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International Atomic Energy Agency

Agence internationale de l'énergie atomique

Международное агентство по атомной энергии

Organismo Internacional de Energia Atómica

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In reply please refer to: C1-RER/6/027/01

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2013-06-17

Subject: Invitation to a Regional Training Course on Developing a Radiotherapy Plan within the National Cancer Control Programme, Ljubljana, Slovenia, 24-25 January 2014

Dear National Liaison Officer,

I am pleased to invite you to send nominations of suitable candidates to participate in the above-mentioned training course under the framework of TC Project RER/6/027 – Supporting Comprehensive Cancer Control. The purpose of the training course and related information are outlined in the attached Prospectus.

For candidates who are selected by the IAEA, the Agency will cover the cost of return international travel from the home country to Ljubljana, Slovenia and provide a stipend for the duration of the training course in line with Agency rules and procedures.

Please submit duly completed Nomination Form for Training courses by the latest 15 September 2013. Please note that nominations received after the closing date will not be considered.

The completed nomination forms should be submitted to the IAEA online through the Technical Cooperation Department's InTouch system (<http://intouch.iaea.org>). Should this not be possible, forms may be sent to the Programme Management Officer for this project, Ms Mayumi Yamamoto, through IAEA Official Fax (+43-1-26007) or E-Mail (Official.Mail@iaea.org).

Yours sincerely,

Manase Peter Salema

Director

Division for Europe

Department of Technical Cooperation

Enclosures: Prospectus
Nomination Form

International Atomic Energy Agency

Thematic Training Course on “Developing a Radiotherapy Plan within the National Cancer Control Programme”

PROSPECTUS

Project Number & Title:	RER/6/027 – Supporting Comprehensive National Cancer Control
Place:	Ljubljana, Slovenia
Dates:	24 to 25 January 2014
Deadline for Nominations:	15 September 2013
Organizers:	The International Atomic Energy Agency (IAEA) with the collaboration of the World Health Organisation (WHO) Regional Office for Europe, and in cooperation with the Government of Slovenia through the Ministry of Health and the Institute of Oncology Ljubljana.
Host Country Organizer:	Mr. Primož Strojani Department of Radiation Oncology Institute of Oncology Ljubljana Zaloška cesta 2 Slovenia - 1000 Ljubljana Tel: +386 1 5897 290 Email: pstrojan@onko-i.si Web site: www.onko-i.si
Language:	English
Purpose:	The purpose of the thematic training course is to: (i) Assist Member States to effectively plan national radiotherapy within the national cancer control programme; and, (ii) Transfer knowledge on the use of different tools for developing national strategies and plans, development, implementation, monitoring and evaluation of radiotherapy services at the national level.
Expected Output(s):	Participants will be able to: (i) draft strategic approaches on the national radiotherapy plan; and, (ii) effectively use available tools, methods and approaches for national radiotherapy development services.

Scope and Nature:

The training course will be based on the topics identified in the two leading IAEA Human Health technical publications:

- Planning National Radiotherapy Services: A Practical Tool (2010), and
- Setting Up a Radiotherapy Programme: Clinical, Medical Physics, Radiation Protection and Safety Aspects (2008)

In addition to the IAEA publications, the leading WHO and IARC publications and references are:

- National cancer control programmes: Policies and managerial guidelines (2002)
- WHO Cancer Modules: Planning, Prevention, Early Detection, Diagnosis and treatment, Palliative Care and Policy and advocacy
- GLOBOCAN project provides contemporary estimates of the incidence of, mortality, prevalence and disability-adjusted life years (DALYs) from major type of cancers, at national level, for 184 countries of the world. The GLOBOCAN estimates are presented for 2008, separately for each sex and, for incidence and mortality data, for ten age groups. 1-, 3- and 5-year prevalence data are available for the adult population only (ages 15 and over). DALYs, life years lost due to premature mortality (YLLs) and years lived with disability (YLDs) are available for all ages only.

The major outcome expected from the training is the optimal use of tools, strategies and approaches to assist Member States plan, implement, monitor and evaluate national radiotherapy services within the cancer control programme.

Background Information:

Non-communicable diseases (NCDs), the second largest of which is cancer, account for more than 87% of the disease burden in high income countries. Their prevalence is increasing rapidly in low and middle income (LMI) countries and they have recently been given a higher priority in World Health Organization (WHO) programmes. Cancer is steadily becoming a more important cause of premature mortality than infectious disease in developing countries - cancer deaths already exceed infectious deaths in many middle income countries. Nonetheless, available resources, particularly for cancer, within LMI countries remain grossly inadequate to deal with this burgeoning problem. Developing countries will bear 60 per cent of the world's cancer burden by 2020 and 70 per cent by 2030, but are not prepared for the looming crisis.

The IAEA has worked for over 50 years in over 110 developing countries to deploy sound radiotherapy programmes. Since the 1980s the IAEA has provided over US \$260 million worth of cancer-related assistance under its technical cooperation programme. With a looming cancer epidemic in developing countries, the existing infrastructure is far from sufficient in responding to the growing demand. The IAEA has also observed over the years that investments in cancer treatment, including radiation medicine, cannot be optimized in the absence of comprehensive national cancer control plans and improved national capacity in other areas beyond therapy, such as prevention, early detection, diagnosis, surgical and medical oncology, as

well as cancer policy analysis and formulation, advocacy and management. Effective control of cancer requires major commitments to the training of health care professionals and the provision of adequate facilities for early diagnosis and treatment, as well as public education programs and an efficient private sector producing relevant drugs and medical equipment. Further, a national cancer control programme will need to be established in which priorities are based on the pattern of cancer within a specific country. Prevention may be the best means of control for some cancers, e.g., lung cancer, early detection (followed by effective treatment) for others e.g. cervical, breast and oral cancer, and treatment for others e.g. hematologic and paediatric cancers. The primary treatment modalities, surgery, radiation and chemotherapy, differ with respect to their effectiveness in different cancers, but are much more effective when cancer is detected at an early stage. Ultimately, the effectiveness of cancer treatment, that is, the reduction in mortality (death) from cancer and the increase of both, survival and quality of life of cancer patients, can only be accomplished through research, which provides both a foundation on which to base control strategies, and a means to evaluate the effectiveness of such strategies.

Towards this end, the IAEA has therefore sought to coordinate and align its radiation medicine (radiotherapy and nuclear medicine) activities with the efforts of WHO and other agencies and institutions involved in the expansion of cancer control infrastructure in developing countries by moving to a public health platform. The Programme of Action for Cancer Therapy (PACT) was created within the Agency in 2004 as an umbrella programme to build upon the Agency's experience in radiation medicine expertise and technology to enable developing countries to introduce, expand and improve their cancer control capacity by integrating radiation medicine into a comprehensive cancer control programme that maximises its therapeutic effectiveness and impact.

The WHO-IAEA Joint Programme on Cancer Control established in 2009 integrates and aligns cancer prevention, surveillance, early detection, diagnosis, treatment and palliative care activities and investments within a public health system, and is set up based on the guidelines of the WHO and other leading cancer institutions. It also addresses other challenges such as infrastructure gaps and builds capacity and long term support for continuous education and training of cancer care professionals, as well as for community-based civil society action to combat cancer.

The regional project RER/6/027 serves as a platform for regional cooperation and involvement of WHO and other key international players to assist LMI Member States to combat the looming cancer epidemic in a more effective and sustainable manner.

Participation:

The workshop is open to approximately 40 participants from countries that participate in the project RER/6/027. The target countries are: Albania, Armenia, Azerbaijan, Belarus, Bosnia and Herzegovina, Bulgaria, Croatia, Georgia, Hungary, Kazakhstan, Latvia, Lithuania, Republic of Moldova, Malta, Poland, Romania, Russian Federation, Slovakia, Serbia, Tajikistan, the Former Yugoslav Republic of Macedonia (FYROM), Ukraine, and Uzbekistan.

Participations from non-members of RER/6/027 are also encouraged as the training course could provide opportunities to establish regional networking and information exchanges, such as present own training capacities which other member states may benefit from, and/or explore training opportunities in the region.

Participants' Qualifications:

Nominees from each Member State holding a position at the high management level and/or professionals at policy and decision-making level from nominating country's Ministry of Health and/or leading Cancer Centre involved in **national radiotherapy planning**.

As this training course will be conducted in English, participants should have sufficient proficiency to follow discussions and express themselves in this language without difficulties.

Nomination Procedure:

Nominations for Training Course should be submitted to the IAEA online through the Technical Cooperation Department's InTouch system (<http://intouch.iaea.org>). Should this not be possible, nominations may be submitted on the standard IAEA Nomination Form for Training Course (available on the IAEA website: <http://www.iaea.org/>). Completed forms should be endorsed by relevant national authorities, in particular at the Ministry of Health in consultation with the relevant WHO Country Office, and returned to the Agency through the official channels, i.e. the designated National Liaison Office for IAEA Matters.

The completed nomination forms should be sent to the Programme Management Officer for this project, Ms Mayumi Yamamoto, through IAEA Official Fax (+43-1-26007) or E-Mail (Official.Mail@iaea.org), not later than **15 September 2013**. Nominations received after this date or which have not been routed through the established official channels cannot be considered.

Administrative and Financial Arrangements:

Nominating Governments will be informed in due course of the names of the candidates who have been selected and will, at that time, be given full details of the procedures to be followed with regard to administrative and financial matters.

Selected participants from countries eligible to receive technical assistance will be provided with a round trip economy class air ticket from their home countries to **Ljubljana, Slovenia**, and a Stipend sufficient to cover the cost of their accommodation, food and minor incidentals. Shipment of accumulated Training Course materials to the participants' home countries is not the responsibility of the IAEA.

The organizers of the Training Course do not accept liability for the payment of any cost or compensation that may arise from damage to or loss of personal property, or from illness, injury, disability or death of a participant while he/she is travelling to and from or attending the Training Course, and it is clearly understood that each Government, in nominating participants, undertakes responsibility for such coverage. Governments would be well advised to take out insurance against these risks.