

GEORGIA'S COMPREHENSIVE CANCER CONTROL PLAN

2013-2018

Our Collaborative Course of Action

GEORGIA'S CANCER BURDEN

- In Georgia, **cancer is the second leading cause of death**, accounting for almost a quarter of all deaths.
- In 2011, **more than 45,000 Georgians were expected to be newly diagnosed** with cancer and **over 16,000 were expected to die of cancer**.
- **Lung, colorectal, breast, and prostate cancer** account for **52%** of all cancer deaths in Georgia.
- The state's **lung and prostate cancer mortality rates are nearly 16% higher** than the national average. In Georgia, **lung cancer accounts for more deaths than colon, breast, and prostate combined**.
- **Males are 43% more likely to be diagnosed with cancer** than females. **Black (non-Hispanic) men in Georgia** are 14% more likely to be diagnosed with cancer than white men and 31% are **more likely to die from the disease**.

CANCER BURDEN (USA)

Cancer Site	Direct Costs (in billions of dollars)
All Sites	\$124.57
Breast (female)	\$16.50
Colorectal	\$14.14
Lung	\$12.12
Lymphoma	\$12.14
Prostate	\$11.85
Leukemia	\$5.44
Ovary	\$5.12
Brain	\$4.47
Bladder	\$3.98
Head and Neck	\$3.64

[From the National Cancer Institute \(NIH\) - http://costprojections.cancer.gov.](http://costprojections.cancer.gov)

CANCER CONTROL BACKGROUND

- Plan development, implementation and evaluation guided by **Georgia Cancer Control Consortium (GC3)**
- Facilitated by the Georgia Department of Public Health
- Originally linked to Georgia Cancer Coalition (GCC); Consortium now reorganizing
- Previous plan ended in 2012
- Focus on most burdensome cancers – Lung, colorectal, breast and prostate

PATH TO THE PRESENT



PRINCIPLES

- Honor diverse and inclusive input to a “living” and time-relevant document.
- Expect and encourage opportunities for genuine collaboration and teamwork among partners and stakeholders.
- Value innovation and creativity while relying on evidence-based strategies and science in decision-making.
- Adopt realistic approaches to ensure sustainability of the Plan over time.
- Encourage open communication.
- Maintain the engagement of a significant cross-section of community level members in assessment, planning, implementation, and evaluation.
- Be responsive to system level changes and ongoing opportunities (e.g. changes to federal or accrediting entities’ guidelines, relevant federal and state legislation, etc.).

OVERARCHING AIMS

- Save more lives in the future.
- Improve health outcomes and the quality of life for those living with cancer.
- Reduce disparities in cancer prevention, screening, diagnosis, care, and outcomes.

Cancer Control Continuum

PREVENTION, SCREENING, DETECTION, DIAGNOSIS, STAGING,
TREATMENT, PALLIATIVE CARE, & SURVIVORSHIP

PREVENTION GOALS

- To support the implementation of the Georgia Nutrition and Physical Activity Plan.
- To reduce the number of Georgians exposed to the harmful effects of tobacco.
- To reduce the incidence of cervical cancer in Georgia.

FY 2014 Implementation Priorities

Tobacco Control

Obesity Control

EARLY DETECTION & SCREENING GOALS

- To integrate public and private resources aimed at early detection and screening.
- To increase access to cancer screening services.
- To promote participation in, and compliance with, recommended screenings for breast, colorectal and cervical cancers.
- To promote ongoing study of, and compliance with, recommended screenings for lung cancer (*Developmental*).

2014 Implementation Priorities

Colorectal cancer screening and detection
State wide screening promotion and coordination

DIAGNOSIS, STAGING & TREATMENT GOALS

- To improve the use of quality standards and practice guidelines for the diagnosis, staging and treatment of cancers throughout the state.
- To increase access and accrual of Georgia residents to cancer treatment clinical trials.

2014 Implementation Priorities

Understanding barriers to Commission on Cancer accreditation and use of standards and guidelines

PALLIATIVE CARE GOAL

- To increase the proportion of cancer patients in Georgia who receive palliative care and support from the time of diagnosis.

2014 Implementation Priorities

Promoting Commission on Cancer guidelines

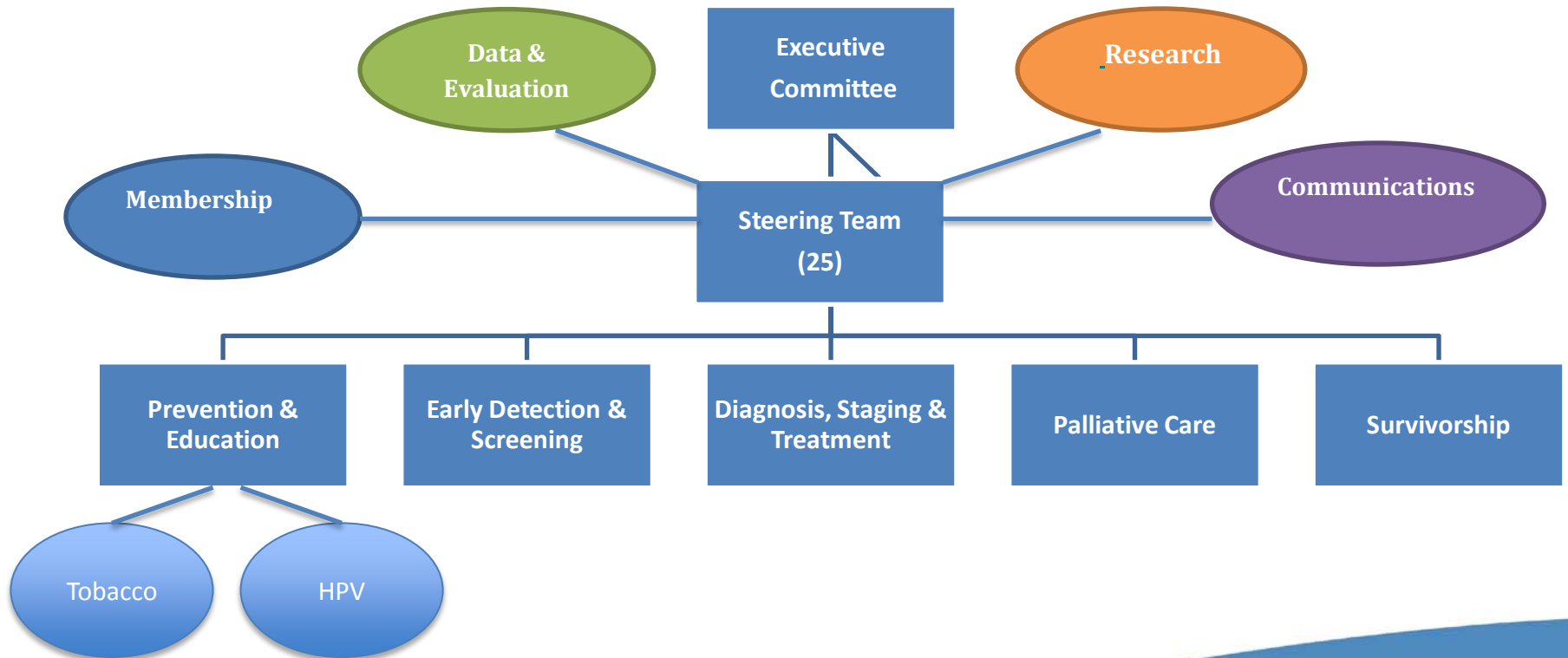
SURVIVORSHIP GOAL

- To improve the quality of life for all cancer survivors in Georgia.

2014 Implementation Priorities

Promoting the use of Survivorship Care Plans

CONSORTIUM STRUCTURE



CONSORTIUM LEADERSHIP

- American Cancer Society
- American College of Physicians (Georgia Chapter)
- Cancer Coalition of South Georgia
- Central Georgia Cancer Coalition
- Commission on Cancer (Georgia Chair)
- East Georgia Cancer Coalition
- Emory Prevention Research Center
- Georgia Association for Primary Health Care
- Georgia Association of Health Plans
- Georgia Breast Cancer Coalition
- Georgia Center for Oncology Research and Education (Georgia CORE)
- Georgia Department of Public Health
- Georgia Hospital Association
- Georgia Regents University
- Georgia Research Alliance
- Georgia Society of Clinical Oncologists (GASCO)
- Hospice Savannah
- Mercer University School of Medicine
- Northwest Georgia Cancer Coalition
- Phoebe Putney Memorial Hospital
- Rollins School of Public Health
- St. Joseph's/Candler Health System
- West Central Georgia Cancer Coalition