Emily Evans

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To: Emily Evans
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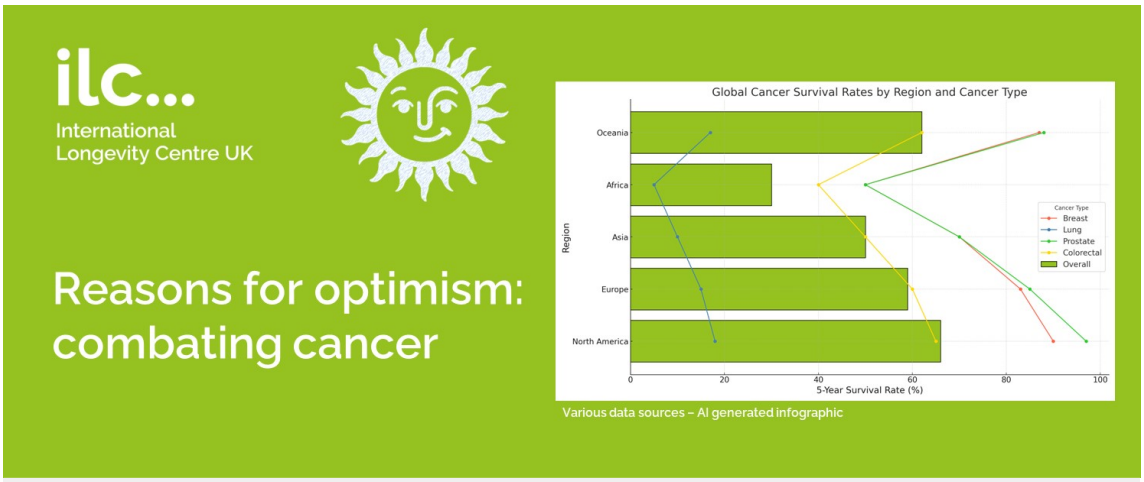
International Longevity Centre UK

Latest news

ILC Friday three

- Reasons for optimism - combating cancer
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Reasons for optimism - combating cancer



Globally, cancer kills around 10 million people a year and is a leading cause of death globally, according to the World Health Organization. Death rates from cancer were falling before the pandemic and over the last 40 years, cancer survival rates in the UK have doubled. But COVID-19 caused a large backlog in diagnosis and

treatment. There is some good news, however. Recent medical advances are accelerating the battle against cancer. Some of the latest breakthroughs in the fight against cancer include:

Faster treatments. Last year NHS England began a roll out of a cancer treatment injection which takes just seven minutes to administer, rather than the current time of up to an hour to have the same drug via intravenous infusion. This both speeds up the treatment process for patients and frees up time for medical professionals.

Less invasive treatments. Liquid biopsies are an easier and less invasive solution to traditional surgical biopsies where blood samples can be tested for signs of cancer. However, liquid biopsies are less able to detect early stage cancerous cells but the latest synthetic biopsies can force cancer cells to produce readily detectable biomarkers reveal themselves during the earliest stages of the disease.

A new generation of non-invasive and lower cost screening tests. US researchers have developed a test that identifies 18 early-stage cancers by analysing a patient's blood protein. In a screening of 440 people already diagnosed with cancer, the test correctly identified 93% of stage 1 cancers in men and 84% in women.

Use of AI to analyse large amounts of data and help diagnose, treat, and prevent cancer. In India, the Centre for the Fourth Industrial Revolution (C4IR) are using AI-based risk profiling to help screen for common cancers like breast cancer, leading to early diagnosis. And researchers at the Massachusetts Institute of Technology (MIT) have developed a new AI deep learning model called 'Sybil' that can predict lung cancer risk up to six years in advance through a single low-dose chest scan.

New methods of predicting the risk and prognosis of cancer based on genetic and molecular factors. DNA analysis of cancer tumours by Cambridge University Hospitals in the UK, is revealing new clues about the causes of cancer. By analysing genomic data, oncologists are identifying different mutations that have contributed to each person's cancer.

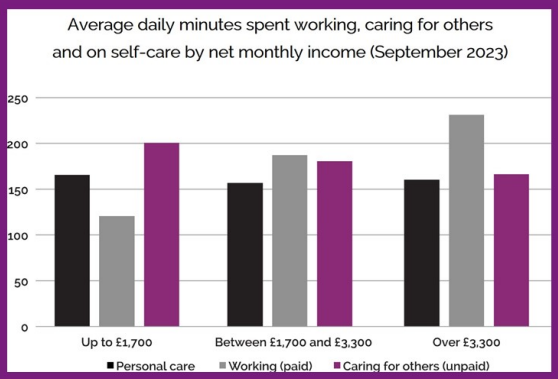
Targetted treatments known as precision oncology. In the UK, the 100,000 Genomes Project, studied just under 14,000 tumour samples from cancer patients integrating genomic data to more accurately pin-point effective treatment. Such treatments mean less harm to healthy cells and fewer side effects.

Preventative treatments. NHS England is hoping that a drug in tablet form could halve the chance of women developing breast cancer. Anastrozole is being made available to nearly 300,000 women identified as high or moderate risk of developing breast cancer. The drug has already been used for many years as a breast cancer treatment but has now been repurposed as a preventive medicine.

In 2015, the ILC published a report investigating the wider social and economic impact of cancer in the UK. Almost a decade on, more people are living with cancer but more are surviving which gives a reason for hope. If you have any optimistic suggestions or solutions for longer lives, please do let us know via the button below.

REASONS FOR OPTIMISM

Imagine if ... we took more care of ourselves



Those on lower incomes spend more time caring for others than for themselves

Care is an inevitable part of long lives. Most of us will care for others. Most of us will need to be cared for. Some 5 million of us regularly provide unpaid care to another adult, with 1.5 million providing more than 90 hours a week. To put this in context, local authorities provide care for around a million adults. But in broader terms, when both childcare and care for other adults are taken into account, we spend more time caring for others than for ourselves across our adult lives.

In his presentation to the Carers UK The Future of Work conference this week, ILC's Chief Executive, David Sinclair, said *"If we really want to recognise and reward care throughout people's lives, we will need to think about bold and radical solutions. We need proposals of a scale more closely matched to the magnitude of the opportunity and challenge ahead. We need to reject current orthodoxies around what it means to live in an ageing society."* He posed a series of questions painting a picture of what could, and should, be possible and referred to a number of ideas set out in ILC's route map for long lives "One hundred not out".

Imagine if we were all healthy for longer. We know we need to spend more on preventative health and we need to get on with it. We also know that sometimes we need help to save us from ourselves and so we should embrace so-called 'nanny state' decisions that have people's best interests at heart.

Imagine if all of us caring and being cared for had space for ourselves to do what we want. There's been a tendency to see fun as too 'unserious' to be pursued by public policy. We spend far less of our lives at work now than ever before but most of our leisure time is spent watching TV. To kickstart change, why don't we provide a £100 culture voucher to all citizens to let people experience what they want to?

Imagine if our communities and housing supported care. We aren't building enough new homes nor are we adapting existing ones for long lives. This puts more pressure on care and carers. We should ensure all new homes built to the Lifetime Homes Standard.

Imagine if our leisure and retail industires were more age inclusive. The nights getting lighter – but for too many people can't leave their home because the environment doesn't let them. We should insist that there is 24 hour access to public amenities including toilets and seating areas.

Imagine if innovation supported care. In our route map for long lives we called for a Healthy Ageing Challenge 2, with a focus on developing and scaling new ideas to improve health, adapt workplaces and tackle isolation and loneliness. Last week UKRI confirmed their plans for a healthy living fund. But instead of being £200m over 5 years, let's put a billion in and become a world leader.

Imagine if we could choose our own hours or if work adapted more to our needs. If we want to reduce the shortfall in workers, we need to make work more attractive and accessible to more people. We need to create healthy workplaces, support skills and learning, champion diversity, and bring more flexibility to our working lives.

For more next step solutions and bolder ideas for long lives please click the button below.

READ MORE

Canada - a case study in healthy ageing?

Countries, like Canada, that spend a higher proportion of their health budgets on prevention perform better on ILC's Index. But even high-ranking countries must do more to ensure ageing populations stay healthy for longer.



The ILC has long argued that governments should allocate at least 6% of health spending to prevention. Canada does, and it has had a significant positive impact on health, seeing a decrease in avoidable mortality — for example, from 150 per 100,000 citizens in 2000 to 116 per 100,000 in 2017.

The ILC's Healthy Ageing and Prevention Index measures how well countries across the world are ageing, looking at lifespan, healthspan, work span, income, environmental performance, and happiness. With a current population of 39 million spread over 9.98 million km², Canada stands at a relatively impressive 11th in the global ranking of the first wave of our Index, level with the manageably much smaller New Zealand.

On average, Canadians live significantly longer (82.2 years), spend more years in good health (71.3 years), and work for longer (32.8 years) than their nearest neighbours, the USA (78.5 years, 66.1 years, and 31.3 years respectively). However, as the current wildfire crisis perhaps attests, Canada could improve its environmental performance. Despite its acres of open green space, Canada's environmental performance is 71 on a scale of 0-100, compared to the UK's 81.3.

In May last year, at the Index's launch alongside the World Health Assembly (WHA) in Geneva, the Canadian Minister of Mental Health and Addictions and Associate Minister for Health, Carolyn Bennett MD, said, *"I don't want Canada to be 11th anymore; I want us to be in the top 10. What are those higher on the Index doing? We are happy to be on the Index, but we've got to do more."* As we return to Geneva to

launch our updated Index at the WHA on 28 May, we're excited to see what progress, if any, Canada and 152 other countries have made in healthy ageing between 2019 and 2022.

There are very few in-person spaces left to join us in Geneva on Tuesday, 28 May 2024, but if you are interested, please see more details here. If you'd like to join us virtually, please click the button below to register.

REGISTER HERE

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