



Argentina

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Key trends

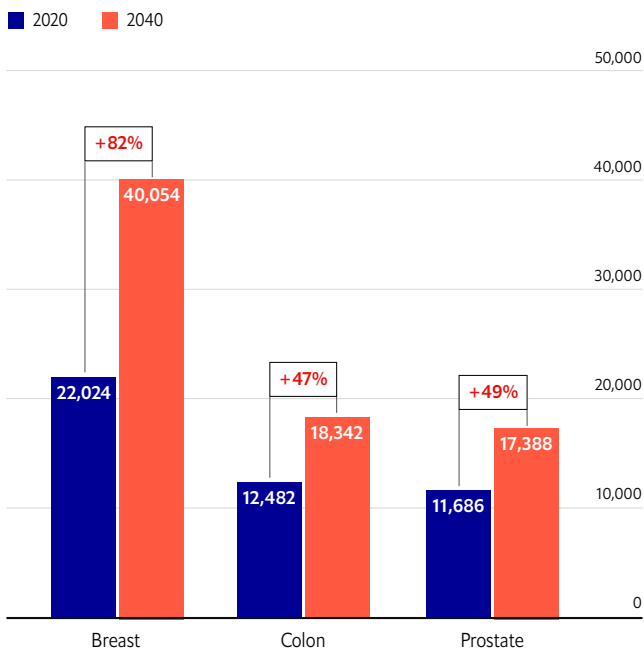
The number of those ≥ 65 years, a high-risk group for cancer, will increase by 43% by 2040.

The increasing cancer burden will pose a significant challenge to patients, health systems and wider society. Multiple efforts are needed to reduce mortality in line with SDG targets.

Population over 65 years ¹	5.4m (2022)	7.8m (2040)	↑ 43%
Total cancer incidence ²	131k (2020)	186k (2040)	↑ 42%
Total cancer mortality ²	70k (2020)	103k (2040)	↑ 47%
Probability of premature death from cancer per year in 2030 ³	6.5% (2020)	5.1% (SDG target)	Projected to miss SDG target by 51%

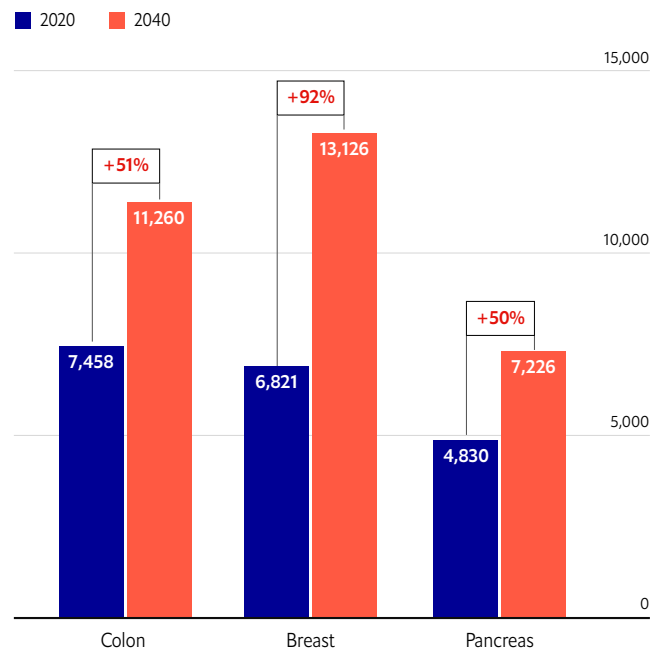
Top 3 Cancers: Incidence Projections estimates 2020 and 2040⁴

(# of people, both sexes, all ages)



Top 3 Cancers: Mortality Projections estimates 2020 and 2040⁴

(# of people, both sexes, all ages)



Policy

Legislation, guidelines and programs offer guidance on the distribution of resources and national priorities. While Argentina's National Cancer Institute instituted the 2018-2022 national cancer control plan, **an updated and more comprehensive control plan is warranted.**⁵



Early detection programme/ guidelines for 4 cancers (breast, cervix, colon, childhood)³



of MPOWER measures fully implemented and achieved³



Integrated NCD plan³



National screening program for breast cancer³



The latest NCCP covered 2018 - 2022³



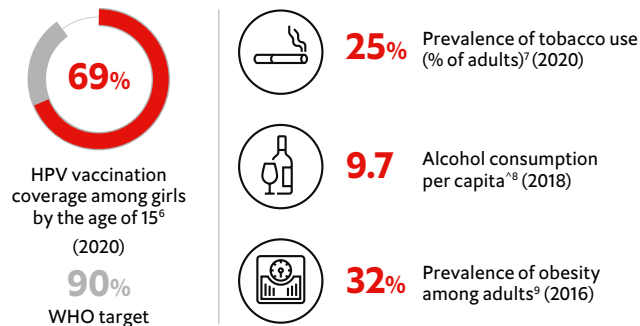
National screening program for cervical cancer³

* MPOWER: **M**onitor tobacco use and prevention policies, **P**rotect people from tobacco smoke, **O**ffer help to quit tobacco use, **W**arn about the dangers of tobacco, **E**nforce bans on tobacco advertising, promotion and sponsorship, and **R**aise taxes on tobacco.

Health System

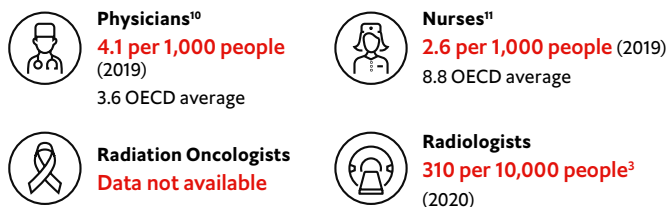
Health system capacity is key to meet the rising cancer burden. Health systems require a skilled workforce with access to the right equipment to provide optimal care to patients. **Argentina will need to invest in its health workforce expertise in oncology, increase access to key diagnostic infrastructure and target cancer risk factors.**

Primary prevention & risk factors



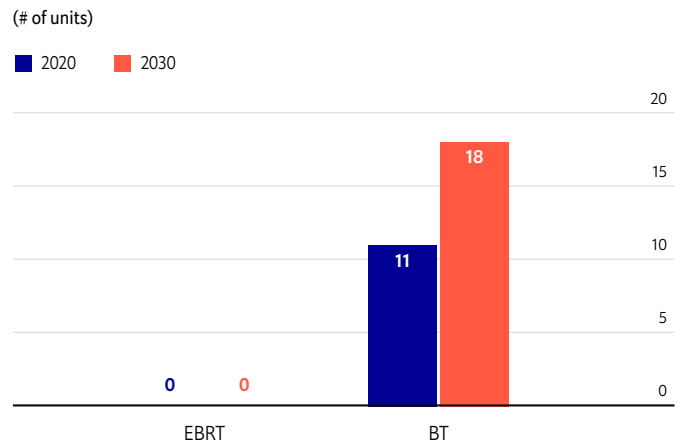
⁸Total alcohol consumption per capita (liters of pure alcohol, projected estimates, 15+ years of age)

Health workforce



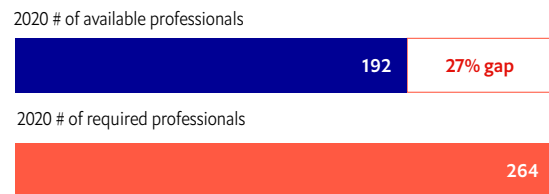
Infrastructure¹²

Shortage of external beam radiation therapy (EBRT) and brachytherapy (BT) units to meet demand for cancer patients in 2020 and 2030



Shortage of radiation oncology professionals 2020

(vs #required to meet needs of cancer patients)



Innovation & Data

While many factors influence the uptake and scalability of digital health solutions, internet coverage is a fundamental factor that creates an enabling environment. Approximately 87% of Argentinians have access to the internet. **Argentina should increase coverage and find ways to leverage technology to improve the effectiveness and efficiency of cancer solutions.**



87%

Individuals using the Internet¹³
(2020)



0.5%

Research and development (R&D) expenditure (% of GDP)¹⁵
(2020)



59.1m

Number of mobile cellular subscriptions¹⁴
(2021)



7,122

Number of clinical trials¹⁶
(2022)

Health Financing

Resources are finite. Managing resources effectively and efficiently can better prepare countries to move toward a sustainable future. Adequately funding and investing in health is key.

Health Budget¹⁷

Total Health Expenditure as % of GDP

10% (2020)

10% OECD average

Total Health Expenditure per capita in USD

\$864 (2020)

\$4,245 OECD average

Government Health Expenditure as % of GDP

7% (2020)

7% OECD average


Government Health Expenditure per capita in USD


\$572 (2020)

\$3,018 OECD average

Value Assessment¹⁸

Has a systematic process to support healthcare decision-making? 

Is there an existence of a standard methodology or process guideline? 

Are there legislative and / or regulatory requirements to consider HTA results in benefit package decisions? 

Regulatory body:

Instituto de Efectividad Clínica y Sanitaria - IECS

Accessibility¹⁹



173 days

is the average time between a cancer treatment receiving regulatory approval to the treatment being available to patients through the public health system.

Economic Burden²⁰



\$106 billion

Total macroeconomic cost attributable to cancers between 2020-2050.

Affordability¹⁷

Out-of-Pocket Expenditure as % of Total Health Expenditure

24% (2023)

18% OECD average

Out-of-Pocket Expenditure per Capita in USD

\$209 (2023)

\$603 OECD average

Opportunities for Improvement

1 Update the NCCP

Argentina's most current NCCP established strategies and goals covering 2018-2022. The plan needs to be updated. An updated NCCP should include the following elements: discussion of prevention, screening and early detection, clear care pathway, diagnosis, an implementation plan and funding source.

2 Invest in health system strengthening

There is a gap in both the current health system infrastructure and human resources available in Argentina compared to the level needed to meet the demand and needs of patients with cancer. Investment in human resources, diagnostic and treatment equipment and as well as medicines is needed to help mitigate the increasing cancer burden in Argentina.

3 Reduce barriers and streamline care

Patients in the public system would benefit from more efficient cancer care delivery. Extensive administrative and bureaucratic processes delay patients' access to approved cancer treatments in Argentina. Such processes should be minimised to ensure more timely treatment is delivered.

References

1. United Nations. World Population Prospects - Population Division - United Nations [Internet]. population.un.org. 2022. Available from: <https://population.un.org/wpp/Download/Standard/MostUsed/>
2. World Health Organization. Cancer today [Internet]. iarc.fr. 2020. Available from: <https://gco.iarc.fr/today/home>
3. World Health Organization. Argentina Cancer Country Profile [Internet]. 2020. Available from: https://cdn.who.int/media/docs/default-source/country-profiles/cancer/arg_2020.pdf?sfvrsn=365d0f1e_5&download=true
4. World Health Organization. Cancer Tomorrow [Internet]. gco.iarc.fr. 2020. Available from: <https://gco.iarc.fr/tomorrow/en>
5. Ministerio de Salud y Desarrollo Social de Argentina. Plan nacional de control de cáncer 2018-2022 [Internet]. Ministerio de Salud y Desarrollo Social de Argentina. 2019. Available from: <https://www.iccp-portal.org/system/files/plans/Plan%20Nacional%20del%20Cancer%20-%20Argentina.pdf>
6. World Health Organization. ARGENTINA CERVICAL CANCER PROFILE Morbidity and Mortality WHO Cervical Cancer Elimination Strategy Targets for 2030 Primary Prevention [Internet]. 2021. Available from: https://cdn.who.int/media/docs/default-source/country-profiles/cervical-cancer/cervical-cancer-arg-2021-country-profile-en.pdf?sfvrsn=b95861f5_43&download=true
7. World Bank Open Data [Internet]. World Bank Open Data. [cited 2023 Jun 1]. Available from: <https://data.worldbank.org/indicator/SH.PRVS.MOK?end=2020&locations=AR-BR-CO-LB-EG-AE&start=2018>
8. World Bank Open Data [Internet]. World Bank Open Data. [cited 2023 Jun 1]. Available from: <https://data.worldbank.org/indicator/SH.ALC.PCAPLI?locations=AR-BR-CO-LB-EG-AE>
9. GHO | By category | Prevalence of obesity among adults, BMI ≥ 30 , age-standardized - Estimates by country [Internet]. WHO. Available from: <https://apps.who.int/gho/data/node.main.A900A?lang=en>
10. World Bank. Physicians (per 1,000 people) | Data [Internet]. Worldbank.org. 2019. Available from: <https://data.worldbank.org/indicator/SH.MED.PHYS.ZS>
11. World Bank. Nurses and midwives (per 1,000 people) | Data [Internet]. Worldbank.org. 2019. Available from: <https://data.worldbank.org/indicator/sh.med.numw.p3>
12. Leveling Up the Access to Radiation Therapy in Latin America: Economic Analysis of Investment, Equity, and Inclusion Opportunities Up to 2030 Sarria, Gustavo R. et al. International Journal of Radiation Oncology, Biology, Physics, Volume 116, Issue 2, 448 - 458
13. World Bank. Individuals Using the Internet (% of population) | Data [Internet]. World Bank. 2020. Available from: <https://data.worldbank.org/indicator/IT.NET.USER.ZS>
14. Mobile cellular subscriptions | Data [Internet]. Worldbank.org. 2019. Available from: <https://data.worldbank.org/indicator/IT.CEL.SETS>
15. Science & Technology | Data [Internet]. Worldbank.org. 2019. Available from: <https://data.worldbank.org/topic/science-and-technology>
16. Number of clinical trials by year, country, region and income group [Internet]. www.who.int. Available from: <https://www.who.int/observatories/global-observatory-on-health-research-and-development/monitoring/number-of-clinical-trials-by-year-country-who-region-and-income-group>
17. World Health Organization. Global Health Expenditure Database [Internet]. Available from: <https://apps.who.int/nha/database/Select/Indicators/en>
18. World Health Organization. [Internet]. HTA Country/Area Profile. [cited 2023 Jun 1]. Available from: https://cdn.who.int/media/docs/default-source/health-economics/hta-country-profiles-2020-21/hta_merged_country_area_profiles_compressed_organized.pdf?sfvrsn=b87e036f_5
19. FIFARMA & IQVIA. Patients W.A.I.T Indicator 2022 Survey. United States and European Union; IQVIA; 2022. Available from: https://academiadepacientes.com.br/storage/2022/10/FIFARMA-WAIT-Indicator-2022_Report_vFinal-30SEP2022-4.pdf
20. Estimates and Projections of the Global Economic Cost of 29 Cancers in 204 Countries and Territories From 2020 to 2050. Chem, S. et al. JAMA Oncol., Volume 9, Issue 4, 465-472