Closing the cancer diagnosis gap

Strengthening access and capacity for better cancer care



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A participant discussion summary

Convened by Sakura Finetek Europe with the World Health Summit

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The central message

Earlier, accurate cancer diagnosis is essential to improving survival. Yet in many settings, people enter care too late, diagnostic pathways are fragmented, and health systems lack the foundations needed to deliver reliable results. The discussion called for practical investment in diagnostic capacity—alongside inclusive innovation—so that more patients can move from symptoms to diagnosis and treatment without avoidable delay.









Five messages from the dialogue

01

Diagnose earlier, act sooner

Late presentation and delayed confirmation narrow treatment options and contribute to preventable deaths. Early diagnosis depends not only on awareness, but also on accessible testing, clear referrals and timely treatment.

02

Start with the fundamentals

Participants emphasised pre-analytics: safe sample collection, transport, identification and handling; robust protocols; laboratory quality standards; and trained personnel. New technologies cannot compensate for unreliable foundations.

03

Understand the burden

Weak cancer registries and limited epidemiological data make it harder for ministries to identify priorities, allocate resources and develop effective national cancer strategies.

04

Design care around the patient

Patients may be lost between screening, biopsy, pathology reporting and treatment. Better-connected services, affordable access and transparent pathways are as important as equipment.

05

Build capacity through partnership

Governments, clinicians, civil society, academia and industry each have a role in infrastructure, workforce development, quality improvement and sustainable access.

From urgency to practical action



A crisis of late diagnosis

A parallel was drawn during the discussion between today's cancer challenge in some African settings and the HIV/AIDS crisis of the 1980s: too many people present late and die prematurely, while systems struggle to respond at scale. South Africa was raised as an example of the serious cancer burden and the consequences of delayed diagnosis. The comparison underlined the urgency of building cancer-care capacity, while recognising that the diseases and their responses differ.

The importance of better data

Participants noted that cancer burden is still insufficiently understood in some settings. Without dependable cancer registries and local epidemiological evidence, national strategies risk missing the populations, tumour types and diagnostic bottlenecks that need the most attention. Better data can support planning, financing, service design and accountability.

Cities as places to learn and improve

Cities can provide a practical scale for bringing hospitals, laboratories, policymakers and communities together. Locally led improvements can test referral pathways, diagnostic coordination and quality standards, generating evidence that may inform wider national approaches. The discussion highlighted the value of adapting solutions to local realities rather than assuming one model will work everywhere.

Inclusive innovation means investing in the basics

Innovation was framed broadly—not simply as AI or advanced equipment, but also as more reliable specimen handling, clear guidelines, standard operating procedures, infrastructure, maintenance, and staff development. Appropriate technology becomes more valuable when these foundations are in place and patients can benefit from it.

Figures raised during the discussion

The scale of the diagnostic gap is reflected in published research. A 2026 study in The Lancet Oncology projected that approximately 67% of people developing cancer in western Africa could die without a diagnosis by 2050.[1] Separately, the 2021 Lancet Commission on Diagnostics estimated that 47% of the world's population had little or no access to basic diagnostics.[2] Although these figures describe different aspects of the challenge, both underline the need to strengthen diagnostic capacity and access to care.

Sources: 1. The Lancet Oncology (2026). "Estimating total and diagnosed global cancer incidence and stage distribution from 1990 to 2050: a simulation-based analysis of 17 cancers." DOI: 10.1016/S1470-2045(26)00060-4. https://www.sciencedirect.com/science/article/pii/S1470204526000604; **2.** Fleming et al. The Lancet (2021). "The Lancet Commission on diagnostics: transforming access to diagnostics." DOI: 10.1016/S0140-6736(21)00673-5. https://pmc.ncbi.nlm.nih.gov/articles/PMC8494468/

What could make a difference?

The conversation pointed to several practical priorities for policymakers, healthcare providers and partners:

Strengthen the diagnostic foundation

Invest in pathology and laboratory infrastructure, sample referral, pre-analytical quality, standards, protocols, maintenance and workforce capability.

Connect diagnosis to care

Improve coordination across primary care, imaging, pathology and treatment, with clearer patient navigation and faster communication of results.

Make data useful for decisions

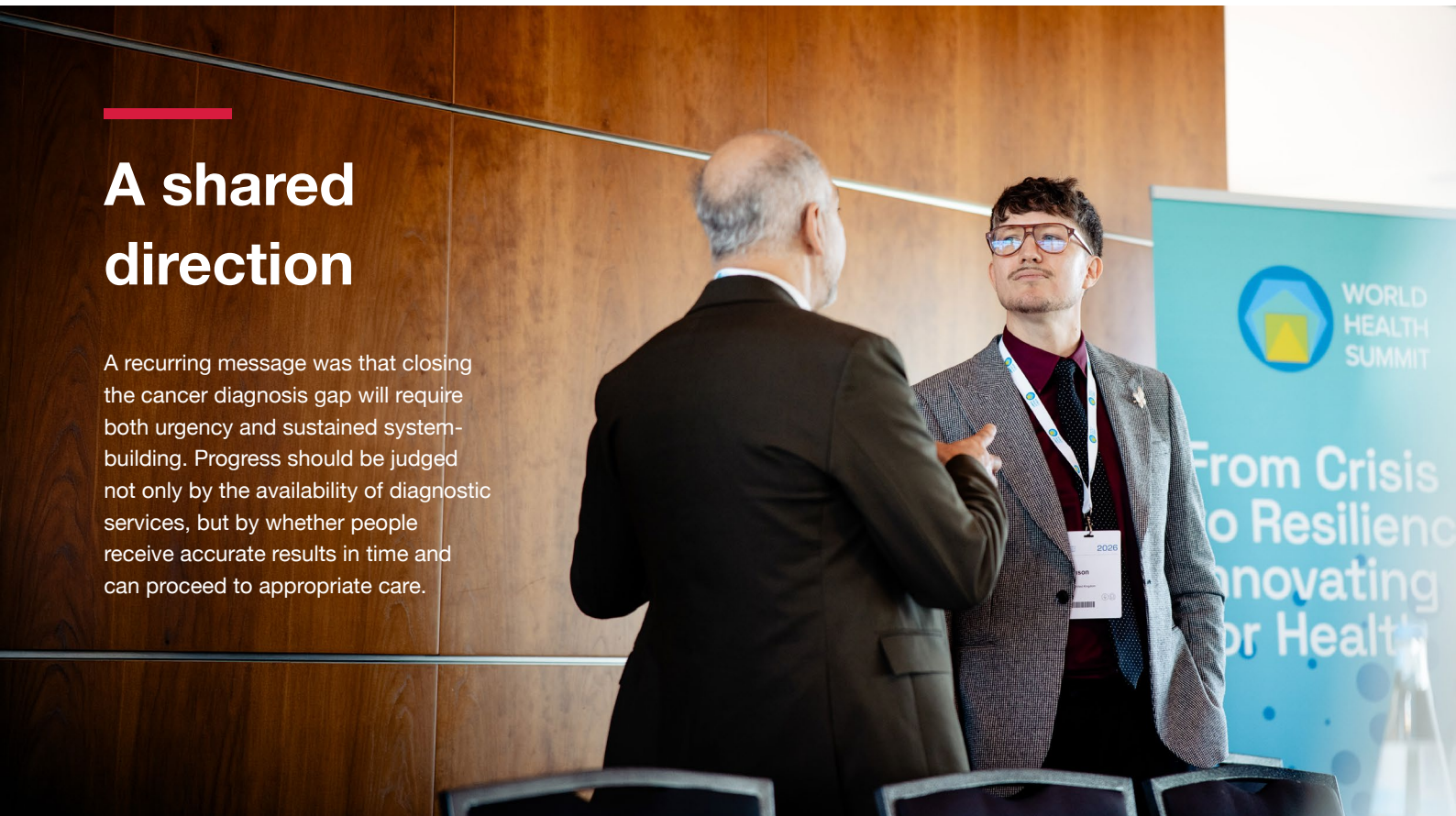
Improve cancer registration and local disease intelligence to guide national cancer strategies, resource allocation and evaluation.

Learn locally, scale responsibly

Use city-level and institutional collaboration to identify workable approaches, assess outcomes and adapt lessons to other settings.

Make access sustainable and equitable

Consider affordability, procurement, training and long-term service delivery together—not as separate concerns.



A shared direction

A recurring message was that closing the cancer diagnosis gap will require both urgency and sustained system-building. Progress should be judged not only by the availability of diagnostic services, but by whether people receive accurate results in time and can proceed to appropriate care.

Thank you.

Sakura Finetek Europe and the World Health Summit thank all participants for contributing their perspectives and experience to this closed-door dialogue. We hope these reflections support continued exchange and practical collaboration to strengthen cancer diagnostic capacity and equitable access to care.

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This summary presents themes and ideas without identifying speakers or attributing remarks to individuals or their organisations. It is not a verbatim transcript and does not imply consensus or endorsement by all participants.

Sakura Finetek is committed to advancing cancer diagnostics by empowering pathology professionals to deliver accurate, timely diagnoses and support better treatment outcomes. With a Japanese heritage dating back to 1887, Sakura combines innovation, automation and specialist expertise to strengthen anatomic pathology and improve patient care.

Globally headquartered in Japan, Sakura has its Europe, Middle East and Africa regional headquarters in the Netherlands, supporting pathology professionals in more than 140 countries.

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The World Health Summit 2026, held under the theme "From Crisis to Resilience: Innovating for Health", took place from 11–13 October 2026, in Berlin, Germany, and online. As the leading platform for global health, the World Health Summit convened leaders from politics, science, civil society, and the private sector from around the world to catalyse collaborative and innovative solutions for key global health priorities.

This year's Summit fostered cross-sectoral exchange, evidence-based dialogue, and impactful partnerships to explore how to turn innovation into more equitable, resilient, and future-ready health systems.

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