



Republic of the Philippines
DEPARTMENT OF HEALTH
Office of the Secretary



BAGONG PILIPINAS

November 4, 2024

DEPARTMENT CIRCULAR

No. 2024- 0491

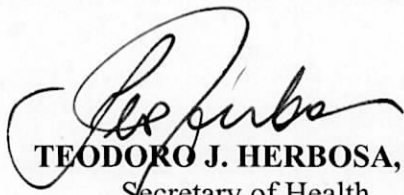
FOR : ALL UNDERSECRETARIES AND ASSISTANT SECRETARIES OF HEALTH; DIRECTORS OF BUREAUS, SERVICES AND CENTERS FOR HEALTH DEVELOPMENT; MEDICAL CENTER CHIEFS AND CHIEFS OF HOSPITALS, SANITARIA AND INSTITUTES, TREATMENT AND REHABILITATION CENTERS; HEADS OF DOH ATTACHED AGENCIES; MINISTER OF HEALTH - BANGSAMORO AUTONOMOUS REGION IN MUSLIM MINDANAO; AND ALL OTHERS CONCERNED

SUBJECT : Dissemination of the Philippine Cancer Center - National Cancer Research Agenda 2024-2028

In accordance with Republic Act (RA) No. 11215, also known as the “National Integrated Cancer Control Act,” the Philippine Cancer Center (PCC) is mandated to serve as the country’s center of excellence in cancer care, research, and capacity development. With research being one of its primary mandates, the PCC spearheaded a research agenda setting project to highlight and emphasize cancer-related research topics aligned with the Department of Health’s (DOH) overarching mandate to set national policy, develop strategic health plans, and establish technical standards and guidelines.

The formulation of the PCC-National Cancer Research Agenda (NCRA) 2024-2028 aims to ensure that relevant cancer-related research in the next five years will have the most impact on the health of Filipinos, and will provide policy-makers and healthcare providers scientific evidence and information for implementing and improving cancer control and care continuum programs and services. Furthermore, the PCC-NCRA 2024-2028 will ascertain that research on cancer will be aligned to the DOH 8-Point Action Agenda, the National Unified Health Research Agenda 2023-2028, Medium Term Health Research Agenda 2023-2028, and other relevant Research Agenda in the country.

With the approval of the National Integrated Cancer Control Council as the overall policy making, planning and coordinating body on cancer control stipulated in RA 11215, the PCC-NCRA 2024-2028 is hereby disseminated for information and guidance.


TEODORO J. HERBOSA, MD
Secretary of Health



Philippine Cancer Center
National Cancer Research Agenda 2024-2028

I. Introduction

The Republic Act No. 11215, also known as the “National Integrated Cancer Control Act,” mandates the Philippine Cancer Center (PCC) to serve as the center of excellence in cancer care, research and development, and capacity development. PCC is placed in a leadership position to advance, foster, and actively participate in the continuous ethical scientific research on cancer control in the country including prevention, diagnosis, and treatment, as well as, assisting various institutions and underwriting research on its various aspects such as prevention and control.

With research as a primary directive, it is significant and necessary for PCC to undertake a research agenda setting focused on highlighting cancer-related topics and themes aligned with the Department of Health’s (DOH) major mandate to provide national policy direction, and develop national plans, technical standards and guidelines on health. The formulation of the PCC National Cancer Research Agenda 2024-2028 aims to ensure that relevant cancer-related research in the next five years will have the most impact on the health of Filipinos, and will provide policy-makers and healthcare providers scientific evidence and information for implementing and improving cancer control and care continuum programs and services. Through multi-stakeholdership and whole-of-government approach methodologies, the development of PCC-NCRA 2024-2028 was guided by the DOH 8-Point Action Agenda, the National Unified Health Research Agenda 2023-2028, the Medium Term Health Research Agenda 2023-2028, and other relevant Research Agenda in the country.

II. Development Process of the Philippine Cancer Center National Cancer Research Agenda 2024-2028

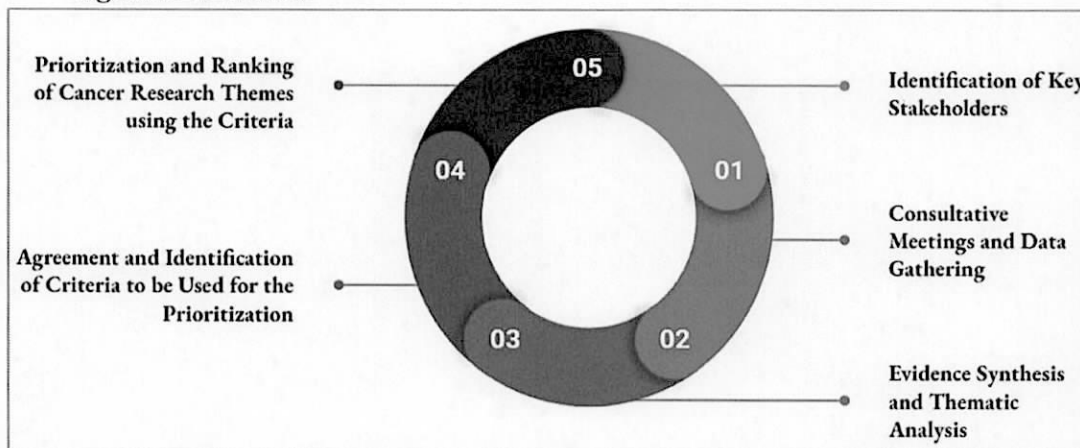


Figure 1. Stepwise Framework for Developing the National Cancer Research Agenda 2024-2028

The Philippine Cancer Center National Research Agenda was developed through a process that started from identifying the key stakeholders of cancer research in the Philippines,

collecting and gathering data through consultations, analysis of the data, and the actual prioritization using agreed criteria.

- **Identification of Key Stakeholders:** The first step involved identifying and engaging with key stakeholders using a criteria for stakeholder mapping, customized to the cancer care research network. The stakeholders who helped develop the research agenda are composed of key experts in the field of health, cancer care, and research.
- **Consultative Meetings and Data Gathering:** After comprehensive desk and literature review key stakeholders were engaged through virtual focus group discussions and key informant interviews. This ensured a comprehensive understanding of the research landscape and facilitated a prioritization process that is inclusive and representative.
- **Evidence Synthesis and Thematic Analysis:** The data gathered from the consultative meetings and data-gathering sessions were then synthesized and analyzed thematically. This process identified emerging themes in the current landscape of cancer research. The initial list of cancer research themes was generated through this analysis. Stakeholders were invited to a face-to-face workshop to undergo the last two processes.
- **Agreement and Identification of Criteria to be Used for the Prioritization:** The plenary agreed on (1) the number of criteria to be used and (2) the weight of the criteria to be used.
- **Prioritization and Ranking of Cancer Research Themes using the Criteria:** The plenary used the identified criteria and its weight in scoring each theme in the initial list which then was automatically scored and ranked, producing the final twelve themes of the agenda.

III. The Philippine Cancer Center National Cancer Research Agenda 2024-2028 (Themes and Sub-themes)

1. **Cancer Treatment Outcomes** - Investigates the effectiveness, safety, and cost-effectiveness of cancer treatments for various cancer types and stages. Focuses on optimizing patient outcomes and evaluating the implementation and impact of cancer-related policies.
 - a. Cancer treatment outcomes - overall survival (OS), progression-free survival (PFS), event-free survival (EFS), quality adjusted life year (QALY), and quality of life (QOL), survivorship, adverse events, relapse/recurrence, and treatment abandonment, for both common and rare cancers
 - i. Precursor Stage
 - ii. Early-Stage Disease
 - iii. Locally Advanced
 - iv. Metastatic
 - b. Nutritional support and upbuilding in improving treatment outcomes
 - c. Impact of multimodal cancer treatment approaches on patient outcomes
 - d. Patient-reported outcomes and satisfaction with cancer treatment services

2. **Health Systems Strengthening** - Researches strategies to enhance governance, financing, technology, human resources, and service delivery for equitable access to cancer care. Includes assessing direct and indirect costs to improve understanding of financial aspects.
 - a. Effectiveness of cancer policies and strategies, such as cancer support mechanisms;
 - b. Evaluation of the National Cancer Control Program;
 - c. Patient navigation and referral systems for cancer;
 - d. Economic evaluation and costing studies on primary, secondary, and tertiary care for cancer (direct and indirect cost);
 - e. Policy analyses of cancer control strategies and its adoption at the local levels;
 - f. Time toxicity¹;
 - g. Utilization of fund assistance; and
 - h. Service level allocations in the health care provider network (HCPN).
3. **Health Promotion, Prevention, and Early Detection** - Studies strategies for promoting healthy behaviors, preventing cancer occurrence, and enhancing primary and or secondary cancer prevention methods such as screening and early detection methods, including related technology and biomarker development.
 - a. Cancer screening methods including artificial intelligence (AI) and innovative technologies;
 - b. Early detection² which covers early diagnosis and screening to include local alternative procedures;
 - c. Effective referral systems strategies for early detection;
 - d. Effective capacity building activities for the communities to healthcare workers in the HCPN;
 - e. Development of promotional materials for healthy lifestyles among individuals, communities, and settings;
 - f. Biomarkers for early detection of cancers;
 - g. Evaluation of health literacy on cancer;
 - h. Effectiveness of cancer prevention and early detection interventions and strategies;
 - i. Assessment of community-based engagements and interventions on cancer control;
 - j. Quality studies on barriers and drivers for cancer screening among Filipinos; and
 - k. Assessment of school-based cancer screening and health education/promotion programs.

¹ Time toxicity refers to "the time spent coordinating treatments and in-visits to a healthcare facility (including travel and waiting), seeking urgent/emergent care for side effects, hospitalizations, follow up tests and rehabilitation" (Gupta, et. al 2022).

² From *Cancer - Screening and early detection* by the World Health Organization, 2010, Accessed thru: <https://www.who.int/europe/news-room/fact-sheets/item/cancer-screening-and-early-detection-of-cancer>

4. **Data Management and Sharing** - Enhances population-based and hospital-based cancer registries and data systems contributing to the National Cancer Registry³, and facilitates collaboration, research reproducibility, and accelerated discoveries in cancer research.
 - a. Development of Big Data platform for cancer;
 - b. Open access data registries;
 - c. Readiness assessment on cancer registration;
 - d. Feasibility studies on mobile technologies to collect community cancer data and information, especially geographically isolated and disadvantaged areas (GIDAs);
 - e. Quality assurance studies of existing cancer registries;
 - f. Frameworks studies on the implementation and operation of cancer registration; and
 - g. Expansion of population-based cancer registries in other regions.
5. **Epidemiological Research on Cancer Burden** - Investigates cancer prevalence, incidence, distribution, and determinants within populations to inform public health policies and interventions.
 - a. Disability-adjusted life years (DALYs) and Quality-adjusted life years (QALYs) (Philippine context);
 - b. Disparities (e.g., social, educational, occupational, regional, ethnic, racial groups);
 - c. Risk factor assessment including genetics, behavioral, lifestyle, social, environment and occupational exposures;
 - d. Link of nutritional history/ behavior and cancer , as well as nutritional support and cancer; and
 - e. Risk factor intervention and impact on cancer occurrence.
6. **Multidisciplinary and Holistic Care** - Integrates medical, psychosocial, nutritional, and supportive services, among others to address diverse needs of cancer patients throughout the care continuum.
 - a. Development and update of clinical practice guidelines;
 - b. Patient navigation studies;
 - c. Integrated care pathways;
 - d. Quality studies on cancer caregiver experience and support needs; and
 - e. Effectiveness of caregiver support programs.
7. **Palliative and Survivorship Care** - Focuses on improving quality of life and outcomes for cancer survivors, including symptom management, psychosocial support, and end-of-life care, often integrated into multidisciplinary care approaches.
 - a. Effectiveness of compassionate community linkages;
 - b. Quality of life of caregivers and families (caregiver strain);
 - c. Long-term effects of cancer care and treatment on survivors (Biopsychosocial);

³ See Republic Act No. 11215: "National Integrated Cancer Control Act" in Article VIII, Section 28, Accessed thru: <https://philcancercenter.gov.ph/ra-11215/>

- d. AI technologies to facilitate survivorship tracking;
 - e. Barriers and drivers for availing palliative and hospice care; and
 - f. Effectiveness of palliative care.
8. **Human Resources for Health (HRH)** - Assesses healthcare professionals' availability, distribution, competency, and retention to address workforce shortages and skill gaps in cancer care.
- a. Evaluation of the staffing standards for health professionals and non-professionals in cancer hospital settings;
 - b. Mapping of healthcare professionals across the country;
 - c. Role of community health workers in cancer prevention and control;
 - d. Cancer competencies of HRH;
 - e. Evaluation of fair compensation and right sizing of health institutions;
 - f. Training needs and skills development assessment; and
 - g. National Cancer Control Manpower Assessment and Development.
9. **Technological Innovations and Interventions** - Researches innovative technologies, devices, and treatment modalities, including imaging techniques, surgeries, targeted therapies, and immunotherapies.
- a. Telemedicine;
 - b. AI-powered imaging and diagnostics;
 - c. Remote monitoring devices;
 - d. Development of diagnostic tools based on novel biomarkers;
 - e. Development of assistive devices for patients with cancer; and
 - f. Effectiveness of novel treatments and diagnostics (including pre-clinical discovery, clinical trial, and validation of imported recommended cancer diagnostics among Philippine population).
10. **Traditional, Complementary and Integrative Medicine** - Studies the efficacy and safety of traditional and complementary therapies in cancer prevention, treatment, and symptom management, integrating them into conventional cancer care.
- a. Safety and efficacy of herbal plants against cancer;
 - b. Roles of complementary medicine in Universal Health Care (UHC) for cancer;
 - c. Cultural acceptability of integrating traditional medicine for cancer;
 - d. Role of food as medicine (functional food); and
 - e. Knowledge, attitude and practices (KAPs) on traditional and complementary medicine on cancer.
11. **Personalized Medicine and Multi-omics Research** - Investigates treatments tailored to individual patients based on genetic and biological factors, utilizing genomics, proteomics, metabolomics, and other omics technologies.
- a. Cancer biobank;
 - b. Molecular profiling of cancer among Filipinos; and
 - c. Precision oncology.

12. Cancer Biology - Researches molecular mechanisms underlying cancer development, progression, metastasis, and drug resistance to identify therapeutic targets and biomarkers for personalized treatment approaches.

a. Pre-Clinical Models of Cancer

Note: For further concerns or clarification regarding the details of implementation, monitoring and evaluation, and dissemination planning of the NCRA 2024-2028, please contact the PCC through email at pccmo@doh.gov.ph or telephone number at 8995-3846 local 402.