UICC-ARO Convenes International Session at 83rd Annual Meeting of the Japanese Cancer Association

Speakers discuss ways achieving digital transformation in the medical sector as a means of bringing equitable cancer care to more people around the world



(September 21, 2024) The Japan National Committee for UICC (UICC-Japan) and UICC-Asia Regional Office (UICC-ARO) convened a special international session at the 83rd Annual Meeting of the Japanese Cancer Association (JCA). The hybrid meeting, including on-site and online participants was co-chaired by Dr. Tetsuo Noda (UICC-Japan) and Dr. Kazuo Tajima (Mie University).

With the aging of society progressing around the world and particularly in Asia, it is increasingly important to find solutions to cancer care that are equitable and reproduceable in diverse medical settings around the world. Asia now accounts for more than half of all cancer cases and deaths globally and all stakeholders are called on to coalesce their collective knowledge and expertise. In particular, with the digitalization of all aspects of society having made tremendous strides in recent years, and most noticeably the rise of AI, the medical sector is facing a variety of challenges that can only be surmounted through collaborative actions with government and the private sector to harness the benefits of the latest AI technologies. As the COVID-19 pandemic highlighted, and as is the case in disaster and conflict situations around the world, telemedicine and related technologies and instrumentation will be critical in the fight against cancer in the coming years. Based on this recognition, the theme for this year's UICC-Japan/UICC-ARO session at the JCA annual meeting was "Revolutionizing Cancer Research: Telemedicine and Data Infrastructure in the Era of Polycrisis."

Opening the session, Dr. Noda reminded participants of the history of UICC, the world's oldest NGO fighting cancer, with more than 1,200 UICC members across 173 countries. He noted that it is this wealth of knowledge and convening power that makes UICC so effective in tackling the latest challenges on the frontlines of cancer research and care. He also highlighted the role played by UICC-ARO in dealing with cancer control issues facing Asia.

Prof. Jeff Dunn (President, UICC) noted that controlling cancer is a matter for global attention, and that UICC-Japan and UICC-ARO, together with the JCA are key players in the UICC's global assault on this disease, partnering for success. He noted that UICC remains heavily involved in high-level work to drive the global agenda, including at the United Nations. One of the key events run by UICC is World Cancer Day, and starting from 2025 the new three-year theme will be "United by Unique." In closing Prof. Dunn highlighted the importance of such unity among UICC members and the wider cancer research and cancer care communities.

Dr. Vignesvari Subramaniam (National Cancer Society Malaysia (NCSM)) introduced NCSM's efforts to implement telemedicine and telementoring to address cancer disparities in Malaysia. These efforts comprise remote access to patient data and test results, the provision of remote clinical services, and medical education for healthcare professionals. One example of how telemedicine is being incorporated is through a platform called DOCQUITY, a healthcare professional app that is used by 410,000 doctors across ASEAN. It was noted that telemedicine-related activities are highly capable of addressing cancer disparities, but telehealth solutions require further investment, and efforts are required to provide training so that health professionals are capable of using telemedicine to the fullest extent.

Dr. Kazuhiro Suzuki (Cancer Institute Hospital) reported on an initiative to integrate clinical cancer databases and realize automatic and semi-automatic data acquisition. He highlighted the critical need to define data structure and standardized codes in order to ensure harmony between the systems of various hospitals and other institutions. He reported how his team has successfully developed an integrated clinical cancer database, which automatically and semi-automatically collects data from various systems in a matter of seconds. He noted that although there is still a long road ahead, efforts are continuing to streamline database input, retrieval and follow-up.

Dr. Hajime Inoue (Ministry of Health, Labour and Welfare, Japan) reported on the Japanese government's latest Healthcare Ecosystem Strategy, which aims to disseminate Japan's knowledge and expertise

to other countries. Part of this strategy is focused on bringing healthcare workers to Japan from overseas to help to overcome labor shortages in Japan, while providing workers with knowledge and experience that can be utilized in their home countries. By creating a cycle of human resources it is hoped that the strategy will have benefits for both Japan and other countries in Asia.

Mr. Teppei Sakano (CEO, Allm Inc.) introduced the activities of Allm Inc., a medical ICT provider, which is providing telemedicine apps and systems globally, particularly for doctor-to-doctor interactions among oncology experts. Allm is also collaborating with cancer screening initiatives using Al in Japan. An ongoing initiative is to provide telemedicine support in conflict and disaster situations. Allm has a network of 60,000 top doctors ready to provide telemedicine support where needed. Allm has also supported the training in



Japan of 16 Ukrainian doctors, who have since returned to Ukraine and are utilizing Allm devices in their daily operations. Dr. Norie Kawahara (UICC-ARO, Asia Cancer Forum) noted that many challenges in healthcare can be significantly improved through telemedicine, and it is clear that this is a key tool in achieving the goal of UICC-ARO's vision for universal health coverage of cancer across Asia.

Dr. Tomohiro Tada (AI Medical Service) reported on Japan's pioneering efforts to use AI in endoscopy, with a view to realizing early detection of gastric cancer. While the progress made has been extremely promising, It is essential to understand fundamental differences between AI and humans. He noted that while machines interpret consistently based on programing, humans interpretations are more dynamic with time and context. As such, by understanding the limitations of AI and utilizing it as a tool to support human wisdoms, we can move forward to enhance human capabilities. The integration of big data and AI is creating a significant shift in healthcare that will continue going forward.

In closing, Dr. Tajima thanked all participants for the comprehensive discussions that had covered a wide range of topics on the great potential for AI and telemedicine, noting that there is a critical role for cancer researchers to play as key stakeholders in the future of cancer care.