

UNiTY



The newsletter of the Global Lung Cancer Coalition

Autumn | Winter 2019

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WELCOME

In 2001, nine organizations with an interest in lung cancer came together and formed the Global Lung Cancer Coalition. Today, the GLCC is comprised of 38 non-government patient organizations from around the world.

Our aim is to increase awareness of lung cancer issues, change perceptions of lung cancer, help people with lung cancer access the information and support they need, and push governments and legislative bodies to improve treatment and care.

Already, we have achieved a lot. But we also know that much more must be done to improve the outcomes and lives of people affected by lung cancer – something we are determined to do.



To join us, please read our membership criteria, and download a membership application form at lungcancercoalition.org

LUNG AMBITION ALLIANCE LAUNCHED



In July 2019, the GLCC was delighted to announce the launch of the Lung Ambition Alliance, a new partnership with the International Association for the Study of Lung Cancer (IASLC), Guardant Health and AstraZeneca.

By bringing together a broad range of complementary expertise, including research and education (IASLC), diagnostics (Guardant Health), patient advocacy (GLCC) and medicines research and development (AstraZeneca), the partnership's bold ambition is to eliminate lung cancer as a cause of death.

To make this goal a reality, the Lung Ambition Alliance will focus on three priorities: increasing screening and early diagnosis, delivering innovative

medicine, and improving the quality of care for people with lung cancer.

The Alliance has also set itself a target of doubling the five-year survival of people with lung cancer by 2025. As part of this work, it will support a number of projects including:

The Early Lung Imaging Confederation (ELIC) – a cloud-based, worldwide screening database designed to accelerate improvements in the multidisciplinary detection and management of early-stage lung cancer. The project capitalizes on growing evidence that CT screening can lead to reduced mortality. This collection of images and data can be used to build better risk models, as well as analysis and detection tools, while serving as a global standard for data quality.

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GOOGLE TRANSLATE

Please note that some articles in this newsletter have a Google Translate icon next to them. This is because the original news story for this article is in a language that's not English. To read the complete original story, please copy and paste it into **Google Translate** and select your appropriate language.

OUR ANNUAL MEETING

Thank you to everyone who attended our enjoyable and productive annual meeting in Barcelona in early September.

As always, it was wonderful to see representatives of our member organizations and lung cancer experts coming together to share their knowledge, expertise and experiences.

Highlights from the event included news on the latest advances of the GLCC's e-Atlas, Professor Richard Sullivan discussing his meta-analysis study into lung cancer research across the world, and a presentation on the GLCC's involvement in the Lung Ambition Alliance initiative.



GLCC members gather for our 2019 annual meeting in Barcelona.



To read more about what took place at our annual meeting, please click here.

Continued from page 1

The Major Pathologic Response Project – a collection of clinical trial data and research that can be used to validate surrogate endpoints and identify predictive biomarkers, which may enable the better targeting of tumor characteristics. This will hopefully accelerate the development of the next generation of targeted treatments and drive the shift to earlier intervention.

Initiatives in Lung Cancer Care (ILC²) – an open call inviting local patient organizations around the world to develop and submit pilot projects that can potentially transform patient care and improve survival at the local level. The initiative aims to help the local lung cancer community benefit from multidisciplinary best practices, educate patients about their options and provide quality-of-life support to patients throughout and following treatment.

In addition, the Alliance has launched an international survey, conducted by IPSOS MORI, which will invite general practitioners, lung

cancer specialists and the public from seven countries and three continents to share their perceptions around lung cancer.

The survey will help generate insights and aid the Alliance in developing tailored patient solutions as well as advocacy initiatives. The survey will also establish a barometer by acting as a benchmark to help track the impact of programs on perceptions over time.

“The Lung Ambition Alliance has been created at a pivotal time for lung cancer. Scientific advances are enabling new possibilities to transform diagnosis, treatment and the management of the disease.”

Jesme Fox, Secretary for GLCC

The
LungAmbition
Alliance



For more information about the Lung Ambition Alliance, please visit lungambitionalliance.org

WE NEED YOUR HELP

At our annual meeting, Maureen Rigney of the GO2 Foundation for Lung Cancer launched a new initiative called the Resource Corner.

It aims to provide members with resources that they can use to improve the experiences of people living with lung cancer. For example, Maureen has added to the Resource Corner an app that focuses on cancer-related fatigue and a service that provides information on complementary therapies.

Now, we need members to submit the names of similar resources, and links to them, to glcc@roycastle.org. More information about the Resource Corner will then follow in 2020.



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BIBLIOMETRIC RESEARCH UPDATE

Bibliometric research commissioned by the GLCC from Professor Richard Sullivan and the team at the Institute of Cancer Policy at King's College London has been accepted by the Journal of Thoracic Oncology.

The bibliometric research examines how the funding source (government, industry or not-for-profit) for lung cancer research can affect the direction of the research, the amount of funding available, and how secure and sustainable the funding is for the long term.

The insights gained from the study are intended to guide public policy and highlight where improvements can and should be made.

Currently, the GLCC is preparing a global briefing and individual briefings for each of the 24 countries examined by the study. We will share these briefings with our members as soon as the insights are published in the Journal of Thoracic Oncology.



In the meantime, you can click here to read the findings of the 2016 bibliometric research commissioned by the GLCC.

LUNG CANCER SCREENING RESOURCE CENTRE

The GLCC is planning a new project to build an online lung cancer screening resource centre.

Several of our members have told us that their countries are considering implementing a national screening programme for lung cancer. But these members have found it hard to find detailed information about how screening programmes can work and the evidence underpinning them.

The GLCC's resource centre will offer easy access to key publications, case studies and guidance around lung cancer screening. This centre will be a microsite hosted on the existing GLCC website and available to anyone to use.

Currently, we are starting to gather evidence and set up interviews with international experts to help populate the resource centre. We are now aiming to launch it in early 2020.



For more information about the new lung cancer screening resource centre, please contact glcc@roycastle.org

SOCIAL MEDIA AND LUNG CANCER



The GLCC has started to analyze the results of a study into social media and lung cancer, with Facebook emerging as the most important channel for lung cancer organizations.

We commissioned public relations company Hill+Knowlton Strategies (H+K) to analyze the lung cancer topics people are discussing on social media and what content is resonating with social media users the most.

This involved H+K using specialist online data analysis and capture tools to evaluate the social media content of 65 organizations across the world, including GLCC members and other influential lung cancer organizations.

The social media platforms studied were Vkontakte in Russia, Weibo and WeChat in China, and for the rest of the world, Facebook, Twitter, Instagram and blog forums, as aggregated by Reddit.

Currently, we are continuing to analyze the rich social media dataset created and categorizing content in five themes: events; fundraising initiatives; medicine, technology and treatment; studies, research and information; survivor stories.

One early insight of this analysis is that Facebook should be a primary tool that GLCC members use to share content and engage with people. This is because although GLCC members only shared 44% of their social media content on Facebook, around 75% of their engagement with people occurred on the channel.

In the coming months, the GLCC will compile a detailed report for members on the findings of the social media project.

WELCOME ONKOMAJÁK



OnkoMaják
Pomoc onkologickým pacientům

The GLCC would like to offer a warm welcome to our newest member, OnkoMaják from the Czech Republic.

Based in Prague, OnkoMaják offers information on the prevention, diagnosis and treatment of a range of cancers, including lung cancer.

OnkoMaják also shares information with other organisations, works with doctors and holds roadshows across the Czech Republic to support people affected by cancer.



Please click here for more information.
[Google Translate](#)

FOLLOW MY LEAD CAMPAIGN IN THE UK



The Roy Castle Lung Cancer Foundation launched its Follow My Lead campaign in November, which urges everyone to listen carefully to what people with lung cancer say and take cues from them to avoid making crass or hurtful comments.

Key elements of the campaign included:

- 10 people with lung cancer talking about their experiences, good and bad
- a list of the 10 most outrageous things said to someone with lung cancer
- a list of the best things to say to someone living with lung cancer
- a list of 10 practical ways to support someone with lung cancer
- survey results that reveal what people with lung cancer feel about common cancer clichés and phrases
- a Lung Cancer Awareness pack to help people promote the Follow My Lead campaign.



To find out more, please click here.

UNDERSTANDING EMOTIONAL AND SOCIAL NEEDS IN SPAIN



In November, Spanish GLCC member AEACaP and its partner Fundación Más Que Ideas published the results of a pioneering survey to discover the emotional and social needs of people with lung cancer.

Key findings from the survey included:

- 48.5% of lung cancer patients said they have difficulties carrying out daily activities
- 90% said they have experienced episodes of sadness following their diagnosis
- 34.3% said they have experienced feelings of guilt
- 78.5% said they valued to a greater extent the important things in life
- 45.9% of patients said lung cancer has had a negative or very negative impact on their financial situation.

AEACaP will now work with a range of partners to analyze all the findings of the survey and identify how the health and social care provided to people with lung cancer in Spain can be improved.



To download AEACaP's full report on the emotional and social impact of lung cancer, please click here.

You can also read a summary of the report by clicking here. [Google Translate](#)

NEW APP PARTNERSHIP

The GO2 Foundation for Lung Cancer, one of the GLCC's American members, has announced a new partnership with **Belong.Life**, the world's largest social network for patients, caregivers and healthcare professionals.

The GO2 Foundation now has a community forum and membership area on the e-health app where the organization's social workers, clinical trial specialists and survivor volunteers can provide support, education and hope to people affected by lung cancer.



To find out more, please click here.

BEN FATTO, ALCASE!



People from across Italy gathered for ALCASE's national meeting.

ALCASE of Italy held a successful fifth national meeting for people with lung cancer and their caregivers in Rome in September.

Topics covered during the two-day event included the need for a national lung cancer screening program and the stigma that still surrounds lung cancer today.

ALCASE was also delighted to welcome to their meeting Dr Toshiyuki Sawa from the West Japan Oncology Group, an organization that's a fellow member of the GLCC.

#IDESERVETOLIVE CAMPAIGN LAUNCHED

#IDESERVETOLIVE 

Lung Cancer Canada launched a social media campaign called #IDESERVETOLIVE during Lung Cancer Awareness Month in November.

The focus of the campaign was to raise awareness that people with lung cancer are struggling to access new medications and treatments, potentially life-saving screening programs are not being implemented across Canada, and not enough

money is being invested into lung cancer research.

To support the campaign, Lung Cancer Canada asked people to make an online pledge that people with lung cancer deserve to live; and it encouraged people affected by lung cancer to share their story on social media using #IDESERVETOLIVE in their posts, and to tag and challenge others to sign the pledge.



Please click here for more information.

WOMEN AND LUNG CANCER WEBPAGE

To shine a spotlight on women and lung cancer, the Lung Cancer Research Foundation (LCRF) in the US has created a page on its website that is solely dedicated to this topic.

As well as featuring important facts such as non-smokers who develop lung cancer are twice as likely to be women than men, the page highlights the stories of women currently living with lung cancer.



To find out more, please visit lcrf.org/women

Please see page 10 for our Q&A with Cristina Chin of the Lung Cancer Research Foundation.

LUNG CANCER NURSING UK

The National Lung Cancer Forum for Nurses (NLCFN) celebrated its 20th anniversary conference with a major rebrand to improve understanding of its expertise and professionalism amongst healthcare professionals and policy makers.

Now, the UK's largest network of specialist lung cancer nurses is called Lung Cancer Nursing UK, and it has a fresher visual identity and more accessible website.

Lorraine Creech, Chair of Lung Cancer Nursing UK's trustees, said, "National bodies are seeking engagement with nurses, and we want our rebrand and new website to be a platform for getting wider groups of policy makers to see how Lung Cancer Nursing UK works and the value that we add to both strategy and patient care."



For more information, please visit lcnuk.org

HELPING HOPE GROW IN PORTUGAL

A ESPERANÇA
ESTÁ A PÔR-SE
EM BICOS DE PÉS

Em breve saberá mais



Pulmonale's new campaign, which marks its 10th anniversary, asks people in Portugal to help hope grow, not cancer.

The campaign highlights the advances in science made over the past decade which have saved and improved the lives of people with lung cancer, giving hope when before there was none.

It also states that hope is about the future, and breakthroughs yet to come. So Pulmonale's campaign is an appeal too, asking everyone to support the organization, which includes watching and sharing the video that's at the heart of the campaign.



Please click here for more information.

And please click here to watch the campaign's video, which features a five-year-old girl representing 'Hope'.

SWEDISH EARLY DETECTION FILMS

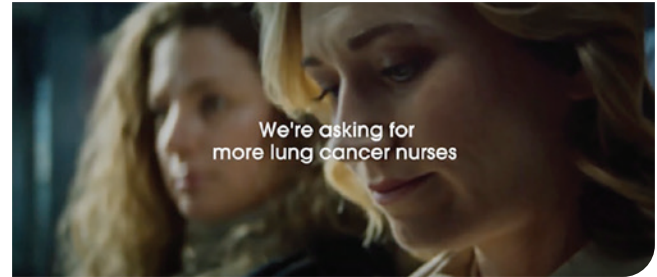
Lungcancerföreningen of Sweden, in collaboration with Pfizer, continued their campaign to improve the early detection of lung cancer by launching two short films in November.

The first film focuses on the personal experiences of Mia Rajalin, who sought care 14 times before her lung cancer was diagnosed. While the second film is about Yann Fränckel, who contacted healthcare providers 33 times before receiving her lung cancer diagnosis.



To view the two 10-minute films, please click here. [Google Translate](#)

LFA LAUNCHES INNOVATIVE SHORT FILM



On the eve of Lung Cancer Awareness Month, Lung Foundation Australia (LFA) launched a short film called Walk In My Shoes to showcase the experiences of Australians living with lung cancer.

For the first time, LFA worked with the video producer Playtime to creatively and impactfully place the viewer in the shoes of someone diagnosed with lung cancer. The premise of the film was to bring to life through slow motion the feeling of time standing still and the isolation experienced following a lung cancer diagnosis.

In addition to the short film, LFA published its first National Report Card, which called for the funding of 100 lung cancer nurses by 2030. Currently, there are just 12 supporting the 12,817 Australians who are diagnosed with lung cancer each year.



Please click here for more information and to view the Walk In My Shoes short film.

IMPROVING THE BULGARIAN MEDIA'S CANCER KNOWLEDGE

APOZ of Bulgaria hosted a workshop in October attended by doctors, other healthcare professionals, psychologists, patients and journalists, which had a key aim of improving the Bulgarian media's basic knowledge of cancer.

Titled How to Talk About Cancer – Errors and Reality, the event covered topics including:

- modern methods for the diagnosis and treatment of cancer
- innovations in therapy
- new terminology, such as gene therapy and brachytherapy
- why patients should not refuse therapy and self-medication
- the place of non-medical care in a person's overall treatment
- who are cancer carers
- how to be truthful but also compassionate about cancer.




Please click here for more information. [Google Translate](#)

LUNG CANCER MEDIA ROUND-UP

HIGHLIGHTS FROM 2019 IASLC WORLD CONFERENCE ON LUNG CANCER

Check out all the news from the 2019 conference in Barcelona, Spain, which took place 7–10 September.

 [Please click here for more information.](#)

US STATE OF LUNG CANCER REPORT

American Lung Association publishes State of Lung Cancer report, which shows how the impact of lung cancer varies in American states, and that more must be done to protect Americans from lung cancer.

 [Please click here for more information.](#)

CALL FOR GREATER EU FOCUS ON LUNG CANCER


The European Society of Radiology (ESR), the European Respiratory Society (ERS) and Lung Cancer Europe (LuCE) call for greater awareness of lung cancer issues and the need for increased visibility of the disease in European Union (EU) policies.

 [Please click here for more information.](#)

[And please click here to download the campaign's fact sheet.](#)

NEW FINDINGS ON VAPING

Research presented by the American Heart Association (AHA) reveals e-cigarettes match traditional smoking in some heart risks. The AHA also announces an initiative involving research, policy advocacy and youth activation to address the significant growth in the use of e-cigarettes by young people.

 [Please click here for more information on AHA's latest research on e-cigarettes.](#)

[And please click here for information on AHA's new youth vaping initiative.](#)


IASLC STATEMENT ON E-CIGARETTES

The IASLC issues a new policy statement that strongly discourages the use of electronic cigarettes by young people or adults who are not currently smoking.

 [Please click here for more information.](#)

REVEALING THE SECRETS OF HOW LUNG CANCER SPREADS

Three studies from Cancer Research UK's TRACERx project reveal that samples of a patient's blood and tumor could reveal early on whether their lung cancer may spread and become untreatable.

 [Please click here for more information.](#)

DURVALUMAB POSITIVE RESULT

Adding the immunotherapy treatment durvalumab to chemotherapy improves overall survival in people with extensive-stage small cell lung cancer, according to the results of the CASPIAN trial.

 [Please click here for more information.](#)

STUDYING THE ENERGY OF LUNG TUMORS

Researchers at the University of California, Los Angeles (UCLA) study for the first time images of mitochondria in live tumor cells, which could help to predict potential treatments for lung tumors. Some tumors and cancers are heavily dependent on mitochondria to grow.

 [Please click here for more information.](#)


POTENTIAL DRUG TO INHIBIT KRAS PROTEIN

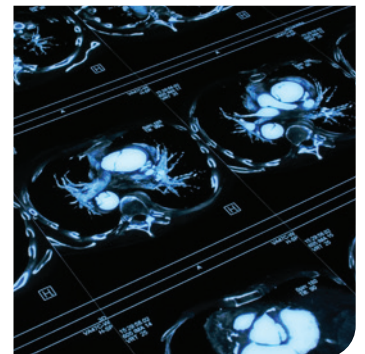
A paper published in Nature unveils AMG 510, the first small molecule inhibitor of the KRAS protein to advance to clinic, and which is currently enrolling in a potentially registrational phase 2 study.

 [Please click here for more information.](#)

CHEST X-RAYS MISSING LUNG CANCERS

Researchers in the UK publish evidence in the British Journal of General Practice that chest X-rays miss nearly a quarter of lung cancers.

 [Please click here for more information.](#)



HOW TO... WRITE AND SUBMIT AN ABSTRACT

In our ongoing series of How to... features, we provide some top tips on how to write and submit an abstract for a conference paper.



This type of communication can be very important to GLCC members, because being accepted to present your full paper could raise your profile, increase your networking opportunities and ensure your research, findings and accomplishments are read by many people.

What is an abstract?

An abstract is a brief summary of an oral or poster presentation you would like to give at a conference. Typically, it's 300 to 500 words in length.

Why should I submit?

An abstract is the first step to presenting at a conference, which:

- offers organizational visibility/credibility
- allows you to connect with those interested in your topic
- may lead to new collaborations
- increases the knowledge of attendees
- provides an opportunity for professional growth.

Why shouldn't I submit?

- Abstracts can take a lot of time to do well.
- You risk disappointment if your abstract does not lead to an invitation to present.
- If accepted, you will have to spend time creating a poster or presentation.
- You will need to pay your own conference costs, including registration, airfare, hotel, etc.

What should I submit?

- Original research carried out by your organization.
- Information about a project or program.
- Information about a campaign.

Consider whether the subject you're focusing on:

- is unique and of interest to other people
- helps others solve a problem.

How do I write my abstract?

Typically, an abstract will feature the following sections:

- Background
- Method
- Results
- Conclusion

You may also want to consider the four Cs before writing your abstract:

Complete – cover all the major points you want to talk about.

Concise – don't use unnecessary words or information.

Clear – ensure your abstract is easy to read and understand.

Cohesive – make sure it flows smoothly from one section/ paragraph to the next.

Other writing tips:

- Start planning and writing well before your deadline. A good abstract takes time.
- Try to create a snappy yet informative title that gets your abstract noticed.

Where do I submit my abstract?

You could submit your abstract to conferences that focus on:

- psychosocial oncology
- medical oncology, but which also covers patient-focused areas such as advocacy and support.

How do I submit?

- Each conference should have an online submission portal.
- Write your abstract in a Word document and then copy and paste it into the submission form.
- Alternatively, you may be asked to attach your Word document and send it.
- Be sure to submit your abstract to the most appropriate category for each conference.
- Take care to follow each conference's rules on subject matter and length. They may be different.

When do I submit?

Each conference will have a deadline for abstract submission. Work backwards from this date to ensure you have enough time to plan, write and review your abstract, and meet your deadline.

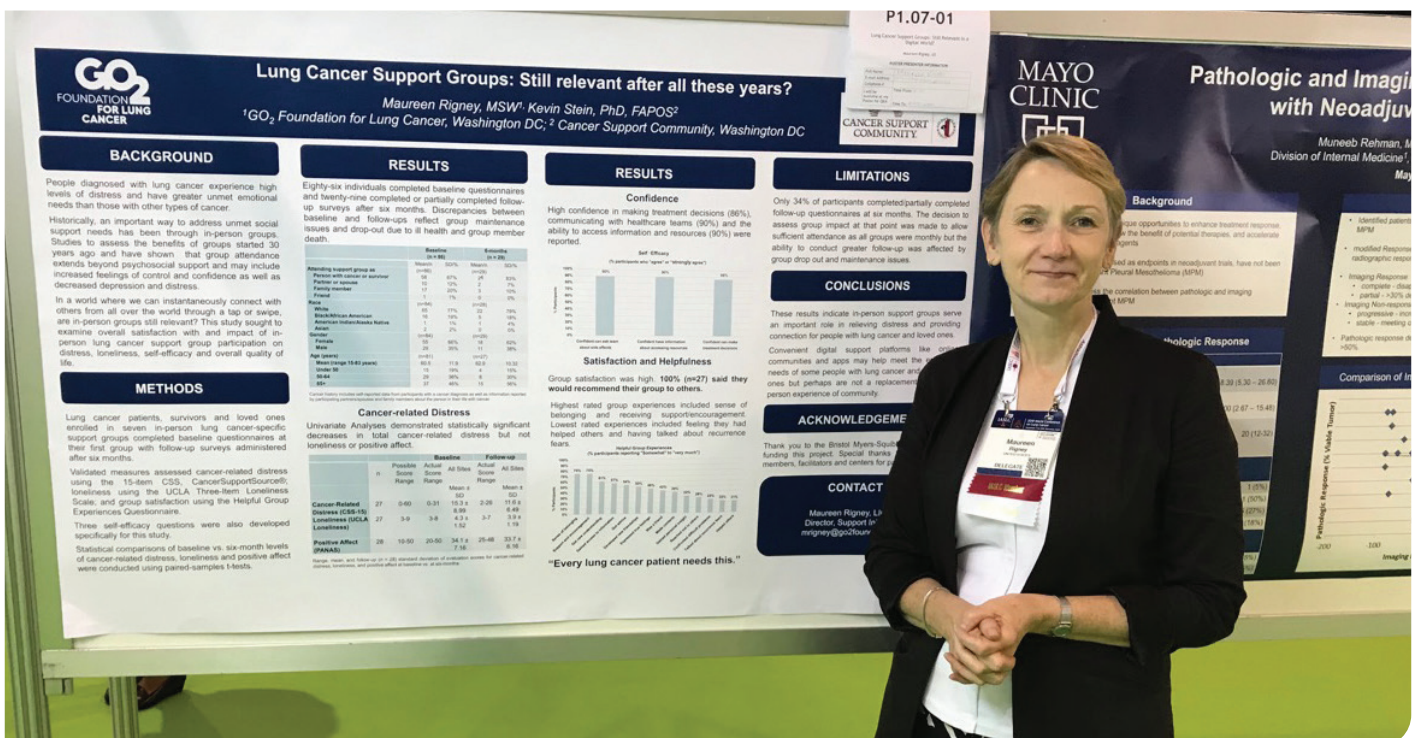
What's next?

You will be given an approximate decision date by each conference.

If accepted, you will:

- learn if you need to give an oral or poster presentation
- need to register for the conference
- make your flight and hotel reservations
- prepare your poster or presentation, which may need to be submitted before the conference.

This feature is based on a document created by Maureen Rigney of the GO2 Foundation for Lung Cancer. Thank you, Maureen.



Maureen Rigney of the GO2 Foundation for Lung Cancer presenting a poster at the World Conference on Lung Cancer.



Answering our questions in this edition of Unity is Cristina Chin, Senior Manager of Education and Outreach at the Lung Cancer Research Foundation, USA.

Q. How many people are affected by lung cancer in your country?

A. In 2019, in the United States alone, an estimated 228,000 people were diagnosed with lung cancer and 143,000 lives were lost to the illness.

Lung cancer takes almost twice as many men's lives as prostate cancer and almost twice as many women's lives as breast cancer does. And up to 20% of lung cancer cases occur in people who are non-smokers.

Q. How does the Lung Cancer Research Foundation aim to improve the lives of people affected by lung cancer?

A. The Lung Cancer Research Foundation's (LCRF) mission is to improve lung cancer outcomes by funding research for the prevention, diagnosis, treatment and cure of lung cancer. LCRF also provides support to patients and caregivers, and engages and educates local communities on lung cancer risk and prevention.

Q. What sort of research does LCRF fund?

A. We fund research for the prevention, diagnosis, treatment and cure of lung cancer. And to date, LCRF has funded 370 research grants, totaling nearly \$34 million, the highest amount provided by a non-profit dedicated to funding lung cancer research.

The majority of our grants support impactful, translational research that has the potential to extend survival and improve quality of life for people with lung cancer. This includes research into prevention and screening for early detection; the identification of new biomarkers and the development of targeted therapies; the development of next-generation chemotherapeutic agents; the support needed by people with lung cancer and their families; and the quality of care currently being provided and the outcomes being achieved.

Importantly, through our grant program, we aim to provide seed funding to researchers with groundbreaking ideas, to help them establish proof of concept and pave the way for additional grant funding from universities, government institutions and additional sources.

Q. Can you tell us more about the direct support you provide to people affected by lung cancer?

A. The support we offer to patients and caregivers includes **free educational materials** which cover topics such as immunotherapy, living with lung cancer, and caring for someone with lung cancer.

We offer **online patient information**, including screening information and inspirational stories. This is now accessible on our brand new website, which was launched in January 2020. And we have a **Lung Cancer Support Line**, which provides education, connections to resources and opportunities for meaningful engagement, helping people face and overcome their challenges.

In addition, we oversee the **Lung Cancer Mutation Consortium**, which helps patients access tumor testing for characteristics that can be targeted by the most effective therapies. And we have a **clinical trial search tool** that provides useful information to patients who might benefit from taking part in a trial.

In 2019, LCRF also held its first educational workshop. We now have plans to hold similar events in 2020. Something people can keep up to date with by signing up to our mailing list or through social media.

Q. How do you educate and engage with local communities?

A. LCRF is dedicated to engaging and educating local communities on lung cancer risk and prevention. So we hold events, including signature events and Free to Breathe Walks and Yoga, which bring our mission to improve lung cancer outcomes to communities nationwide.

Our community fundraising program empowers individuals, families and communities to raise funding for crucial research and patient programs. And we provide public awareness resources to help people understand the symptoms and risks of lung cancer.

On top of this, we launched our very first outdoor patient education campaign in Chicago and Philadelphia in 2019, which aimed to increase awareness and education on the risks of lung cancer, and to destigmatize living with the disease.

As part of this campaign, we set up a new website, **IfYouHaveLungs.org**, which contains information about lung cancer, patient resources, and ways to get involved.

GLCC members can see more about this awareness campaign, and all of the other exciting projects happening at LCRF, by checking out our new website at lcrf.org

Q. It sounds like there's a lot of amazing work taking place at LCRF, but is the organization having the impact it wants?

A. Absolutely. We know every year that our support and community work saves and improves the lives of thousands of people in the US. But most importantly, our research funding is helping to accelerate the approval of new lung cancer treatments by the FDA [Food and Drug Administration].

In the past, lung cancer treatments were few and far between. But since the early 2000s, we've observed a steep increase in the number and variety of treatments available for lung cancer. This rapid development exemplifies the discoveries and continued progress made by LCRF and other investigators around the world.

In 2018 alone, there were 10 approvals. And notably, 2018 also saw the first small cell lung cancer treatment approved in over a decade.

Q. Do you have a message for your fellow members of the GLCC?

A. Well, first of all, it was great to meet so many wonderful GLCC members at our annual meeting in Barcelona, this year. The discussions we had on patient advocacy and lung cancer research will definitely inform how LCRF funds lung cancer research and creates patient-focused programs in the future.

I'm also looking forward to greater collaboration with members too. Because it is by working together that we will accelerate progress on many fronts and achieve even more for people affected by lung cancer across the world.



**LUNG CANCER
RESEARCH
FOUNDATION**

Living. Breathing. Science.



For further information about the Lung Cancer Research Foundation and its work, please visit lcrf.org



Fundación Pacientes de Cáncer de Pulmón: www.fundacionpcp.org



LungFoundation Australia: www.lungfoundation.com.au



Oncoguia Institute: www.oncoguia.org.br



Bulgarian Anti-Cancer Patient Association (APOZ): www.oncobjg.info



Canadian Lung Association: www.lung.ca

Lung Cancer Canada: www.lungcancercanada.ca



OnkoMaják www.onkomajak.cz



Patientforeningen Lungekraeft: www.lungekraeft.dk



CanSurvive: www.facebook.com/CanSurvive



La Ligue Contre le Cancer: www.ligue-cancer.net



Deutsche Krebsgesellschaft E.V: www.krebsgesellschaft.de



Irish Cancer Society: www.cancer.ie



The Israel Cancer Foundation: www.ilcf.org.il



ALCASE Italia: www.alcase.it

Cittadinanzattiva: www.cittadinanzattiva.it



Women Against Lung Cancer in Europe: www.womenagainstlungcancer.eu



Cancer Net Japan: www.cancernet.jp

West Japan Oncology Group (WJOG): www.wjog.jp



Respirando Con Valor A.C: www.respirandoconvalor.org



Longkanker Nederland: www.longkankernederland.nl



LungeKreft Foreningen: www.lungekreftforeningen.no



Esperantra: www.esperantra.org



Associação Portuguesa de Luta Contra o Cancro do Pulmão: www.pulmonale.pt



Equal Right to Life: www.ravnoepravo.ru

Movement Against Cancer: www.rakpobedim.ru



Slovenia-NAVDH (INSPIRE): www.na-vdih.si



Asociación Española De Afectados De Cancer De Pulmón: www.afectadoscancerdepulmon.com

La Asociación Española Contra el Cáncer: www.aecc.es



Lungcancerforeningen: www.lungcancerforeningen.se



Forum Lungenkrebs: www.facebook.com



Pembe Hanim: www.pembehanım.com.tr



British Lung Foundation: www.blf.org.uk

Lung Cancer Nursing UK: www.lcnuk.org

Roy Castle Lung Cancer Foundation: www.roycastle.org



CancerCare: www.cancercare.org

GO₂ Foundation for Lung Cancer: www.go2foundation.org

Lung Cancer Research Foundation: www.lungcancerresearchfoundation.org

Prevent Cancer Foundation: www.preventcancer.org

In 2019, the GLCC acknowledges the support of its sustaining partners: **AstraZeneca, Amgen, Boehringer Ingelheim, Bristol Myers Squibb, Eli Lilly, Merck, Novartis, Pfizer, Roche, Takeda.**

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GLOBAL LUNG CANCER
COALITION