

UNITY



The newsletter of the Global Lung Cancer Coalition

Summer 24

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WELCOME

In 2001, nine organisations with an interest in lung cancer came together and formed the Global Lung Cancer Coalition.

Today, the GLCC is comprised of 41 non-government patient organisations from around the world.

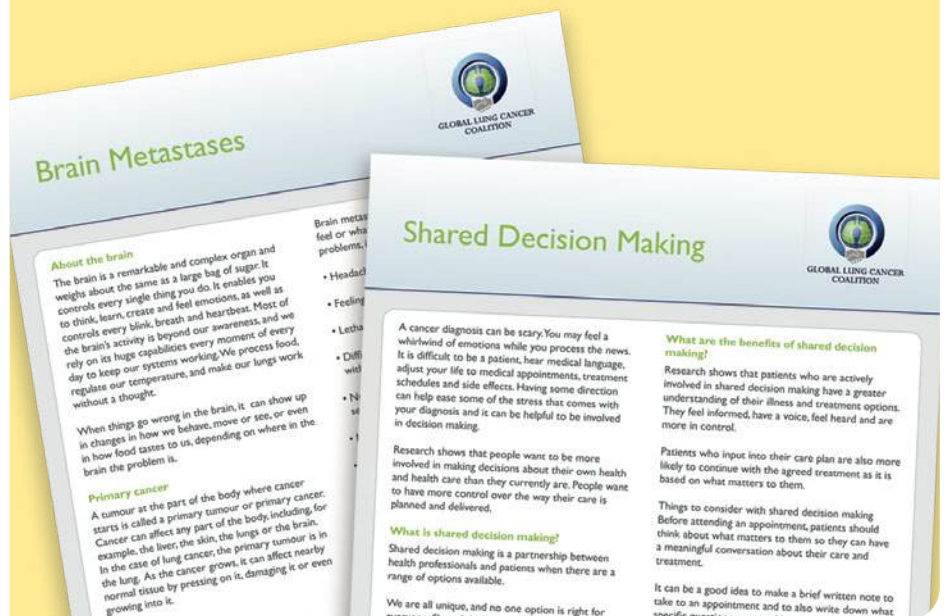
Our aim is to increase awareness of lung cancer issues, change perceptions of lung cancer, help people with lung cancer access the information and support they need, and push governments and legislative bodies to improve treatment and care.

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

GLCC LAUNCHES TWO NEW FACTSHEETS



The GLCC has added two new factsheets – *Shared decision making* and *Brain metastases* – to the resources section of our website.


The *Shared decision making* factsheet covers what shared decision making is and the benefits lung cancer patients may experience if they become more involved with decisions about their care.

The *Brain metastases* factsheet covers what brain metastases are, how doctors assess metastases, and possible next steps for people diagnosed with brain metastases.

As with all the GLCC's factsheets, a team of contributors from member organisations helped to develop the

two new factsheets. This work was overseen by members of the GLCC's Steering Committee.

The new factsheets are available in a downloadable PDF format and have been translated into 19 languages.

 Please click on the factsheet names to access the appropriate one for your country: **Shared decision making** and **Brain metastases**.

 Please click here to view all the GLCC's **factsheets**.

GOOGLE TRANSLATE

Articles marked **Google Translate** have been translated from a non-English news story. This means you may need to paste the story into Google Translate and select your appropriate language.

POSTER PRESENTED ON PATIENT EXPERIENCE SURVEY



Jackie Fenemore of Lung Cancer Nursing UK presents the patient experience survey poster.

Findings from the GLCC's 2023 global survey of patients' views on lung cancer screening and their treatment and care were presented in a poster at the British Thoracic Oncology Group conference in Belfast, Northern Ireland.

The poster provided an overview of the global survey, explained the methodology used to create it, and detailed findings produced by the survey.

This information was presented by Jackie Fenemore of Lung Cancer Nursing UK, who is a co-author of the poster, along with Aoife McNamara of the Irish Cancer Society and Elizabeth Beck of Incisive Health.

You can view an abstract of the poster in a special conference edition of [Lung Cancer online](#).



You can click here to view all the findings from the 2023 patient experience survey.

NEWS FROM THE LUNG CANCER POLICY NETWORK



**LUNG CANCER
POLICY NETWORK**

As a member of the Lung Cancer Policy Network, the GLCC is pleased to present the latest news from the organisation.

NEW SCREENING TOOLKIT RESOURCES

The Lung Cancer Policy Network has published new resources to build on its [Lung cancer screening implementation toolkit and implementation framework](#).

The first resource is a series of questions to help users of the toolkit and framework raise awareness of lung cancer screening with traditionally underserved communities. [Download this resource by clicking here](#).

The second resource is a toolkit summary guide to help people apply the framework to their regional context. [Download this resource by clicking here](#).

LEARNING FROM SCREENING PROGRAMMES

Eleanor Wheeler from the Lung Cancer Policy Network took part in a panel discussion about what imaging-based screening programmes can learn from each other.



[Please click here](#) to read a blog about some of the valuable insights that resulted from the discussion.

Lung Cancer Policy Network members Professor David Baldwin and Professor John Field have written an article that explores the key steps that led to the UK government implementing a national lung cancer screening programme for England.



[Please click here to read their article](#).



[You can also click here](#) and use the filter 'case studies' to read about other countries that have implemented low-dose CT screening programmes for lung cancer.

WEBINAR ON ACCESS TO EQUITABLE LUNG CANCER CARE

Eleanor Wheeler from the Lung Cancer Policy Network joined Jen Higgins, Guardant Health's Senior Vice President of Global Public Affairs, and Shirley Munoz, a lung cancer survivor, to discuss the importance of earlier detection for lung cancer and the barriers caused by stigma.



[Please click here to watch the discussion](#).



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NEW MEMBER FROM HUNGARY



The GLCC is delighted to welcome Lélek-Zet from Hungary as the newest member to our coalition.

Lélek-Zet, which means Spirit Association in English, provides comprehensive information which covers the entire patient journey.

This includes lung cancer risks and symptoms, the importance of screening, diagnostic procedures, and treatments and therapies.

The organisation is also very much focused on reducing the stigma that surrounds the perception of lung cancer.

In addition, Lélek-Zet leads on the Hungary Country Pilot, a multi-stakeholder initiative with the mission to improve awareness of biomarker testing among patients.



For further information, please click here to visit Lélek-Zet's website. [Google Translate](#)

You also learn more about the Hungary Country Pilot by clicking [here](#).

CANCERCARE CELEBRATES 80TH ANNIVERSARY

CancerCare of the US celebrated its 80th anniversary in May 2024.



Since its inception, the organisation has been at the forefront of offering comprehensive emotional and practical cancer support.

Throughout 2024, CancerCare will feature stories of resilience and hope from people it has supported, as well as offer advice on coping with the challenges of cancer from the organisation's oncology social workers.

These stories aim to shed light on the diverse needs of those living with cancer, caregivers and those who have lost a loved one to cancer.



To find out more, please visit cancercare.org/80

NEW RESOURCES FROM NORWAY



LUNG CANCER PATHWAY VIDEOS
Lungekreftforeningen of Norway has made a series of eight videos that give an overview of the steps and examinations involved in the pathway for a lung cancer patient.

The aim of the videos is to ensure patients and their relatives get a good insight into the pathway and feel more prepared for the future.



To watch the videos, please click here. [Google Translate](#)

PATIENT BOOKLETS TRANSLATED INTO ENGLISH



Lungekreftforeningen of Norway has translated the vast majority of its booklets for lung cancer patients into English.

The booklets offer comprehensive information about diagnosis, treatment and care, as well as practical tips on how to live with lung cancer.



Please click here to view the range of booklets and download them as PDFs. [Google Translate](#)

PUTTING GREENLAND AND THE FAROE ISLANDS ON THE LUNG CANCER WORLD MAP

From Patientforeningen Lungekræft of Denmark



Paamiut, Greenland.

Two years ago, we sat at the annual meeting of the Global Lung Cancer Coalition and discovered that Greenland and the Faroe Islands were not on the lung cancer world map at all.

When we got home, we continued working with the idea that something should be done about it. It has been a long process, but today we have a very good collaboration with two nurses from Rigshospitalet in Copenhagen, who each represent Greenland and the Faroe Islands.

In Greenland, since 2010, an average of 47 citizens have been diagnosed with lung cancer, while the figure for the Faroe Islands is 23 citizens.

It is not always easy to see a doctor in Greenland. Distances can be great, and access to a specialist in pulmonary medicine can be difficult. In addition, information campaigns about signs of cancer are perhaps less widespread than in, for example, Denmark.

When the suspicion of lung cancer arises in Greenland, the patient is sent for investigation in Denmark and then returns home until they get an answer. If they need surgery, they must return to Copenhagen. And if they have

radiotherapy afterwards, they stay in Copenhagen until it is finished. If they need chemotherapy, it takes place in Greenland.

In the Faroe Islands, in the same way as in Greenland, people are challenged by the fact that there are no resources and capacity to investigate and treat lung cancer in their home country.

Through close collaboration between the Pulmonary Medicine Department in Tórshavn, the capital of the Faroe Islands, and the investigating department in Denmark, the patient travels to Denmark to be investigated.

The patient then receives an answer to the investigation via the Pulmonary Medicine Department at the National Hospital in Tórshavn. Depending on the diagnosis and staging, the patient is then referred to treatment with chemotherapy via the National Hospital or surgery and radiation therapy at Rigshospitalet in Copenhagen.

In principle, patients from Greenland and the Faroe Islands are offered the same treatment as Danish patients.

But if the Danish department wishes to offer the patient experimental treatment that involves significant

additional costs, either because of very expensive medicine or because of multiple trips to and from treatment, the department must apply for a deposit from the Greenlandic and Faroese health services, which must pay for the treatment. If they do not want to give this deposit, there is basically nothing a patient can do.

As part of our objective to get Greenland and the Faroe Islands represented on the lung cancer world map, and ensure patients and relatives have access to quality information about lung cancer and the support our organisation offers, we've had our patient handbook translated and adapted into Greenlandic and Faroese, respectively.

The handbook can be read independently by a patient or their next of kin, but Danish nursing staff will also be able to communicate about the content, as each section in the book will appear in both Danish, Faroese and Greenlandic

In addition, in autumn 2024 or spring 2025, Patientforeningen Lungekræft will go to Greenland and the Faroe Islands to talk about lung cancer and how we can help patients and their families.

NUTRITION RESOURCES LAUNCHED IN SPAIN

AEACaP of Spain has launched a nutrition helpline for people affected by lung cancer and a series of videos about nutrition for patients, family members and care givers.

The NUTRICaP helpline is available every Thursday, from 12 to 2pm, and aims to answer questions about nutrition and provide reliable and accessible information.

The series of 12 videos has been developed with a dietitian and nutritionist and provides rigorous, science-based knowledge about nutrition and nutrients.



Please click here for more information about the nutrition helpline. Google Translate



Please click here to view all the nutrition videos that are currently available. More will be released throughout 2024. Google Translate



RAISING AWARENESS OF LUNG CANCER SCREENING IN MEXICO

Frente Unido por el Cáncer de Pulmón has co-launched a new campaign to increase awareness of Mexico's lung cancer screening programme for people over 50 who are heavy smokers.

Called Pulmón X Pulmón, the campaign features a short film (see below) and an online questionnaire to help people identify whether they are a suitable candidate for a low-dose CT scan.

Frente Unido por el Cáncer de Pulmón is particularly passionate about screening and early diagnosis because 95% of lung cancers in Mexico are diagnosed at an advanced stage.



Please click here to view the eligibility questionnaire. Google Translate

TALKING TO CINEMA AUDIENCES ABOUT EARLY DIAGNOSES

Respirando con Valor has co-produced a 60-second film to help increase early diagnoses of lung cancer in Mexico.



Designed for the cinema, the short film was shown in 2,110 movie theatres at 232 multiplexes in Mexico, between 18 July and 14 August 2024.

Specifically, the cineminuto social (one minute with information) film invites people to reflect on the importance of breathing, the sighs that accompany each moment of life, and that it's never too late to go to the doctor for an evaluation.

As a call to action, the film also encourages people over 50 who are heavy smokers to have a free low-dose CT scan of their lungs.

Partner organisations that helped to make the short film possible include fellow GLCC member Frente Unido por el Cáncer de Pulmón, Fundación Grupo México and Conciencia Cinemex.



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LUNG FOUNDATION AUSTRALIA PUSHES FOR VAPING LEGISLATION



In June, Lung Foundation Australia issued a joint statement with Cancer Council Australia and the Public Health Association of Australia that called on the Australian government to pass legislation to stop the selling of non-therapeutic vapes.

If passed, the legislation will put a firm end date on the manufacture, advertisement, commercial possession and widespread retail sale of any vape outside a pharmacy, essential progress towards driving down vaping rates across all age groups.

New modelling from Cancer Council Australia predicts an additional 1,185 teenagers aged 12 to 19 will take up vaping each week, unless the Australian government passes the critical legislation.

Mark Brooke, Chief Executive of Lung Foundation Australia, said, "Passing this legislation is vital for the lung health of Australians and will go a long way to make sure e-cigarettes are not easily accessible by young people and non-smokers, and that vaping is not normalised and considered socially acceptable."



Please click here for more information.



BREAKTHROUGH TOWARDS EARLY DETECTION PROGRAMME IN GERMANY

Deutsche Krebsgesellschaft of Germany has welcomed a new national initiative to use low-dose CT scans for the early detection of lung cancer in smokers and former smokers.

The organisation sees this as an important first step towards a structured national lung cancer early detection programme for all high-risk

people in Germany.

In Germany, around 57,000 people are newly diagnosed with lung cancer each year. In addition, around 45,000 people die each year because the disease is usually diagnosed at an advanced stage.



Please click here for more information. Google Translate

STRONGER LUNGS, HEALTHIER LIFE!

Over the past few months, FairLife Lung Cancer Care of Greece has continued its excellent work to raise awareness of lung cancer and reduce diagnoses of the illness.

Activities it organised and got involved in include:

HEALTHY LUNGS INFORMATION EVENTS

In April, 1,680 people attended an event in Thessaloniki in person or online; and in May, over 850 people attended an event in Larissa in person or online.

Topics covered include lung cancer screening, smoking cessation, and youth awareness of the impact of smoking and vaping.

FREE LUNG CANCER SCREENINGS

A total of 295 free low-dose CT screening examinations were offered in collaboration with scientific partners in Thessaloniki and Larissa.



PHYSICAL WELLBEING ACTIVITIES

FairLife supporters and staff members took part in the International Marathon Alexander the Great in Thessaloniki and a hiking activity in Mount Kissavos to promote physical activity for healthy lungs.

PSYCHOLOGICAL SUPPORT WEBINAR

On 3 July 2024, FairLife hosted a webinar that covered the impact of its BREATH psychosocial support programme over the past two years, the need for psychological support for lung cancer patients, and the social support and creative activities available to patients and caregivers.

The webinar was attended by over 1,190 people.

LUNG CANCER MEDIA ROUND-UP

THE BEST OF ASCO'S ANNUAL MEETING

The American Society of Clinical Oncology's (ASCO) annual meeting featured exciting news updates and advancements in lung cancer research and treatment.

To learn about some of the highlights from the event, please read the following organisations' summaries:



GO2 for Lung Cancer (US)
Lung Cancer Research Foundation (US)
Lungekreftforeningen (Norway)

FUNDING FOR LUNG CANCER VACCINE

Researchers at the University of Oxford, the Francis Crick Institute and University College London have been granted £1.7 million of funding to develop a lung cancer vaccine.

The team are seeking to create LungVax, the world's first vaccine to prevent lung cancer in people with a high risk of developing the disease.



Please click here for more information.

REPORT TO HELP IMPROVE LUNG CANCER CARE

The UK Lung Cancer Coalition has published a report to drive improvements in lung cancer care.

Titled *Driving improvements in UK lung cancer – Utilising good practice and innovation to deliver optimal care and outcomes*, the report aims to help people who provide lung cancer care to assess their own service and benchmark against innovative work going on in different parts of the UK.



Please click here to download the report.

VIRTUAL BIOPSY FOR LUNG CANCER

Researchers from Imperial College London have used artificial intelligence to extract information about the chemical makeup of lung tumours from medical scans.

For the first time, they have demonstrated how combining medical imaging with AI can be used to provide a non-invasive 'virtual biopsy' for cancer patients.



Please click here for more information.

LARGE STUDY REVEALS IMPACT OF IMMUNOTHERAPY

The largest population-based study to date concludes that the introduction of immunotherapy as a standard treatment has helped many more people survive metastatic non-small cell lung cancer.

Involving the analysis of cancer data for approximately 48% of the US population, the study found that the five-year survival rate for people treated with immunotherapy between 2015–20 was 10.7%, compared to 6.8% for people who were treated between 2010–14, in the pre-immunotherapy era.



Please click here for more information.

SMALL PARTICLES TRIGGER LUNG CANCER

Results from a French study (KPB-2020–CPHG) have confirmed findings on the link between air pollution with small PM2.5 particles and the risk of developing EGFR-positive lung cancer.

Residents living in areas with air pollution are at a 50% increased risk of this form of lung cancer, and the level of risk from fine particulate air pollution is comparable to that associated with passive smoking.



Please click here for more information.

SMARTPHONE V WRITTEN MATERIAL

A new study has investigated whether a smartphone application would be more effective than written material for smoking cessation and reduction in smoking in individuals undergoing low-dose computed tomography screening for lung cancer.

Between 18 November 2022 and 14 April 2023, 201 patients were screened at Oulu University Hospital, Finland, of whom all were randomly assigned to smartphone application or written cessation material.

Results from the study showed that the developed smartphone app increased the likelihood for smoking cessation in individuals undergoing lung cancer LDCT screening.



Please click here for more information.

Answering our questions in this edition of *Unity* is Paula Chadwick, Chief Executive of the UK's Roy Castle Lung Cancer Foundation.

LET'S TALK PAULA CHADWICK

How many people are affected by lung cancer in the UK?

Over 49,000 people are diagnosed with lung cancer each year in the UK. Around 48% are women, 52% are men, and 45% of all new lung cancer cases are diagnosed in people aged 75 and over.

In your opinion, do people with lung cancer receive the support and care they need in the UK?

The majority of patients face lengthy delays to lung cancer diagnostic testing, and in some cases they are not tested at all. This can have a big impact on their standard of care, both physically and mentally. And it can lead to some patients being denied access to the most appropriate treatment.

Outside of the UK's National Health Service (NHS), there are a lot of organisations and support available to people with lung cancer, including support groups for specific types of lung cancers. However, awareness of them can be low. Lung cancer remains a highly stigmatised disease. This can cause people to be less sympathetic to people with lung cancer than those with other types of cancer.

In my opinion, not all people receive adequate mental health support. Dealing with a lung cancer diagnosis can be as much mental as it is physical, especially for those facing a terminal diagnosis.

There is an unprecedented demand for mental health support in the UK. According to Miriam Deakin, Director of Policy and Strategy, NHS Providers, more than 1.8 million people are on the waiting list for mental health services.

What needs to change for people with lung cancer and their families to get the support they need?

We need to ensure all patients have access to a lung cancer nurse specialist.

We need to make sure all patients are diagnosed and start treatment in line with the UK's National Optimal Lung Cancer Pathway, including the undertaking of genetic testing.

As well as support with their physical health, people affected by lung cancer need emotional support and access to mental health care. Waiting times for this on

the NHS can vary significantly. We know some patients have died before they were able to access the support they needed.

What do you think could be the biggest breakthrough to help people with lung cancer?

Lung cancer screening is the current biggest breakthrough in helping people with lung cancer. It is key to diagnosing the disease at the earliest stages, when curative treatment is possible.

We are already seeing a dramatic increase in early detection rates through the targeted lung health check programmes in the UK, with approximately 75% diagnosed at stages 1 and 2.

Outside of screening, around 75% of people are diagnosed at late stage, so screening is literally turning figures on their head.

However, screening is currently only available to those with a smoking history. We need more research to understand why people who don't smoke get lung cancer to identify further risk factors, as well as better and less invasive diagnostic techniques, such as blood tests.

What care, support and services does the Roy Castle Lung Cancer Foundation provide?

We offer practical and emotional support to people affected by lung cancer. Our services include an Ask the Nurse helpline, online, telephone and face-to-face support sessions, information days and high-quality literature for patients and their families.

How does the support of the Roy Castle Lung Cancer Foundation make a difference to the lives of people affected by lung cancer?

A patient recently said, "My life, and the life of everybody with lung cancer, is made better by the Roy Castle Lung Cancer Foundation. This charity guides you through the worst moment of your life and stays with you as long as you need them."

We recognise that everyone needs support in different ways. We treat everyone as an individual and tailor our care to their needs.

Our determination to improve early detection of lung cancer over 30 years ago has paved the way for lung cancer screening, giving more people the chance to have their lung cancer caught early and treated.

We campaign for better access to life-lengthening treatments, acting as the patient voice and representative. We also give people affected by lung cancer a platform to share their experiences and benefit from a cathartic outlet.

Our innovative awareness campaigns continue to push boundaries, challenge misconceptions, humanise the disease and present lung cancer in a more engaging way, which helps to improve understanding of the disease and its symptoms.

What are the Roy Castle Lung Cancer Foundation's main plans for future?

Over the next five years, we aim to:

- Drive further uptake of lung cancer screening.
- Improve early detection within symptomatic patients.
- Ensure diagnostic testing is carried out and results received within 14 days for all UK patients.
- Expand our patient and carer services to include psychosocial support.
- Represent and support people affected by lung cancer, and campaign for key policy changes and initiatives which improve the diagnosis and treatment of all forms of the disease.

How long has the Roy Castle Lung Cancer Foundation been a member of the GLCC?

We were one of the nine organisations that came together in 2001 and formed the GLCC.

How can members of the GLCC benefit from each other?

I think members can greatly benefit from each other by sharing best practice and experiences, supporting each other to help improve outcomes for the people they support, and discussing new initiatives and treatments.

How has the Roy Castle Lung Cancer Foundation benefited from being a member of the GLCC?

One of the ways is through the e-atlas map. It's very informative and a tool that we use regularly. The ability to compare how we are doing as a country against other members is beneficial and supports our campaigning for better treatment for UK lung cancer patients.

What message would you like to send to your fellow GLCC members?

Together we are stronger.

You can learn more about the work of the Roy Castle Lung Cancer Foundation at roycastle.org





We're sure your organisation does lots of incredible work that should get noticed. But sometimes that can be difficult if you don't get the media coverage you want.

In this feature article, we provide top tips on how to improve your press releases to help get your activities noticed and land the media coverage you deserve.

What the media want

Great stories – the media is always looking for stories to capture their audience's attention. Do you have a surprising, shocking or inspirational story?

Can you offer 'human interest' by including personal stories that relate to the topic you're covering?

Relevance to the news agenda – news stories that are timely and up-to-the-minute are likely to get more coverage.

Can you link your story to a current issue in the news? Or is there a link to a calendar date such as Christmas or Father's Day?

Quick turnaround – journalists are constantly under pressure to meet deadlines.

By making their life easier, your story is more likely to get featured. Get back to journalists quickly and provide extra content such as photos and people to interview so they can create a rich story.

Crafting your press release

General

- Write your press release as a news story in the style of the media you want to cover your story.
- Keep the media's audience in mind. What will interest and persuade them?
- Keep your paragraphs short, ideally, no more than five lines each.
- Use simple, everyday language. Avoid jargon and complicated words.
- Provide facts, not opinion. Don't say it's an amazing project. Provide facts that show this.
- Offer journalists extra content such as photos, videos and interviews.
- Paste your press release into the body of your email, rather than sending it as an attachment. Attachments may get filtered out of a recipient's inbox.

Specifics

Label – clearly label your press release with the words 'press release' and the date you are publishing it.

Headline – summarise your story in one sentence. A clear description is the most important, but also try to create a headline that sounds interesting or intriguing.

First paragraph – tell the main facts of the story: who, what, why, where, when and how. Also, make sure you mention why your story is newsworthy. For example, it relates to new research published today, or an event that's happening in the next few days.

Second and third paragraphs – provide further information about your story, including facts and figures.

Comments – provide a view from a spokesperson, such as a senior leader or project manager from your organisation. Also, try to feature a comment from an external person, such as a service user, medical professional, or member of a partner organisation.

Closing paragraph – talk about what may happen next and include a call to action, if relevant. Don't forget to include contact details such as your web address and social media handles, as well as hashtags (#) you're using on social media platforms.

Ends – write 'ends' in bold to clearly show the end of the content for publication.

Notes to editors – include a notes section with bullet points that provide background information for journalists, such as information about photos, links to external sources, a brief biography of your spokesperson.

Contact for more information – include a phone number and email address for journalists. This is usually the first bullet point in the Notes to editors section.

Boilerplate copy – include a short summary that explains who your organisation is and its history.

Finding journalists

It can take a lot of time to find the right journalists to pitch your press release to. But this task is necessary to make sure you get the coverage you want.

Keep in mind that journalists often change organisations and roles, so double check contact details before emailing



them, and don't be disheartened if you get a bounce back.

You may be able to use online tools to streamline the process, such as RocketReach and Any Mail Finder. But these are subscription services.

When searching, focus on identifying journalists who specialise in topics that are relevant to your charity's work or the project you want to talk about.

You can also use X (Twitter) as a tool to find journalists. Simply search the handle of a publication in X, then click on 'People' in the results. Many journalists tag the publication they work for in their bio.

Emailing your press release

Keep your email subject lines short and snappy – ideally under 40 characters.

Avoid generic email openers where possible, and tailor your message to each recipient.

Personalise your emails by addressing journalists by their name and mention the publication they write for.

If you already have a relationship with a journalist, mention it in your email.

Include imagery

Quality images can significantly enhance your press release. Include hyperlinks to high-resolution image files that a journalist can easily download.

Platforms like WeTransfer and Dropbox are great for sharing large image files.

Make sure your images are of the highest quality – ideally with a resolution of 300DPI, so they don't appear pixelated or blurry when printed.

Remember to credit photographers and ensure compliance with relevant copyright laws.

Typically, images created by your volunteers must be signed over to you, even if they used your equipment to take the photo, and they were set the task in their volunteering role.

Follow up email

If you don't receive a response to your press release, send a polite follow-up email after a reasonable amount of time. Use the 'reply all' function to create a thread and ease of reference.

However, avoid excessive follow-ups, unless absolutely necessary. And respect a journalist's preferences for communication, whether it's email or phone.

If your press release is published but contains errors, promptly inform the journalist so they can make corrections.



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.oncobg.info



Canadian Lung Association: www.lung.ca

Lung Cancer Canada: www.lungcancercanada.ca

The Lung Health Foundation: www.lunghealth.ca



OnkoMaják www.onkomajak.cz



Patientforeningen Lungekræft: www.lungekraeft.dk



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



Deutsche Krebsgesellschaft E.V: www.krebsgesellschaft.de



FairLife Lung Cancer Care fairlifelcc.com



Irish Cancer Society: www.cancer.ie



Lélek-Zet: lelekzetegyeshulet.hu



The Israeli Lung Cancer Foundation: www.ilcf.org.il



ALCASE Italia: www.alcase.eu

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



Frente Unido por el Cáncer de Pulmón: frentepulmon.org

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



Na-Vdih (Inspire): www.na-vdih.si



Campaigning for Cancer campaign4cancer.co.za/wp



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



Formosa Cancer Foundation canceraway.org.tw



Pembe Hanim: www.pembehanım.com.tr



Asthma + Lung UK: www.asthmaandlung.org.uk

Lung Cancer Nursing UK: www.lcnuk.org

Roy Castle Lung Cancer Foundation: www.roycastle.org



CancerCare: www.cancercare.org

GO2 for Lung Cancer: www.go2.org

Lung Cancer Research Foundation: www.lungcancerresearchfoundation.org

Prevent Cancer Foundation: www.preventcancer.org

In 2024, the GLCC acknowledges the support of its sustaining partners:

Amgen, AstraZeneca, Boehringer Ingelheim, Bristol Myers Squibb, Daiichi Sankyo, Eli Lilly, Gilead, Merck, Novartis, Novocure, Pfizer, Regeneron, Roche, Sanofi and Takeda.

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COALITION

