

Controlling Liver Cancer on a Global Level is a Major Challenge!

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Editorial

Liver cancer is the fifth most prevalent cancer in males and the seventh most common cancer in women, and it is the third most common cause of cancer mortality worldwide due to its high fatality rate. Hepatocellular carcinoma (HCC) is the most common histologic subtype of primary liver cancer, accounting for 85-90 percent of all cases. HCC claimed the lives of an estimated 695 000 people worldwide in 2008, with at least two-thirds of the deaths occurring in the Asia Pacific region. Due to the lack of symptoms in the early stages of HCC and the tumor's fast doubling, most HCCs are detected late in advanced stages. Without successful therapy, patients' median survival is projected to be less than a year and less than five months.

The American Association for the Study of Liver Disease (AASLD), the European Association for the Study of the Liver (EASL), the Asian Pacific Association for the Study of the Liver (APASL), and the Japanese Society of Hepatology have all developed clinical guidelines. Surgical resection, percutaneous ablation, and liver transplantation are among the possibly curative treatments for patients with early stage HCC, according to these guidelines. For people with advanced disease, there are fewer effective treatments. However, as Lin and Kao point out, the standards are inconsistent, and further study is needed to produce best practise guidelines for HCC care [1].

While clinical recommendations are necessary and can be useful in standardising therapy, a broader approach is required to address what is defined as a public health problem that requires coordinated initiatives to ensure optimal prevention, control, and management [2]. National strategies for complete liver cancer control, from prevention to early detection and treatment, are not generally published, unlike clinical guidelines. Furthermore, in many countries around the world, little is known or understood about the present public policy demands for cancer prevention and control [3]. Furthermore, the Asian Oncology Summit's consensus declaration emphasises the necessity for "measures aimed at lowering HCC risk factors."

Policy makers have recently recognised liver cancer as an important public health issue. However, the true impact is masked by a lack of accurate epidemiologic monitoring data. A report from the European Hepatitis B expert group, for example, stated that trustworthy epidemiological data on hepatitis B, a primary cause of liver cancer, is scarce. Despite demands to focus on these issues, the intricacies of liver cancer, as well as a lack of political and public awareness, make identifying the most pressing needs to address this rising problem challenging [4]. This paper attempts to highlight the issues affecting liver cancer research, prevention, and therapy in Asia, Europe, and North America, with a particular focus on hepatocellular carcinoma (HCC). Leading liver cancer clinicians' perspectives of the present public policy need to control liver cancer were investigated qualitatively in this study.

To find out what leading liver cancer doctors think about the present public policy needed to control liver cancer around the world.

In eleven countries, key informant interviews were done with a variety of liver cancer clinicians involved in policy. Two researchers used a constant comparative method to digitally record, transcribe

verbatim, translate (where necessary), de-identify, and evaluate interviews [5].

In Australia, China, France, Germany, Italy, Japan, Spain, South Korea, Taiwan, Turkey, and the United States, twenty in-depth semi-structured interviews were performed. Nine themes have been found and grouped into three categories: 1) Promoting prevention through early risk assessment, with a focus on viral hepatitis and other lifestyle variables; 2) Raising political, public, and medical community awareness; and 3) Increasing funding for screening, surveillance, and treatment of liver cancer [6].

Different needs (improved prevention, awareness, and finance) were highlighted by the stakeholders in this study in order to build a comprehensive liver cancer control strategy. Despite the fact that health policies fluctuate from country to country and that various countries have diverse requirements and perspectives, this study found that the countries who participated had more in common than dissimilar needs. The "needs" mentioned by the respondents pertain to the gaps in liver cancer prevention, treatment, and other techniques required to control the illness [7].

To our knowledge, this is the first study to look into the perspectives of leading liver cancer clinicians on the current public policy needs to manage liver cancer around the world. This exploratory study is a critical step toward developing an evidence-based strategy to evaluating readiness for implementing comprehensive liver cancer control programmes. Evaluation methods are required to measure countries' performance in meeting the aforementioned needs [8].

This research contributes to the development of an evidence-based strategy to assessing readiness for implementing comprehensive liver cancer control programmes. Evaluation methods are required to measure countries' performance in meeting the aforementioned needs. Future research will focus on determining how these needs differ by country and developing the best ways for improving the diagnosis and prognosis of patients with liver cancer around the world [9,10].

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Conflict of Interest

None

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