

Introduction – from the IARC Director

This Biennial Report showcases a selection of the work conducted by the International Agency for Research on Cancer (IARC) during the period 2022–2023. It reflects the everyday efforts of IARC personnel, in collaboration with the Agency's global network of experts, to provide cancer research for cancer prevention. IARC continued its work on cancer research priorities identified in the IARC Medium-Term Strategy 2021–2025 and took a step closer towards fulfilling its mission of "cancer research that matters".

This Biennial Report is accompanied by a webpage (https://www.iarc.who.int/biennial-report-2022-2023web/) that showcases key facts and figures on IARC and scientific highlights during the 2022–2023 biennium.

Cancer is an immense threat for sustainable development and for our societies. The cancer burden continues to rise globally. IARC estimated that cancer will become the leading cause of premature death worldwide over the course of this century and the single most important barrier to further gains in life expectancy. The cancer burden is not equally distributed across countries, within countries, and between different groups within societies. IARC showed that the greatest increases in the cancer burden by 2040 will affect mainly low- and middle-income countries with low levels of the Human Development Index (HDI). Such inequalities can only be expected to grow unless resource-dependent, effective, and costeffective interventions are considered as greater priorities in low- and middleincome countries and are urgently implemented.

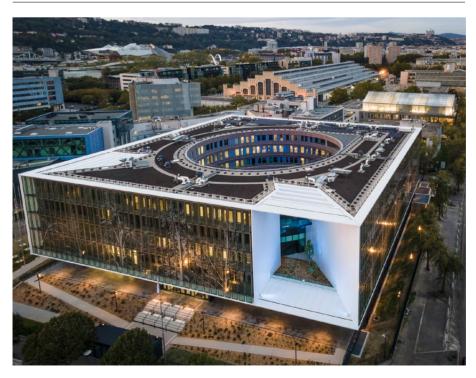
An additional challenge is to reduce social inequalities in cancer. IARC and partners revealed that cervical cancer mortality in Europe is driven largely by levels and trends of cancer mortality rates

in groups with lower education levels. This primarily reflects inequalities in the availability of, access to, and uptake of effective screening programmes, which can detect and remove precancerous lesions and thus reduce incidence and mortality. The immediate implication is that reducing cancer mortality rates among the most disadvantaged groups within countries is a crucial step to lowering the national average cancer mortality rates and the overall burden of cancer. Therefore, cancer prevention measures will depend on action on the social determinants of health, considering socioeconomic, cultural, and geographical conditions.

To improve the implementation of cancer prevention interventions globally, IARC strongly endorsed further intensifying the coordination and collaboration with the World Health Organization (WHO), to enable more effective links between science and policy. In 2022–2023, IARC

and WHO finalized a joint strategic work plan for 2023–2025, which is now being implemented, and intensified the coordination of technical activities. As examples, IARC-led research on breast cancer survival in sub-Saharan Africa has informed key indicators to support the implementation of the WHO Global Breast Cancer Initiative, and for cervical cancer prevention, the WHO Strategic Advisory Group of Experts on Immunization (SAGE) used IARC-led research to conclude that single-dose human papillomavirus (HPV) vaccination delivers solid protection against infection.

For IARC, 2022 was an unprecedented year because of the preparation for the move to its new headquarters building, which brought the Agency many challenges. IARC personnel showed impressive and unwavering commitment and resilience to adapt and rise to these challenges as the situation evolved. After 50 years in the tower building in the



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Grange Blanche district, IARC successfully moved into its new headquarters in the Gerland Biodistrict of Lyon at the end of 2022. With its iconic shape, the new building embodies the Agency's vision for Open Science and international collaboration in cancer research. I am convinced that our new building will become a beacon for cancer research and a catalyst to strengthen collaboration between scientists, health professionals, and the general public.

On 12 May 2023, IARC held an official inauguration ceremony for the new building, which was attended by the French Minister of Health and Prevention, local government officials, members of the IARC Governing Council, dignitaries from IARC Participating States, representatives of WHO, national and international collaborators, and the principal funders of the construction project.

China joined IARC as a Participating State in May 2021. This new membership will further strengthen our collaboration in key research areas and will enable China to join the network of countries that are shaping global research priorities in cancer control and prevention. IARC welcomed a delegation from China to an in-person session of the IARC Governing Council for the first time in May 2023. In keeping with the tradition for incoming Participating States, the flag of China was raised on its pole next to the flags of the other Participating States.



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As described in this Biennial Report, IARC has launched several new initiatives in recent years, such as the IARC Research Teams framework, the development of the fifth edition of the European Code Against Cancer, the IARC Cross-Cutting Working Group on Cancer Prevention Knowledge Translation and Transfer, and the IARC Equity and Diversity Advisory Group. The Equity and Diversity Advisory Group was formed because gender equality in science is essential for IARC to achieve its mission. As we work towards a world where fewer people develop cancer, we also ensure that IARC remains diverse, equitable, and inclusive.

The global scale of IARC's research activities provides a truly unparalleled example of cancer research informing policies and practice related to cancer worldwide. As an international public health organization, IARC is uniquely positioned and plays a critical role in supporting national and international efforts to reduce the global cancer burden, and is a vital resource for governments, researchers, trainees, and health professionals around the world.

I am deeply honoured to have been re-elected as Director of IARC for a second term. I take this opportunity to thank all IARC personnel, who have contributed tremendously to the success of our organization. Together, we have made significant progress in advancing cancer research, prevention, and control, as reflected in this Biennial Report, and I am proud of our collective achievements. As I embark on my second term as Director, I am committed to building on our successes and continuing to advance the Agency's mission with the ultimate goal of reducing the global cancer burden, avoiding unnecessary suffering, and saving as many lives as possible.



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