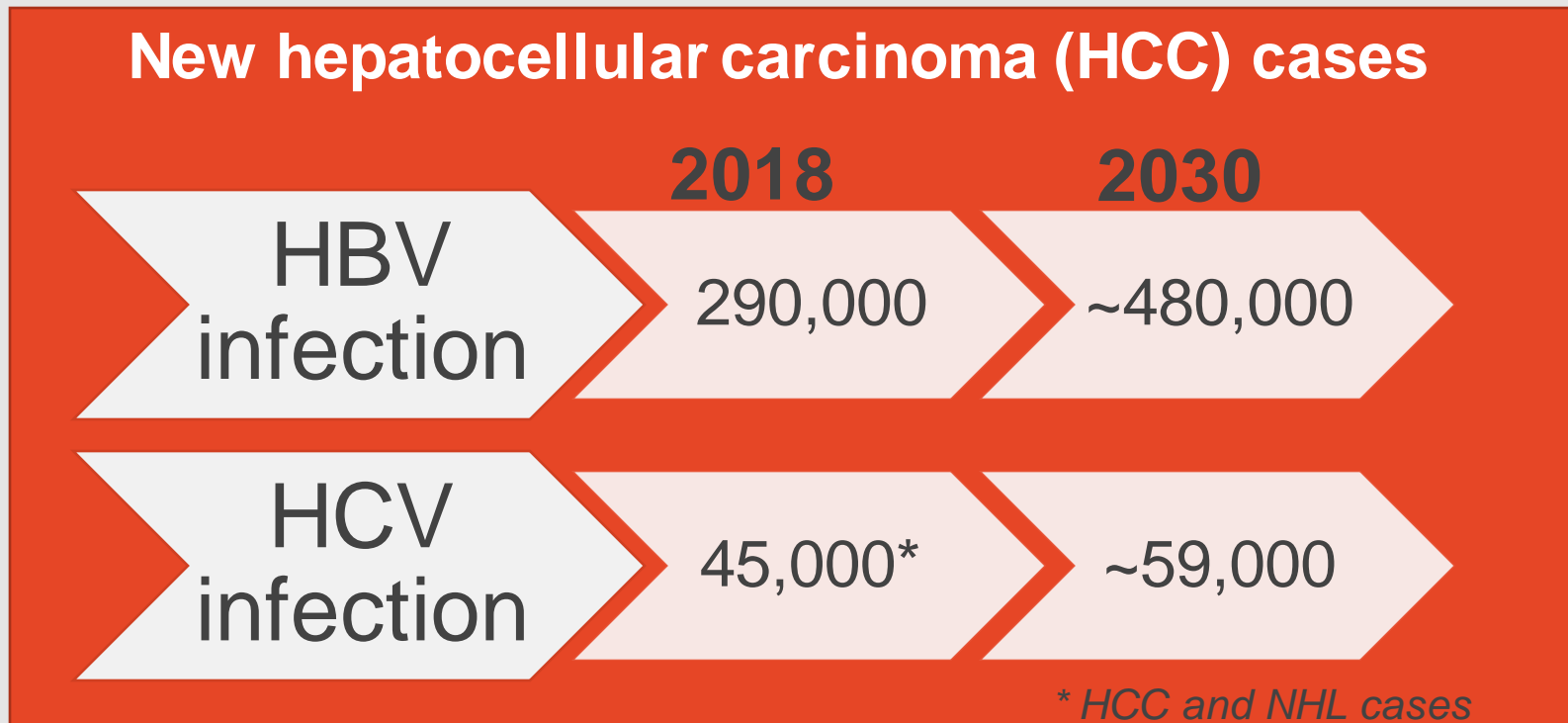


Mongolia snapshot

- Mongolia has the highest liver cancer burden in the region and globally.
- It also has high rates of viral hepatitis infection and the highest global prevalence of hepatitis D virus.
- The government policies and action plans including the Healthy Liver Program supports hepatitis screening and surveillance, improved infection control measures and access to treatment.



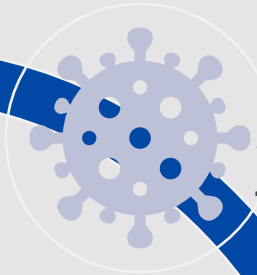
Liver cancer prevention: viral hepatitis



Interventions such as **HBV vaccination** contribute to reducing new infections but there are still **gaps in testing and treatment uptake**



Liver Cancer Prevention Interventions



Hepatitis vaccination, screening and treatment



Tobacco Control

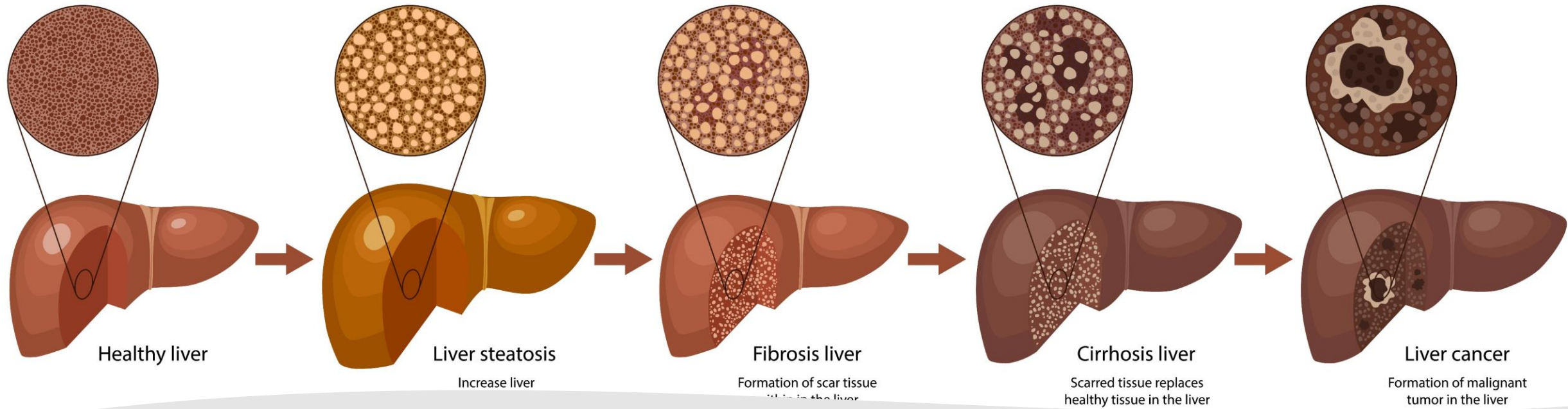


Alcohol control



Healthy lifestyles

STAGES OF LIVER DAMAGE



Early detection of liver cancer

- Two key mechanisms:
 - screening for advanced liver disease
 - Hepatocellular carcinoma (HCC) surveillance for people at high risk
- Japan and South Korea have national programs for HCC surveillance for those at high risk with improved survival

Liver cancer treatment

- Liver cancer has a poor survival due to delayed diagnosis and limited curative treatment options for late-stage disease.
- Local capacity to provide treatment often face challenges of accessibility and availability for those at highest need. In some cases, offshore treatment options are used which are costly, difficult to access and challenging to co-ordinate.



Palliative care

- Liver cancer patients are often diagnosed at a late stage when palliative care is the sole option.
- Equitable availability and accessibility is an issue of growing concern globally.
- The responsibility often lies with the patient's family and the community.

**Next steps in
the Western
Pacific Region**

Action for the Western Pacific Region

1. Liver-related and cancer data availability and monitoring systems (including cancer registries),
2. Health promotion activities around liver cancer related risk factors,
3. Screening activities (in hepatitis and/or advanced liver disease),
4. Early detection of HCC,
5. Access and availability of treatment and palliative care (including simplified pathways to care), and
6. Continuing research

Consideration would need to be given to locally tailored approaches given the vastly different systems and workforce.



Liver Cancer Control

- Communicating the importance of liver cancer is challenging.
- With low survival, the focus would be best placed on prevention, screening and early detection to curtail the rising liver cancer burden:
 - Raising awareness of liver health and liver cancer
 - Extending on viral hepatitis control to support earlier testing and treatment
 - Reinforcing hepatitis control efforts to ensure coverage for all population groups
 - Support early diagnosis activities



Thank you