Cancer Leaders Call to Fund Gavi, the Vaccine Alliance

We, the cancer societies, oncologists, nurses, community workers and advocates, call upon our governments to prioritize cancer control in the post-2015 development agenda and to support vaccinations against hepatitis B and human papillomavirus, one of the most cost-effective investments in cancer prevention, for advancing the World Health Organization’s ‘25 by 25’ target in reducing cancer deaths.

Every year one million lives are lost to liver and cervical cancer that could have been saved if decisive measures had been taken to achieve the World Health Organization’s (WHO) ‘25 by 25’ target. Over eight out of ten of those deaths are in the world’s poorest nations, where people often lack access to preventive vaccines, screening and treatment. Yet, international aid for cancer and other noncommunicable diseases (NCDs) amounted to a mere 1.2% of total development assistance for health in 2011. The urgent threat that cancer and other NCDs pose on economic growth and development must be prioritized in the post-2015 development agenda.

Vaccinating against the primary causes of liver and cervical cancers is critical to poorer countries in preventing the rising tide of cancer. Hepatitis B vaccine is highly effective in preventing a primary cause of liver cancer, and the elimination of its transmission is an achievable public health goal. Human papillomavirus (HPV) causes virtually all cervical cancer, and current HPV vaccines protect against 70% of cervical cancer cases.

At the 2014 UICC World Cancer Leaders’ Summit and World Cancer Congress, December 3rd-6th in Melbourne, Australia, vaccine-preventable cancers were ranked as one of two top cost-effective prevention priorities, alongside tobacco control, that should be prioritized for investment in combating this disease in low- and middle-income countries. Eminent Australian and creator of the HPV vaccine, Professor Ian Frazer, put the goal of eliminating cervical cancer with HPV vaccines on par with polio eradication.

The economic case for vaccines is proven. Vaccination is one of the most cost-effective public health interventions available, and pays strong economic dividends. The WHO and World Economic Forum consider hepatitis B vaccination a ‘best buy’. Three-dose hepatitis B vaccination is an indicator in the Global Action Plan for the Prevention and Control of Noncommunicable Diseases (NCDs) found that at the price negotiated by Gavi, the Vaccine Alliance of US$ 4.50 per dose, HPV vaccination of pre-adolescent girls is VERY COST-EFFECTIVE with few public health investments providing a greater dividend than HPV vaccination.

Gavi has a strong track record in accelerating access to vaccines for people with the most need. Between 2001 and 2013, 3.5 million hepatitis B-related future deaths were averted thanks to Gavi’s support to low-income countries. In 2013, Gavi opened the door to reaching girls in developing countries with HPV vaccines. With Gavi support, already over 20 countries are delivering HPV vaccines to girls who would not otherwise have been vaccinated. By 2020, a fully-funded Gavi will avert a further 2.4 million hepatitis B-related future deaths, and will vaccinate more than 30 million girls in over 40 countries with HPV vaccines.

We commit to increasing our advocacy to ensure equitable access for people living in the world’s poorer countries to hepatitis B and HPV vaccines through national routine immunization programmes.

We unite our voices and endorse this Call to Action for donors and foundations to mobilize investments of US$ 7.5 billion to Gavi for 2016-2020 to deliver life-saving vaccines to the poorest countries of the world.

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1 Reduce premature deaths due to noncommunicable diseases by 25% by 2025
2 Vaccines: Plotkin, Orenstein and Offit, p.232
3 Highly cost-effective but also feasible and appropriate to implement within the constraints of weaker health systems of lower-income countries
4 www.who.int/nmh/events/ncd_action_plan/en

John Seffrin
Chief Executive Officer,
American Cancer Society, Inc.

Princess Nikky Onyeri
Co-founder & Director General,
Forum of African First Ladies Against Cervical, Breast & Prostate Cancer

Morgan Binswanger
Executive Vice President,
External Affairs,
LIVESTRONG Foundation

Katie Dain
Executive Director,
The NCD Alliance

Anne Lise Ryel
Secretary-General,
Norwegian Cancer Society

Doyin Oluwole
Executive Director,
Pink Ribbon Red Ribbon,
George W. Bush Presidential Center

Cary Adams
Chief Executive Officer,
Union for International Cancer Control