Advanced Breast Cancer Global Charter 2.0 2025–2035

Knowledge in Motion
A Decade Reviewed, a Future Defined

ABC GlobAlliance

CONTENTS

INTRODUCTION

Who is the ABC Global Alliance?

The Advanced Breast Cancer (ABC) Global Alliance is an independent non-profit global federation, registered in Portugal, originally established as an initiative of the European School of Oncology (ESO) in 2016. The ABC Global Alliance unites over 300 organizations across more than 120 countries with the mission to improve and extend the lives of women and men living with ABC in all countries worldwide and to fight for a cure.

What do we do?

UNITE KEY STAKEHOLDERS IN ABC CARE

DEVELOP AND ASSIST IN THE IMPLEMENTATION OF THE ABC INTERNATIONAL CONSENSUS GUIDELINES

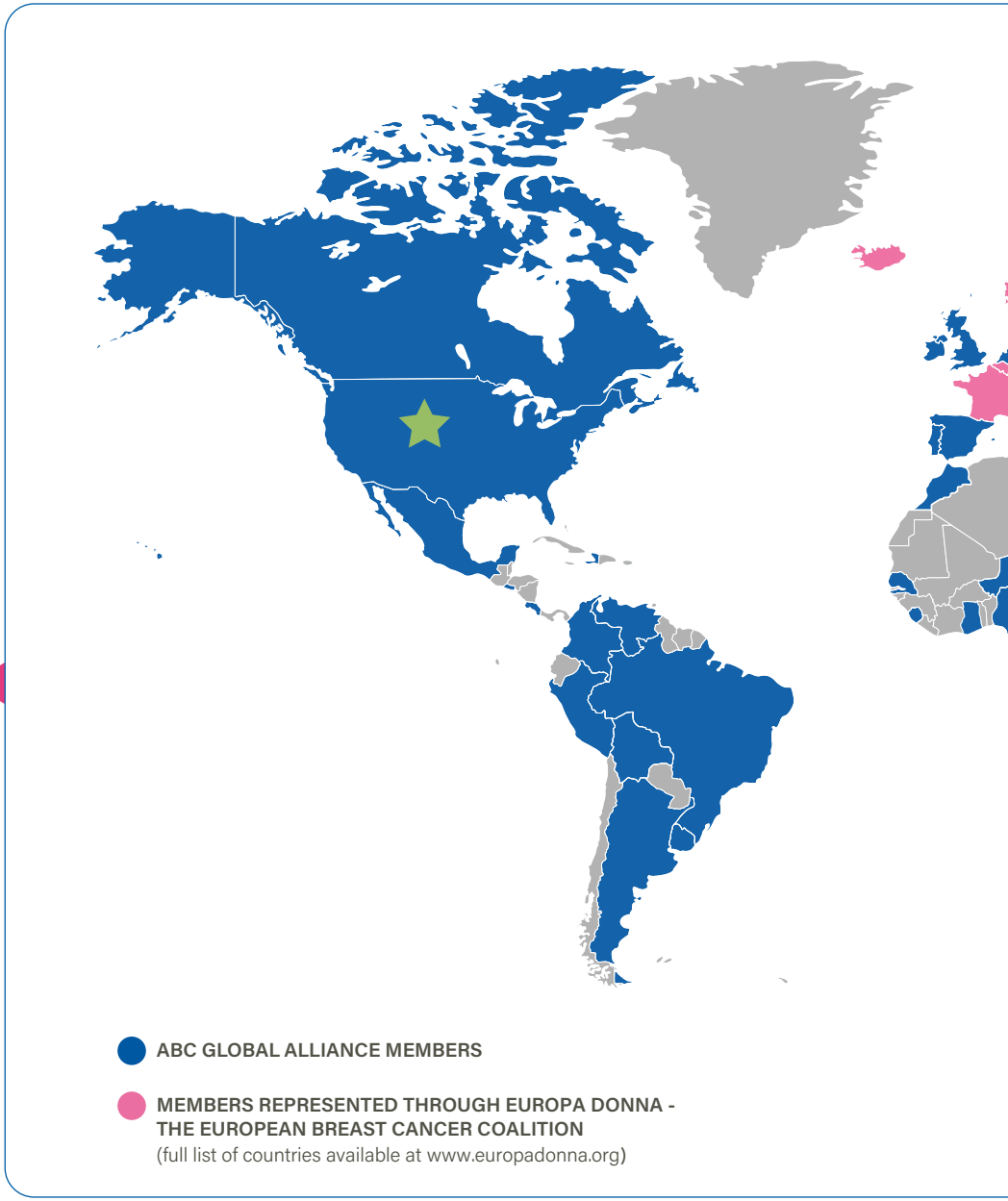
TACKLE REAL-WORLD CHALLENGES IN ABC

CO-CREATE AND SHARE PRACTICAL, REAL-WORLD SOLUTIONS

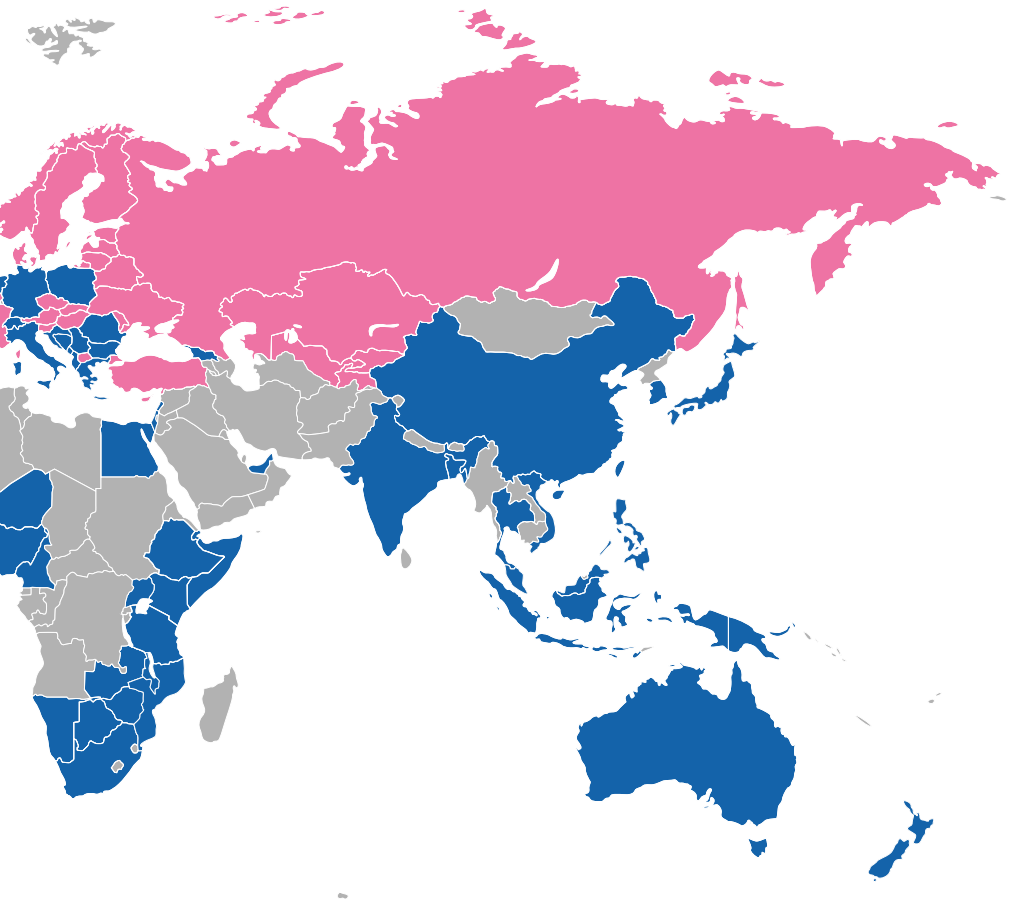
AMPLIFY AND ELEVATE PATIENT VOICES

DRIVE MEANINGFUL, GLOBAL PROGRESS FOR THE FUTURE OF ABC CARE

ABC GLOBAL ALLIANCE MEMBERS



The ABC Global Alliance unites over **300 organizations** across more than 120 countries as of November 2025.



MBC ALLIANCE REPRESENTS ALL ITS MEMBERS IN THE ABC GLOBAL ALLIANCE
(full list of members available at www.mbcalliance.org)

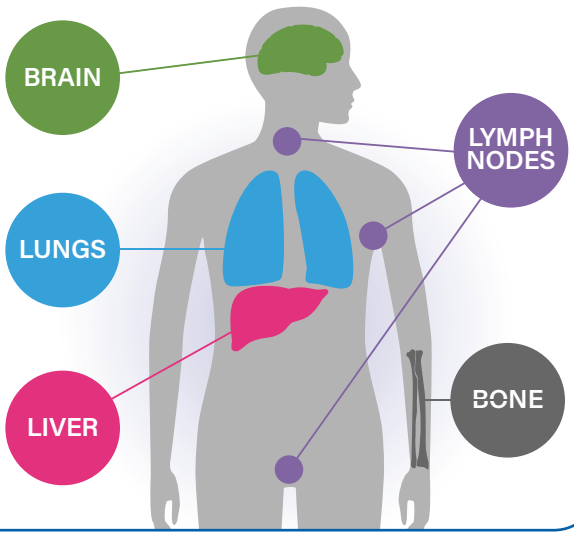
For an updated list of members please visit the ABC Global Alliance website:
(www.abcglobalalliance.org)

WHAT IS ABC?

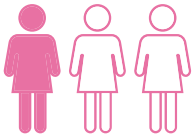
Breast cancer is the most commonly diagnosed cancer in women worldwide, with **2.3M** cases and **670K** deaths annually (2022 data)[1]

- It's not just a women's disease – 1% of cases occur in men[2]
- ABC includes two clinical situations: inoperable locally advanced breast cancer (LABC) and metastatic breast cancer (MBC). MBC is also known as stage IV or secondary breast cancer. For the purposes of this document, we use the term advanced breast cancer or the abbreviation ABC

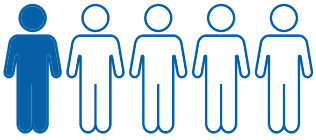
Breast cancer that has spread to other parts of the body, such as the bones, lungs, liver, lymph nodes, and brain, is called **advanced breast cancer**



ABC is the leading cause of breast cancer deaths



While nearly all women survive 5 years after early diagnosis, only **1 in 3** with ABC do[3]



Men fare even worse – just **1 in 5** survive 5 years after an ABC diagnosis[3]

Inequality matters.
Outcomes are worse for those living in low-middle income countries[4]

For more information on ABC, please visit the ABC Global Alliance website: (www.abcglobalalliance.org)

THE ABC GLOBAL CHARTER

History of the ABC Global Charter

The first ABC Global Charter (2015–2025) was created following the launch of 'The Global Status of Advanced/Metastatic Breast Cancer (ABC/MBC) Decade Report (2005–2015)', a 10-year review of the global ABC landscape that highlighted gaps in care, data, and support for people living with ABC.[5]

The charter outlined a set of 10 ambitious, actionable goals aimed at transforming the landscape of ABC care from 2015–2025.[6] These goals addressed various unmet needs—from improving access to treatment, to ensuring that the voices of people living with ABC were heard and integrated into care decisions—with the aim to unite the global ABC community to catalyze change.

Why update the ABC Global Charter?

As the decade draws to a close, the ABC Global Alliance has critically assessed the reality facing people with ABC in 2025 in the Global Decade Report 2.0 (2015–2025). The conclusion? Progress has been meaningful, but uneven. While some patients now live longer and better, many still lack access to basic diagnostics, treatment, coordinated care, and workplace protections. These gaps are even more pronounced in low- and middle-income countries.

The world has changed, with new scientific insights, technologies, and shifting societal attitudes transforming the healthcare landscape. Inequities have become impossible to ignore. We have demonstrated that progress is possible, but a new decade demands a new vision. This updated charter offers a renewed commitment: to drive meaningful, measurable progress for every person, in every country, living with ABC, for the decade 2025–2035.

This is not just a continuation of the past, it is a call to action for the future.

10 GOALS for change (

1 Further improve **SURVIVAL** in people with ABC by doubling median overall survival

- Improve median overall survival across all ABC subtypes, particularly for those with a poorer prognosis, by leveraging emerging biomarkers and driving research to better understand disease recurrence and progression
- Reduce survival disparities across geographies, ethnicities, and socioeconomic groups by expanding access to diagnostics, treatments, and clinical trials, and using resource-stratified guidelines, where appropriate
- Generate and standardize high-quality real-world evidence to support accurate assessment of global survival rates and data-driven decision-making in ABC
- For some subtypes, move towards considering ABC as a chronic condition where people live longer, fuller lives, enabling continued contribution to their families, communities, and economies

Optimize care and outcomes for people with ABC by collecting **HIGH-QUALITY DATA** 2

- Ensure that every person living with ABC is recognized and recorded globally by 2035
- Define and implement worldwide minimum standards for ABC data capture, ensuring that all cancer registries include 'stage at diagnosis' as a fundamental data input
- Advocate for data privacy law waivers to enable accurate and ethical linkage of patient information across databases, to allow for better notification and collection of relapse data

(2025–2035)

3 Improve the **QUALITY OF LIFE** of people with ABC

- Develop and integrate ABC-specific quality of life assessment tools into clinical trials and routine practice to guide decision-making
- Establish a triage tool to overcome systematic barriers to quality of life assessment in clinical practice
- Improve how patient reported outcome measures (PROMs) are systemically collected, analyzed, and reported to allow for meaningful change in clinical practice
- Optimize treatment strategies to improve quality of life while maintaining or improving efficacy
- Deliver patient-centered care across the ABC pathway, from diagnosis of metastasis until end of life, to meaningfully improve quality of life

Ensure that every person with ABC is treated and cared for by a specialized **MULTIDISCIPLINARY** team according to high-quality **GUIDELINES** 4

- Advocate for all people with ABC to be managed by a specialized breast cancer team, in line with international standards like EUSOMA*
- Ensure ABC multidisciplinary teams have the necessary resources and support to function effectively
- Promote adoption of evidence-based, resource-stratified guidelines tailored to local resources and healthcare needs
- Ensure continuity and evolution of multidisciplinary care across the ABC care pathway, including early integrated palliative care
- Develop quality assurance measures that audit and measure utilization and application of multidisciplinary teams specifically for patients with ABC

*EUSOMA (the European Society of Breast Cancer Specialists) is a multidisciplinary professional organization that aims to improve the standards of breast cancer care in Europe

5 Improve **COMMUNICATION** between healthcare professionals and people with ABC and their caregivers

- Integrate continuous, accredited, evidence-based communication skills training specific to advanced cancers into oncology curricula
- Embed the ABC patient voice into communication skills training materials to ensure it aligns with their unique needs
- Increase healthcare professional use of shared decision-making resources across the ABC treatment pathway, including early and ongoing end-of-life discussions, to ensure alignment to patient preferences
- Support people with ABC and informal caregivers in expression of their goals, fears, and preferences

Meet the **INFORMATIONAL** needs of all people with ABC 6

- Enhance access to reliable information for people with ABC, by making trusted, endorsed content more visible, helping people distinguish credible guidance from misinformation
- Improve dissemination of information across the entire ABC disease continuum, ensuring people receive the right information at the right time
- Evolve, adapt, and translate existing ABC resources to increase equitable access for people with ABC regardless of geography or circumstances

7 Ensure all people with ABC have access to comprehensive, person-centered **SUPPORT SERVICES**

Support services include psychological support, social and peer support, complementary and integrative therapies, wellness and lifestyle support, genetic counselling, survivorship programs, and palliative and end-of-life care. They can be integrated into the prevention and management of cancer and its treatment across the continuum of the ABC journey from diagnosis, through treatment, to post-treatment care.[7]

- Ensure support services are both available and accessible to all people with ABC by establishing policy guidelines, securing sustainable funding, and addressing geographic and resource barriers
- Ensure all people with ABC are informed of and referred to appropriate support services by their healthcare professionals, supported by clear communication and integrated care pathways
- Expand the reach of support services with a focus on equitable access for underserved populations
- Promote the establishment of ABC patient advocacy groups in countries where they do not yet exist and improve patient referral pathways through enhanced patient advocacy group–healthcare professional trust and collaboration

8 Reduce **MISCONCEPTIONS, STIGMA**, and **ISOLATION** by improving understanding of ABC

- Improve understanding of ABC across all stakeholder groups by addressing misinformation and harmful stereotypes through targeted education and consistent, unbiased language
- Expand the reach and impact of awareness campaigns by embedding inclusive, locally relevant, and culturally sensitive approaches that resonate with diverse communities
- Influence policymaker perception and behavior through sustained advocacy that champions patient rights and ensures access to essential treatments, services, and opportunities for people with ABC

9 Improve **ACCESS** to comprehensive **CARE** for people with ABC, regardless of their ability to pay

- Work with policymakers to ensure universal coverage and access for ABC diagnostics and treatments under public health systems
- Ensure access to high-quality pathology evaluation of the tumor biology, and effective imaging is available to and covered for all patients with ABC
- Improve continuous financial support for people with ABC by expanding financial assistance programs and navigation, and increasing awareness of financial rights and available services
- Improve access to diagnostics, treatments, and clinical trials by removing additional financial barriers, particularly across diverse ethnic, geographical, and socioeconomic groups
- Fight growing inequalities in access to ABC care by focusing on the needs of underserved groups, between and within countries

Improve the **LEGAL RIGHTS** of people with ABC, including the right to continue or return to **WORK** 10

- Advocating for improved laws and policies providing social and financial protections for people with ABC and their informal caregivers, for example, through recognition of advanced cancers (including ABC) as a disability without reinforcing stigma
- Empowering people with ABC, their informal caregivers, and healthcare professionals with clear, accessible information about legal rights and obligations
- Ensuring that supportive, flexible return-to-work entitlements and programs are available for people with ABC, enabling them to return to work, if they wish to do so
- Educating employers about ABC and their legal obligations to promote non-discrimination and the right to work for people with ABC and their informal caregivers
- Encouraging governments to review their work rights and anti-discrimination laws through the lens of individuals with ABC and their informal caregivers

ABC GLOBAL ALLIANCE CONTRIBUTORS AND ADVISORS

ABC Global Alliance Steering Committee

This charter could not have been produced without the generous guidance and feedback from the ABC Global Alliance Steering Committee. These global multi-stakeholder groups of experts, comprised of patients, patient advocates, HCPs, industry, and policy experts, provided valuable perspectives to shape the direction of these goals.

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Data Contributors

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REFERENCES

1. Bray F, Laversanne M, Sung H, et al. Global cancer statistics 2022: GLOBOCAN estimates of incidence and mortality worldwide for 36 cancers in 185 countries. *CA Cancer J Clin*. 2024;74(3):229-263. doi:10.3322/caac.21834

2. American Cancer Society. About Breast Cancer in Men. 2018. Accessed August 1, 2025. https://www.cancer.org/cancer/types/breast-cancer-in-men/about.html

3. National Breast Cancer Foundation. Stage 4 Breast Cancer. 2025. Accessed June 25, 2025. https://www.nationalbreastcancer.org/breast-cancer-stage-4/

4. Kim J, Harper A, McCormack V, et al. Global patterns and trends in breast cancer incidence and mortality across 185 countries. *Nat Med*. Published online 2025. doi:10.1038/s41591-025-03502-3

5. Cardoso F, Spence D, Mertz S, et al. Global analysis of advanced/metastatic breast cancer: Decade report (2005–2015). *Breast*. 2018;39:131-138. doi:10.1016/j.breast.2018.03.002

6. ABC Global Alliance. Advanced Breast Cancer (ABC) Global Charter. 2022. Accessed May 13, 2025. https://www.abcglobalalliance.org/abc-global-charter-report

7. Multinational Association of Supportive Care in Cancer. What is Supportive Care? Accessed May 19, 2025. https://mascc.org/what-is-supportive-care/

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