Lung Cancer Collaboration (LCC) and IARC Handbook Vol. 21

Media & Press Factsheet

LCC at a glance

- **About/history:** The LCC was launched in September 2021 through the Lung Ambition Alliance and World Economic Forum collaboration, followed by publication of global recommendations at the World Health Assembly (May 2022).
- **Aim:** Support SDG 3.4 by reducing premature mortality from lung cancer and contributing to improved five-year survival by 2030.
- **Approach:** Convene government, civil society, technical, and industry partners around coordinated action on lung cancer prevention, early detection, treatment and health-system integration.
- **Governance and independence:** Since 2023, the UICC hosts the LCC Secretariat, coordinating the programme and providing donor support to institutional partners, such as WHO and IARC, who retain full independence over their technical and scientific work.

Policy momentum

- **September 2024:** The LCC became an integrated UICC programme, strengthening its role as a platform for advocacy, coordination and country support. Advocacy work started to support the development of a WHO lung health resolution with the Ministry of Health of Malaysia.
- **May 2025:** The WHO **Integrated Lung Health Resolution** was adopted at WHA78, explicitly naming lung cancer alongside TB, chronic respiratory disease, air pollution and tobacco control = opportunity to strengthen the prioritisation and integration of lung cancer within national health strategies.
- **June 2026:** The **G7 Leaders' Call** on the Fight Against Cancer recognised lung cancer as a global priority, including the need to strengthen screening and earlier diagnosis.
- **LCC focus** after the resolution: supporting countries and partners to move from policy endorsement to operationalisation.
- **In 2026:** LCC activities are organised across three complementary streams: WHO–LCC joint project on national investment cases, **IARC-led evidence generation (cf. Handbook Vol.21)**, and LCC-led coordination and partnership activities. Together, these streams support the full policy creation and adoption cycle.

IARC Handbook Vol. 21: independent evidence on lung cancer screening

The IARC Handbook Vol. 21 will provide the **first WHO-affiliated**, **independent evaluation** of lung cancer screening, assessing effectiveness, emerging technologies and evidence gaps. UICC funds the work as a donor through the LCC but does not influence the scientific process or conclusions.

Why it matters: IARC Handbooks have shaped cancer prevention policy in areas such as cervical, breast and colorectal cancer screening, HPV vaccination and tobacco control.

Core Objectives: (1) Global trusted evidence (expert consensus), informing national policy discussions about lung cancer screening planning and implementation (=evidence evaluation). **(2)** Accelerate transition from pilot initiatives to national cancer screening. **(3)** Promote equity by supporting approaches that reach underserved and high-risk populations. **(4)** Strengthen prevention by integrating screening with tobacco control, risk reduction, occupational exposure considerations, pollution-related risks and treatment pathways.

Expected deliverables for LCC 2026-2027: (1) A comprehensive evidence review on lung cancer screening methods, benefits, harms, cost-effectiveness and equity. **(2)** Publication Handbook Vol.21 (Spring 2027). **(3)** Policy-relevant evidence on who should be screened, screening frequency and integration into cancer control systems. **(4)** Global dissemination and advocacy targeting Ministries of Health, WHO Regional Offices, professional societies, NGOs and implementers.

Long-term Impact: (1) Serves as a reference for national planning & implementation. **(2)** Help harmonise approaches across regions, support inclusion in Essential Health Benefit Packages and strengthen national cancer control strategies. **(3)** Influencing lung cancer early detection strategies inclusion in WHO Best Buys.

For more details on lung cancer