

Disease Control Priorities Third Edition

Cancer is low or absent on the health agendas of low- and middle-income countries (LMCs) despite the fact that more people die from cancer in these countries than from AIDS and malaria combined. International health organizations, bilateral aid agencies, and major foundations—which are instrumental in setting health priorities—also have largely ignored cancer in these countries. This book identifies feasible, affordable steps for LMCs and their international partners to begin to reduce the cancer burden for current and future generations. Stemming the growth of cigarette smoking tops the list to prevent cancer and all the other major chronic diseases. Other priorities include infant vaccination against the hepatitis B virus to prevent liver cancers and vaccination to prevent cervical cancer. Developing and increasing capacity for cancer screening and treatment of highly curable cancers (including most childhood malignancies) can be accomplished using "resource-level appropriateness" as a guide. And there are ways to make inexpensive oral morphine available to ease the pain of the many who will still die from cancer.

Sustainable economic development has played a major role in the decline of global poverty in the past two decades. There is no doubt that competitive markets are key drivers of economic growth and productivity. They are also valuable channels for consumer welfare. Competition policy is a powerful tool for complementing efforts to alleviate poverty and bring about shared prosperity. An effective competition policy involves measures that enable contestability and firm entry and rivalry, while ensuring the enforcement of antitrust laws and state aid control. Governments from emerging and developing economies are increasingly requesting pragmatic solutions for effective competition policy implementation, as well as recommendations for pro-competitive sectoral policies. *A Step Ahead: Competition Policy for Shared Prosperity and Inclusive Growth* puts forward a research agenda that advocates the importance of market competition, effective market regulation, and competition policies for achieving inclusive growth and shared prosperity in emerging and developing economies. It is the result of a global partnership and shared commitment between the World Bank Group and the Organisation for Economic Co-operation and Development (OECD). Part I of the book brings together existing empirical evidence on the benefits of competition for household welfare. It covers the elimination of anticompetitive practices and regulations that restrict competition in key markets and highlights the effects of competition on small producers and employment. Part II of the book focuses on the distributional effects of competition policies and how enforcement can be better aligned with shared prosperity goals.

The second edition of this book outline show to include the poor using the Participatory Poverty Assessment (PPA) method. This method was developed by the World Bank in partnerships with NGOs, governments, and academic institutions, and has been implemented in over 60 countries worldwide during the last decade. This book also draws on new PPA case examples. Joint publication with the World Bank.

Mental, neurological, and substance use disorders are common, highly disabling, and associated with significant premature mortality. The impact of these disorders on the social and economic well-being of individuals, families, and societies is large, growing, and underestimated. Despite this burden, these disorders have been systematically neglected, particularly in low- and middle-income countries, with pitifully small contributions to scaling up cost-effective prevention and treatment strategies. Systematically compiling the substantial existing knowledge to address this inequity is the central goal of this volume. This evidence-base can help policy makers in resource-constrained settings as they prioritize programs and interventions to address these disorders.

Essential Surgery is part of a nine volume series for Disease Control Priorities which focuses on health interventions intended to reduce morbidity and mortality. The Essential Surgery volume focuses on four key aspects including global financial responsibility, emergency procedures, essential services organization and cost analysis.

Chronic conditions and diseases are the leading cause of mortality and morbidity in Europe, accounting for 86% of total premature deaths, and research suggests that complex conditions such as diabetes and depression will impose an even greater health burden in the future - and not only for the rich and elderly in high-income countries, but increasingly for the poor as well as low- and middle-income countries. The epidemiologic and economic analyses in the first part of the book suggest that policy-makers should

make chronic disease a priority. This book highlights the issues and focuses on the strategies and interventions that policy-makers have at their disposal to tackle this increasing challenge. Strategic discussed in the second part of this volume include (1) prevention and early detection, (2) new provider qualifications (e.g. nurse practitioners) and settings, (3) disease management programmes and (4) integrated care models. But choosing the right strategies will be difficult, particularly given the limited evidence on effectiveness and cost-effectiveness. In the third part, the book therefore outlines and discusses institutional and organizational challenges for policy-makers and managers: (1) stimulating the development of new effective pharmaceuticals and medical devices, (2) designing appropriate financial incentives, (3) improving coordination, (4) using information and communication technology, and (5) ensuring evaluation. To tackle these challenges successfully, key policy recommendations are made.

The evaluation of reproductive, maternal, newborn, and child health (RMNCH) by the Disease Control Priorities, Third Edition (DCP3) focuses on maternal conditions, childhood illness, and malnutrition. Specifically, the chapters address acute illness and undernutrition in children, principally under age 5. It also covers maternal mortality, morbidity, stillbirth, and influences to pregnancy and pre-pregnancy. Volume 3 focuses on developments since the publication of DCP2 and will also include the transition to older childhood, in particular, the overlap and commonality with the child development volume. The DCP3 evaluation of these conditions produced three key findings: 1. There is significant difficulty in measuring the burden of key conditions such as unintended pregnancy, unsafe abortion, nonsexually transmitted infections, infertility, and violence against women. 2. Investments in the continuum of care can have significant returns for improved and equitable access, health, poverty, and health systems. 3. There is a large difference in how RMNCH conditions affect different income groups; investments in RMNCH can lessen the disparity in terms of both health and financial risk.

[The American Psychiatric Association Practice Guidelines for the Psychiatric Evaluation of Adults](#)

[Cardiovascular, Respiratory, Renal, and Endocrine Disorder](#)

[An Essay on Entitlement and Deprivation](#)

[Reproductive, Maternal, Newborn, and Child Health](#)

[Disease Control Priorities, Third Edition \(Volume 4\)](#)

[International Classification of Diseases for Oncology](#)

[Major Infectious Diseases](#)

[A Key Component of Education for All](#)

[Essential Surgery](#)

[International Health Regulations \(adopted at the Twenty-second World Health Assembly\)](#)

[Disease Control Priorities in Developing Countries](#)

The New Public Health has established itself as a solid textbook throughout the world. Translated into 7 languages, this work distinguishes itself from other public health textbooks, which are either highly locally oriented or, if international, lack the specificity of local issues relevant to students' understanding of applied public health in their own setting. This 3e provides a unified approach to public health appropriate for all masters' level students and practitioners—specifically for courses in MPH programs, community health and preventive medicine programs, community health education programs, and community health nursing programs, as well as programs for other medical professionals such as pharmacy, physiotherapy, and other public health courses. Changes in infectious and chronic disease epidemiology including vaccines, health promotion, human resources for health and health technology Lessons from H1N1, pandemic threats, disease eradication, nutritional health Trends of health systems and reforms and consequences of current economic crisis for health Public health law, ethics, scientific d health technology advances and assessment Global Health environment, Millennium Development Goals and international NGOs

Preceded by: Disease control priorities in developing countries / editors, Dean T. Jamison ... [et al.]. 2nd ed., c2006.

This report repositions a group of 17 neglected tropical diseases on the global development agenda at a time of profound transitions in the economies of endemic countries and in thinking about the overarching objectives of development. In doing so it reinvigorates the drive to prevent control eliminate or eradicate diseases that blind maim and disfigure making life miserable for more than a billion people. Undetected and

untreated several almost invariably kill. The burden of these diseases is further amplified by the fact that many require chronic and costly care underscoring the economic as well as the health benefits of preventive chemotherapy and early detection and care. The report brings a new dimension to long-term thinking about the future approach to these diseases. For the first time it sets out financing needs options and targets for meeting WHO Roadmap goals by 2020 but also for reaching universal coverage of all people in need by 2030. The report makes one investment case for cost-effectiveness and a second investment case where equity is the focus. It sets targets for ending catastrophic health expenditures and as part of the drive to strengthen health systems for getting services closer to where people live.

Vaccinate children against deadly pneumococcal disease, or pay for cardiac patients to undergo lifesaving surgery? Cover the costs of dialysis for kidney patients, or channel the money toward preventing the conditions that lead to renal failure in the first place? Policymakers dealing with the realities of limited health care budgets face tough decisions like these regularly. And for many individuals, their personal health care choices are equally stark: paying for medical treatment could push them into poverty. Many low- and middle-income countries now aspire to universal health coverage, where governments ensure that all people have access to the quality health services they need without risk of impoverishment. But for universal health coverage to become reality, the health services offered must be consistent with the funds available—and this implies tough everyday choices for policymakers that could be the difference between life and death for those affected by any given condition or disease. The situation is particularly acute in low- and middle income countries where public spending on health is on the rise but still extremely low, and where demand for expanded services is growing rapidly. *What's In, What's Out: Designing Benefits for Universal Health Coverage* argues that the creation of an explicit health benefits plan—a defined list of services that are and are not available—is an essential element in creating a sustainable system of universal health coverage. With contributions from leading health economists and policy experts, the book considers the many dimensions of governance, institutions, methods, political economy, and ethics that are needed to decide what's in and what's out in a way that is fair, evidence-based, and sustainable over time.

Strategic health planning, the cornerstone of initiatives designed to achieve health improvement goals around the world, requires an understanding of the comparative burden of diseases and injuries, their corresponding risk factors and the likely effects of intervention options. The *Global Burden of Disease* framework, originally published in 1990, has been widely adopted as the preferred method for health accounting and has become the standard to guide the setting of health research priorities. This publication sets out an updated assessment of the situation, with an analysis of trends observed since 1990 and a chapter on the sensitivity of GBD estimates to various sources of uncertainty in methods and data.

***Disease Control Priorities, Third Edition (Volume 5) Cardiovascular, Respiratory, and Related Disorders* World Bank Publications**

Cardiovascular, respiratory, and related conditions cause more than 40 percent of all deaths globally, and their substantial burden is rising, particularly in low- and middle-income countries (LMICs). Their burden extends well beyond health effects to include significant economic and societal consequences. Most of these conditions are related, share risk factors, and have common control measures at the clinical, population, and policy levels. Lives can be extended and improved when these diseases are prevented, detected, and managed. This volume summarizes current knowledge and presents evidence-based interventions that are effective, cost-effective, and scalable in LMICs.

[Global Burden of Disease and Risk Factors](#)

[The State of the World's Land and Water Resources for Food and Agriculture](#)

[Disease Control Priorities, Third Edition \(Volume 1\)](#)

[Rethinking School Health](#)

[Case Studies in Global Health: Millions Saved](#)

[Improving Health and Reducing Poverty](#)

[Lessons from 20 Years of World Bank Experience](#)

[Third WHO Report on Neglected Tropical Diseases 2015](#)

[The New Public Health](#)

[Strategies, Interventions and Challenges](#)

[Can the Poor Influence Policy? Participatory Poverty Assessments in the Developing World](#)

[Competition Policy for Shared Prosperity and Inclusive Growth](#)

At the turn of the millennium, the world experienced a dramatic increase in funding for global health programs. Competing demands for these resources meant that policymakers needed access to valid, evidence-based information on the costs and consequences of a broad range of health interventions. By providing systematic and comparable information about purchasing health in LMICs, *Disease Control Priorities in Developing Countries, Second Edition* greatly informed and enriched these conversations and - we hope --

improved resource allocations. Nearly ten years later, increased attention to chronic diseases and the importance of health systems in providing access to quality care is once again reshaping the global health landscape. Low- and middle-income countries are continuing to set priorities for funding and deploying specific interventions, but with a greater appreciation for the contribution of program and economic evaluation to informed decision-making. The need to make decisions across an increasingly complex set of policy and intervention choices, attuned to specific health system capabilities, makes a third iteration of Disease Control Priorities all the more critical. Similar to the first and second editions of Disease Control Priorities (DCP1 and DCP2), the aim of the third edition (DCP3) is to influence program design and resource allocation at global and country levels by providing an up-to-date comprehensive review of the effectiveness of priority health interventions. It presents systematic and comparable economic evaluations of selected interventions, delivery platforms, and policies based on newly developed economic methods. DCP3 further expands on the scope of intervention assessments found in DCP1 and DCP2 by presenting findings in nine individual volumes. It is clear that optimal global health programming requires a comprehensive evidence-base to help determine what works, what does not, how much it will cost. DCP3 will allow users to set global and national priorities for health in an informed manner.

The African Continental Free Trade Area (AfCFTA) represents a historic opportunity for the continent to boost intra-African trade and accelerate structural transformation. However, this relies on a critical policy instrument: the effective implementation of preferential trade liberalization among the AfCFTA members. Whether in practice African firms will utilize tariff preferences under the AfCFTA depends on a critical factor: rules of origin (RoO) and the net benefits of complying with them. This report argues for the adoption of flexible RoO and a strengthening of institutional capacities to ensure an impartial, transparent, predictable, consistent and neutral implementation of agreed RoO.

The substantial burden of death and disability that results from interpersonal violence, road traffic injuries, unintentional injuries, occupational health risks, air pollution, climate change, and inadequate water and sanitation falls disproportionately on low- and middle-income countries. Injury Prevention and Environmental Health addresses the risk factors and presents updated data on the burden, as well as economic analyses of platforms and packages for delivering cost-effective and feasible interventions in these settings. The volume's contributors demonstrate that implementation of a range of prevention strategies-presented in an essential package of interventions and policies-could achieve a convergence in death and disability rates that would avert more than 7.5 million deaths a year.

As the culminating volume in the DCP3 series, volume 9 will provide an overview of DCP3 findings and methods, a summary of messages and substantive lessons to be taken from DCP3, and a further discussion of cross-cutting and synthesizing topics across the first eight volumes. The introductory chapters (1-3) in this volume take as their starting point the elements of the Essential Packages presented in the overview chapters of each volume. First, the chapter on intersectoral policy priorities for health includes fiscal and intersectoral policies and assembles a subset of the population policies and applies strict criteria for a low-income setting in order to propose a "highest-priority" essential package. Second, the chapter on packages of care and delivery platforms for universal health coverage (UHC) includes health sector interventions, primarily clinical and public health services, and uses the same approach to propose a highest priority package of interventions and policies that meet similar criteria, provides cost estimates, and describes a pathway to UHC.

The State of the World's Land and Water Resources for Food and Agriculture is FAO's first flagship publication on the global status of land and water resources. It is an 'advocacy' report, to be published every three to five years, and targeted at senior level decision makers in agriculture as well as in other sectors. SOLAW is aimed at sensitizing its target audience on the status of land resources at global and regional levels and FAO's viewpoint on appropriate recommendations for policy formulation. SOLAW focuses on these key dimensions of analysis: (i) quantity, quality of land and water resources, (ii) the rate of use and sustainable management of these resources in the context of relevant socio-economic driving factors and concerns, including food security and poverty, and climate change. This is the first time that a global, baseline status report on land and water resources has been made. It is based on several global spatial databases (e.g. land suitability for agriculture, land use and management,

land and water degradation and depletion) for which FAO is the world-recognized data source. Topical and emerging issues on land and water are dealt with in an integrated rather than sectoral manner. The implications of the status and trends are used to advocate remedial interventions which are tailored to major farming systems within different geographic regions.

This casebook collects 64 case studies each of which raises an important and difficult ethical issue connected with planning, reviewing or conducting health-related research. The book's purpose is to contribute to thoughtful analysis of these issues by researchers and members of research ethics committees (REC's known in some places as ethical review committees or institutional review boards) particularly those involved with studies that are conducted or sponsored internationally. . This collection is envisioned principally as a tool to aid educational programs from short workshops on research.

Case Studies in Global Health: Millions Saved consists of 20 case studies, which illustrate real life, proven, large-scale success stories in global public health. Drawing from a rich evidence base, the accessible case write-ups highlight experiences in the scale up of health technologies, the strengthening of health systems, and the use of health education and policy change to achieve impressive reductions in disease and disability, even in the poorest countries. An overview chapter draws attention to the factors that contributed to each of the successes. Discussion questions help to bring out the main points and provide a point of departure for independent student research. Useful as a stand-alone text or as a complement to Essentials of Global Health, this book provides readers with a clear and inspiring picture of how global public health efforts have made a difference in the lives of people around the world.

[Mental, Neurological, and Substance Use Disorders](#)

[Mental, Neurological, and Substance Use Disorders: Disease Control Priorities, Third Edition \(Volume 4\)](#)

[Disease Control Priorities, Third Edition](#)

[Disease Control Priorities, Third Edition \(Volume 7\)](#)

[What's In, What's Out](#)

[Disease Control Priorities, Third Edition \(Volume 8\)](#)

[Poverty and Famines](#)

[Investing in Historic City Cores and Cultural Heritage Assets for Sustainable Development](#)

[Infrastructure at the Crossroads](#)

[Environmental Health and Injury Prevention](#)

[Disease Control Priorities, Third Edition \(Volume 9\)](#)

[Disease Control Priorities, Third Edition \(Volume 5\)](#)

This is the third edition of this publication which contains the latest information on vaccines and vaccination procedures for all the vaccine preventable infectious diseases that may occur in the UK or in travellers going outside of the UK, particularly those immunisations that comprise the routine immunisation programme for all children from birth to adolescence. It is divided into two sections: the first section covers principles, practices and procedures, including issues of consent, contraindications, storage, distribution and disposal of vaccines, surveillance and monitoring, and the Vaccine Damage Payment Scheme; the second section covers the range of different diseases and vaccines.

The Science of Grapevines: Anatomy and Physiology is an introduction to the physical structure of the grapevine, its various organs, their functions and their interactions with the environment. Beginning with a brief overview of the botanical classification (including an introduction to the concepts of species, cultivars, clones, and rootstocks), plant morphology and anatomy, and growth cycles of grapevines, The Science of Grapevines covers the basic concepts in growth and development, water relations, photosynthesis and respiration, mineral uptake and utilization, and carbon partitioning. These concepts are put to use to understand plant-environment interactions including canopy dynamics, yield formation, and fruit composition, and concludes with an introduction to stress physiology, including water stress (drought and flooding), nutrient deficiency and excess, extreme temperatures (heat and cold), and the impact and response to of other organisms. Based on the author's years of teaching grapevine anatomy as well as his research experience with grapevines and practical experience growing grapes, this book provides an important guide to understanding the entire plant. Chapter 7 broken into two chapters, now "Environmental Constraints and Stress Physiology and Chapter 8 "Living with Other Organisms" to better reflect specific concepts Integration of new research results including: Latest research on implementing drip irrigation to maximize sugar accumulation within grapes Effect of drought stress on grapevine's hydraulic system and options for optimum plant maintenance in

drought conditions The recently discovered plant hormone - strigolactones - and their contribution of apical dominance that has suddenly outdated dogma on apical dominance control Chapter summaries added Key literature references missed in the first edition as well as references to research completed since the 1e publication will be added

For the goals of Education for All (EFA) to be achieved, children must be healthy enough not only to attend school but also to learn while there. Because school health and nutrition programs specifically benefit poor, sick, and hungry children, they can make a key contribution to achieving EFA's goals. However, children can benefit only if the programs reach them. **Rethinking School Health: A Key Component of Education for All** describes how schools have been used as a platform for delivering familiar, safe, and simple health and nutrition interventions to hard-to-reach children in low-income countries. The book's foreword was written jointly by Elizabeth King of the World Bank, Susan Durston of the United Nations Children's Fund (UNICEF), and Qian Tang of the United Nations Educational, Scientific and Cultural Organization (UNESCO), indicating the interagency support for this approach. The book will be of particular interest to those working in the fields of education, health and nutrition, and early childhood development. --Book Jacket.

Annotation This volume discusses health system policies (including financing global health, quality of care, and strengthening regulatory systems in low- and middle-income countries), as well as the methods and resources used throughout all DCP3 volumes.

Infrastructure at the Crossroads brings together lessons from the last two decades of World Bank engagement in infrastructure. It analyzes trends in the Bank's infrastructure lending, describes the evolution of the external environment and the Bank's own strategic priorities, and presents lessons about project design and appraisal, poverty focus, private sector participation, environmental and social sustainability, the issue of corruption, and stakeholder communications.

In a world where half of the population lives in cities and more than 90 percent of urban growth is occurring in the developing world, cities struggle to modernize without completely losing their unique character, which is embodied by their historic cores and cultural heritage assets. As countries develop, cultural heritage can provide a crucial element of continuity and stability: the past can become a foundation for the future. This book collects innovative research papers authored by leading scholars and practitioners in heritage economics, and presents the most current knowledge on how heritage assets can serve as drivers of local economic development. What this book tries to suggest is a workable approach to explicitly take into account the cultural dimensions of urban regeneration in agglomerations that have a history and possess a unique character, going beyond an approach based solely on major cultural heritage assets or landmarks. The knowledge disseminated through this book will help stakeholders involved in preparation, implementation, and supervision of development investments to better assess the values of cultural heritage assets and incorporate them in urban development policies.

This book focuses on the causes of starvation in general and famines in particular. The traditional analysis of famines is shown to be fundamentally defective, and the author develops an alternative analysis.

[Anatomy and Physiology](#)

[Tackling Chronic Disease in Europe](#)

[Injury Prevention and Environmental Health](#)

[State of the World's Vaccines and Immunization](#)

[ICD-O](#)

[Economic Development in Africa Report 2019](#)

[Disease Control Priorities, Third Edition \(Volume 1\).](#)

[Designing Benefits for Universal Health Coverage](#)

[A Step Ahead](#)

[Made in Africa □ Rules of Origin for Enhanced Intra-African Trade](#)

[Managing Systems at Risk](#)

[Child and Adolescent Health](#)

Annotation Non-communicable diseases are the largest contributor to premature morbidity and mortality globally. This volume reviews the health and economic burden of such diseases, and effective and feasible options for prevention, diagnosis, and treatment.

Based on careful analysis of burden of disease and the costs of interventions, this second edition of 'Disease Control Priorities in Developing Countries, 2nd edition' highlights achievable priorities; measures progress toward providing efficient, equitable care; promotes cost-effective interventions to targeted populations; and encourages integrated efforts to optimize health. Nearly 500 experts - scientists, epidemiologists, health economists, academicians, and public health practitioners - from around the world contributed to the

data sources and methodologies, and identified challenges and priorities, resulting in this integrated, comprehensive reference volume on the state of health in developing countries.

Since the publication of the Institute of Medicine (IOM) report Clinical Practice Guidelines We Can Trust in 2011, there has been an increasing emphasis on assuring that clinical practice guidelines are trustworthy, developed in a transparent fashion, and based on a systematic review of the available research evidence. To align with the IOM recommendations and to meet the new requirements for inclusion of a guideline in the National Guidelines Clearinghouse of the Agency for Healthcare Research and Quality (AHRQ), American Psychiatric Association (APA) has adopted a new process for practice guideline development. Under this new process APA's practice guidelines also seek to provide better clinical utility and usability. Rather than a broad overview of treatment for a disorder, new practice guidelines focus on a set of discrete clinical questions of relevance to an overarching subject area. A systematic review of evidence is conducted to address these clinical questions and involves a detailed assessment of individual studies. The quality of the overall body of evidence is also rated and is summarized in the practice guideline. With the new process, recommendations are determined by weighing potential benefits and harms of an intervention in a specific clinical context. Clear, concise, and actionable recommendation statements help clinicians to incorporate recommendations into clinical practice, with the goal of improving quality of care. The new practice guideline format is also designed to be more user friendly by dividing information into modules on specific clinical questions. Each module has a consistent organization, which will assist users in finding clinically useful and relevant information quickly and easily. This new edition of the practice guidelines on psychiatric evaluation for adults is the first set of the APA's guidelines developed under the new guideline development process. These guidelines address the following nine topics, in the context of an initial psychiatric evaluation: review of psychiatric symptoms, trauma history, and treatment history; substance use assessment; assessment of suicide risk; assessment for risk of aggressive behaviors; assessment of cultural factors; assessment of medical health; quantitative assessment; involvement of the patient in treatment decision making; and documentation of the psychiatric evaluation. Each guideline recommends or suggests topics to include during an initial psychiatric evaluation. Findings from an expert opinion survey have also been taken into consideration in making recommendations or suggestions. In addition to reviewing the available evidence on psychiatry evaluation, each guideline also provides guidance to clinicians on implementing these recommendations to enhance patient care.

More children born today will survive to adulthood than at any time in history. It is now time to emphasize health and development in middle childhood and adolescence--developmental phases that are critical to health in adulthood and the next generation. Child and Adolescent Health and Development explores the benefits that accrue from sustained and targeted interventions across the first two decades of life. The volume outlines the investment case for effective, costed, and scalable interventions for low-resource settings, emphasizing the cross-sectoral role of education. This evidence base can guide policy makers in prioritizing actions to promote survival, health, cognition, and physical growth throughout childhood and adolescence.

Infectious diseases are the leading cause of death globally, particularly among children and young adults. The spread of new pathogens and the threat of antimicrobial resistance pose particular challenges in combating these diseases. Major Infectious Diseases identifies feasible, cost-effective packages of interventions and strategies across delivery platforms to prevent and treat HIV/AIDS, other sexually transmitted infections, tuberculosis, malaria, adult febrile illness, viral hepatitis, and neglected tropical diseases. The volume emphasizes the need to effectively address emerging antimicrobial resistance, strengthen health systems, and increase access to care. The attainable goals are to reduce incidence, develop innovative approaches, and optimize existing tools in resource-constrained settings.

This edition of ICD-O, the standard tool for coding diagnoses of neoplasms in tumour and cancer registrars and in pathology laboratories, has been developed by a working party convened by the International Agency for Research on Cancer / WHO. ICD-O is a dual classification with coding systems for both topography and morphology. The book has five main sections. The first provides general instructions for using the coding systems and gives rules for their implementation in tumour registries and pathology laboratories. Section two includes the numerical list of topography codes, which remain unchanged from the previous edition. The numerical list of morphology codes is presented in the next section, which introduces several new terms and includes considerable revisions of the non-Hodgkin lymphoma and leukaemia sections, based on the WHO Classification of Hematopoietic and Lymphoid Diseases. The five-digit morphology codes allow identification of a tumour or cell type by histology, behaviour, and grade. Revisions in the morphology section were made in consultation

with a large number of experts and were finalised after field-testing in cancer registries around the world. The alphabetical index gives codes for both topography and morphology and includes selected tumour-like lesions and conditions. A guide to differences in morphology codes between the second and third editions is provided in the final section, which includes lists of all new code numbers, new terms and synonyms added to existing code definitions, terms that changed morphology code, terms for conditions now considered malignant, deleted terms, and terms that changed behaviour code.

[Child and Adolescent Health and Development](#)

[Cancer Control Opportunities in Low- and Middle-Income Countries](#)

[The Science of Grapevines](#)

[Disease Control Priorities, Third Edition \(Volume 2\)](#)

[Cardiovascular, Respiratory, and Related Disorders](#)

[The Economics of Uniqueness](#)

[Disease Control Priorities, Third Edition \(Volume 6\)](#)

[Immunisation against infectious diseases](#)

[Investing to Overcome the Global Impact of Neglected Tropical Diseases](#)