

CANCER CONTROL, ACCESS AND INEQUALITY IN LATIN AMERICA

The Economist Intelligence Unit has created the Latin America Cancer Control Scorecard (LACCS) to assess cancer-control policies and programmes in 12 Latin American countries (the "study countries"). The LACCS shows that a number of countries in the region have put in place or strengthened their National Cancer Control Plans. However, plans are often not sufficiently comprehensive and lack funding. Progress has also been made in rolling out population-based cancer registries in the region, but issues with data quality and coverage persist. Other areas with room for improvement include high rates of late-stage diagnosis, insufficient resources for current and future cancer-care needs, fragmented healthcare systems and inequalities in access to care. More details on scope and methodology can be found here: <http://www.eiuperspectives.economist.com/LACCS>

STRATEGIC PLAN

Although one-half of study countries have established strategic plans for cancer, some of these plans are not up-to-date and neither do all of them address inequalities.

- 50% of countries have developed a strategic plan for cancer or have a non-communicable diseases plan with substantial cancer provisions.
- 30% of these plans are not up-to-date.
- 50% of these plans include specific provisions to address inequalities.

MONITORING PERFORMANCE

In recent years, study countries have made progress in rolling out population-based cancer registries, but coverage is limited and data quality is weak in many places.

- 33% of countries have a national population-based cancer registry.
- Only around 7% of the population of study countries live in areas covered by a high-quality population-based registry.
- Only Costa Rica and Uruguay get the highest scores for the "data quality" sub-category (assessing the quality of both incidence and mortality data).

MEDICINES AVAILABILITY

Study countries tend to make older cancer treatments available, but struggle to put newer or even novel drugs on their formularies.

- 50% of countries make available all of the older lung-cancer drugs examined in the LACCS (dating from the 1990s).
- 0% of countries provide all three novel lung-cancer drugs examined in the LACCS.
- But: Only Chile makes available the three newer drugs (dating from the middle of the past decade).

RADIOTHERAPY AVAILABILITY

The availability of radiotherapy is a proxy for cancer-control infrastructure investment, and only few countries perform very well in this domain.

- 74% The average radiotherapy coverage (that is, the estimated proportion of patients requiring radiotherapy who are able to access it) is 74% in the study countries.
- 83% A recent study found that 83% of countries included in the LACCS had an insufficient supply of radiation oncologists.
- But: Only Uruguay and Chile have enough radiotherapy machines to treat all of their countries' patients.

PREVENTION AND EARLY DETECTION

Key aspects of prevention are improving in Latin America, notably tobacco control and the increase in vaccination to protect against the human papilloma virus (HPV). But deficits remain in addressing the region's growing obesity challenge and making existing screening programmes serve whole populations effectively.

- 67% of study countries get the highest scores in the "discourage smoking" sub-category.
- 83% of countries have a full HPV vaccination programme in order to prevent HPV-related cancers (such as cervical cancer).
- Only Chile and Mexico receive top marks in the "reduce sugar consumption" sub-category.

FINANCE

The budgets, personnel, equipment and other resources for cancer control will have to be bolstered in order to meet current need.

- 25% of study countries provide universal coverage for cancer care, with uninsured citizens treated for free.
- 13.7% of total spending on health is the average out-of-pocket expenditure in the Americas (global average: 18.2%).
- 4.6% of GDP is the average government spending on health in the study countries (OECD average: 7.7%).