**CHILDHOOD CANCERS**

1. **THE GLOBAL BURDEN 2020-2050**

   **GLOBAL CANCER CASES**
   - Highly trained personnel and access to technology is required for diagnosis. Cancer symptoms can mimic more prevalent infectious and nutritional conditions leading to late diagnosis or none at all.²
   - 2020 to 2050⁴
   - Estimations based on current levels of health system performance (incl. access & referral)
   - 7.6million **DIAGNOSED**
   - 6.1million **UNDIAGNOSED**
   - 13.7million

   *most undocumented cases occur in less developed regions.³

   **GLOBAL CANCER DEATHS**
   - without investing in additional personnel and technology
   - 1.8million **HIGH INCOME COUNTRIES**
   - 9.3million **LOW AND MIDDLE INCOME COUNTRIES**
   - 11.1million

2. **THE ROLE OF RADIOTHERAPY**

   **RADIOTherapy CAN IMPROVE TREATMENT IN COMMON CHILDHOOD CANCERS IN COMBINATION WITH SURGERY AND/OR CHEMOTHERAPY⁴**
   - CENTRAL NERVOUS SYSTEM TUMOURS
   - RETINOBLASTOMA
   - LEUKAEMIAS
   - LYMPHOMAS
   - WILMS’ TUMOUR
   - NEUROBLASTOMA
   - SOFT-TISSUE SARCOMAS
   - BONE SARCOMAS
   - HEAD AND NECK CARCINOMAS

3. **INVESTMENT IMPACT ¹**

   **SOCIO-ECONOMIC BENEFITS FROM INVESTING TO REDUCE CHILDHOOD CANCER DEATHS GLOBALLY**
   - $1 INVESTED
   - $3 NET RETURN

   *The average economic value of a person’s contribution to a country’s GDP with the additional years of life following radiotherapy treatment

**REFERENCES:**
5. IAEA DIRAC accessed 3 Feb 2021.