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“Without a shift in our policies, current estimates anticipate a major increase in cancer mortality globally, and particularly in resource-restricted settings. Effective cancer control must include raising awareness of the causes of cancer, effective prevention strategies for those identified causes, as well as early detection, coupled with access to effective treatments and palliative care.

Ensuring access to timely and appropriate cancer treatment includes access to antimicrobials to address infections. Especially as cancer patients are at a higher risk of infections due to the lowering of immune responses; for example, due to certain blood cancers and/or resulting from their treatment, such as chemotherapy. Thus, infections in cancer patients are a common occurrence, often resulting in multiple treatments with antibiotics, often also to the development of antimicrobial resistance (AMR).

When looking at resource-restricted settings, it becomes clear that in such contexts, cancer patients are suffering from a double bottleneck in terms of timely diagnoses, both for the cancer types as well as for microbial pathogens. Unfortunately, there is a great paucity of data, as clinical microbiology laboratories might exist in isolated pockets of excellence or be altogether absent – and at different localities to cancer centres. Therefore, while there is a wide consensus, as led by the UICC and the Wellcome Trust, that increasing AMR poses a threat to the improvement of cancer patient outcomes, the evidence tends to be weak. IARC, through the BCNet (<https://bcnet.iarc.fr/>), is promoting the education and standardization of laboratory and biobanking practices in resource-restricted settings, skills that are directly relevant to clinical laboratory activities of any scale, such as distal clinical microbiology units enabled via the Minilab (<https://fondation.msf.fr/en/projects/mini-lab>), or through greater collaborations of existing vertical surveillance structures.”

*Dr Zisis Kozlakidis is the Head of Laboratory Services and Biobanking at the International Agency for Research on Cancer, World Health Organization (IARC/WHO). He is responsible for one of the largest and most varied international collections of clinical samples in the world, focusing on gene-environment interactions and disease-based collections. This WHO infrastructure supports multinational efforts in making treatments possible and delivering these to resource-restricted settings. Dr Kozlakidis has significant expertise in the field of biobanking and has served as President of ISBER, and as board member.*