

GLOBAL HEALTH HOT TOPIC:

Cancer control in MENA

Cancer is already one of the commonest causes of death in the Middle East and North Africa (MENA) but it is predicted that by 2030 the burden of new cases in the region will nearly double. This reflects demographic changes, unhealthy lifestyles, infectious causes of cancer, and limited access to treatment and good quality cancer care. To tackle this crisis will require MENA policymakers and practitioners to provide a balanced approach between prevention and treatment (including palliative care), and to do this they need to access relevant research and to increase collaboration across the region and globally.

CABI's **Global Health** database supports the work of policymakers and practitioners, researchers and trainers at leading public health schools, including universities of Johns Hopkins (USA), Oxford (UK), Qatar and King Saud University (Saudi Arabia).

CABI's Global Health database comprehensively covers hot topics that matter

Global Health draws from social, economic, environmental and public health sources to provide a picture of cancer burden and control in low-resourced settings, including information on:

 Conflict and migration as a risk factor: hosting refugees or migrants means dealing with a variety of educational backgrounds, beliefs, priorities and cultural practices all of which influence how cancer arises, is reported and treated.

Cancer in refugees in Jordan and Syria between 2009 and 2012: challenges and the way forward in humanitarian emergencies.

Lancet Oncology, 2014

Cancer related to infection: 13% of cancers in MENA are caused by infection e.g. human papilloma-virus causes cervical cancer; childhood infection with the helminth parasite *Schistosoma haematobium* can lead to adult bladder cancer.

Human papillomavirus vaccination: assessing knowledge, attitudes, and intentions of college female students in Lebanon, a developing country.

Vaccine 2015

Prevalence rate of malaria/helminthiasis co-infections in Genaid irrigated area, Gezira state, Sudan.

Journal of Natural and Medical Sciences 2015

 Speedy access to good quality health services: breast cancer in MENA is a younger woman's disease (under 50 years), with late presentation for diagnosis due to social barriers, rural location, lack of screening programmes. On diagnosis, patients may not have access to affordable and good quality treatment and care.

A review of cancers in Africa [book chapter].

Chronic non-communicable diseases in low and middleincome countries, CABI Publishing, 2016

 Diet and lifestyle: What we eat, what toxins we are exposed to on a regular basis has an effect on cancer levels. The traditional use of tobacco, a rise in obesity from a shift to a "western diet", and poor agricultural practices leading to fungal mycotoxins in food all contribute to MENA cancer rates.

Effect of education by health volunteers on reducing water-pipe use among women in Bushehr [Iran]: an application of Health Belief Model.

HAYAT, 2016

Environmental carcinogen exposure and lifestyle factors affecting cancer risk in Qatar: findings from a qualitative review. *Eastern Mediterranean Health Journal, 2016*

KNOWLEDGE FOR LIFE

Introducing CABI's Global Health database

CABI's world-renowned **Global Health** database gives researchers, students and practitioners unparalleled access to all the world's relevant public health research and practice – providing knowledge without borders. Global Health is the only specialist bibliographic abstracting and indexing database dedicated to public health, completing the picture of international medical and health research by capturing key literature that is not covered by other databases.

For access to premium historical research (1910-1983), combine your subscription with Global Health Archive.

Global Health and Global Health Archive are available on a range of platforms including CABI's own platform CAB Direct (which re-launched in July 2016).

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