

Closing the public-private gap in multiple myeloma care in Latin America

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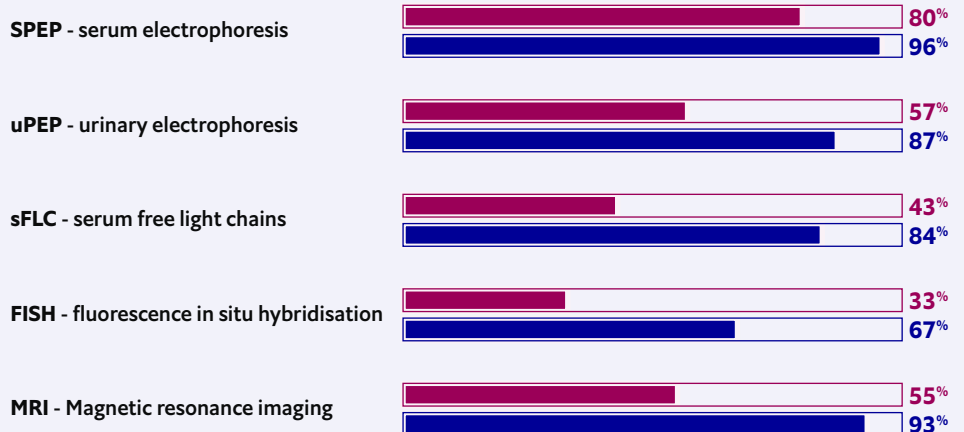
Over the past two decades, there has been an explosion of novel treatments that have **dramatically improved outcomes** for patients with multiple myeloma.

Following the introduction of novel agents, **survival with relapsed disease has almost doubled and increased by ~50% for newly diagnosed patients.**¹

These gains have not been universally achieved among populations in Latin America, especially among patients treated in the public sector where they face challenges in accessing recommended diagnostic tests, and barriers to autologous stem cell transplants and novel agent therapies.

Patients in the public sector have lower access to key diagnostic and prognostic tests²

■ Public ■ Private

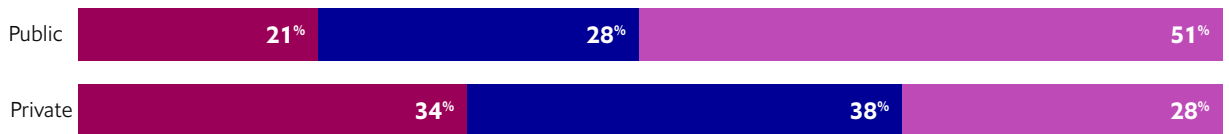


Patients in the public sector are diagnosed later, with more advanced disease

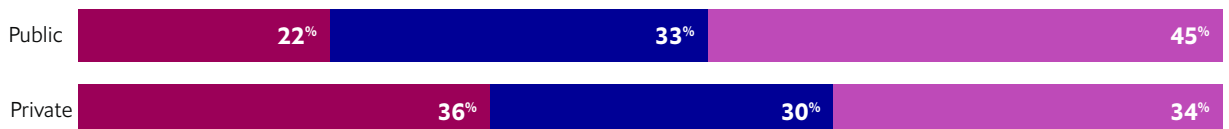
Stage: 1 2 3



Brazil³

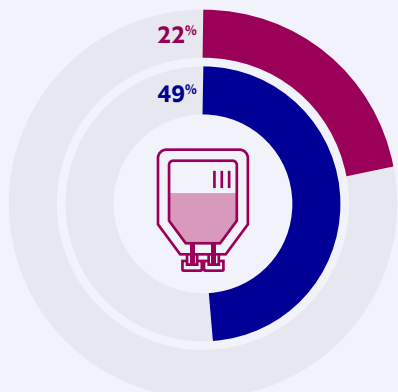


Mexico⁴



Patients in the public sector have lower access to autologous stem cell transplant

Across the region, 49% of patients received a transplant in the private sector, compared to 22% of patients in the public sector⁵



“The number of patients undergoing autologous stem cell transplant is steadily increasing in Colombia from about 150 per year in 2010 to 500 per year in 2020. However, transplantation for consolidation only reaches about 30% of patients, and there are often long wait times due to resource and infrastructure constraints”

Dr Virginia Abello Polo – Head of Leukaemia, Lymphoma and Myeloma Functional Unit at The Luis Carlos Sarmiento Angulo Cancer Treatment and Research Center (CTIC), Bogotá, Colombia.

Access to novel agents as part of frontline therapy is lower in the public sector^{5,6}

■ Public ■ Private

Regional study (2008-2016)



Brazil (2018-2022)*



*Study of transplant-eligible patients

“Timing and access are critical for myeloma patients. Access to early diagnosis, access to novel agents, and access to early transplant are imperative to improve outcomes.”

Professor Angelo Maiolino, Professor of Medicine, The Federal University of Rio de Janeiro, Brazil.

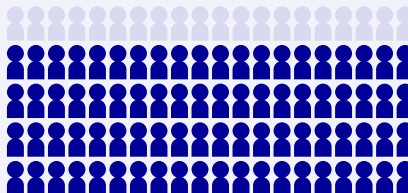
“Even though doctors are projecting requirements and requesting the purchase of drugs [in Mexico], about 40% of patients have not been receiving their therapies due to challenges in drug procurement”

Ms. Ortiz, Consultant and External Advisor, Mexican Association for the Fight against Cancer, Mexico.

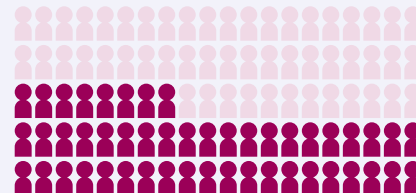
Private-sector patients have better outcomes

The 5-year overall survival rate in patients treated in the private sector across Latin America was almost twice the rate of those treated in the public sector (80% vs 46%).⁷

5-year overall survival rate among patients in the private sector
80%



5-year overall survival rate among patients in the public sector
46%



The way forward



Localised data and surveillance to increase understanding of the burden of myeloma



Early diagnosis and access to specialist care and novel therapies



Innovative funding mechanisms should be considered to facilitate access while ensuring sustainable healthcare systems



Administrative processes, including inventory management, projections and procurement, need to be streamlined



Public-private partnerships could ease the burden on the public sector and expedite specialist evaluations



Enhance referral pathways and capacity-building across all levels of healthcare, from primary to tertiary care centres

1 Moreau P, Touzeau C. Global Approaches in Myeloma: Critical Trials That May Change Practice. Am Soc Clin Oncol Educ Book. 2018;38:656-61.
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 3 Hungria V, Bittencourt R, Martínez G, et al. P-117: Multiple Myeloma treatment patterns and outcomes in the public and private healthcare systems in Brazil: one country, two worlds. Clinical Lymphoma Myeloma and Leukemia. 2021;21:S98-S3.
 4 Tarín-Arzaga L, Arredondo-Campos D, Martínez-Pacheco V, et al. Impact of the affordability of novel agents in patients with multiple myeloma: Real-world data of current clinical practice in Mexico. Cancer. 2018;124(9):1946-1953.
 5 de Moraes Hungria VT, Martínez-Baños DM, Peñafiel CR, et al. Multiple myeloma treatment patterns and clinical outcomes in the Latin America Haemato-Oncology (HOLA) Observational Study, 2008-2016. British journal of haematology. 2020;188(3):383-93.
 6 de Queiroz Crusoe E, Ribeiro G, Richter Zanella K, et al. Brazilian Real-World Multiple Myeloma (MM) Electronic Platform Register Project. Blood. 2020;136.
 7 Peña C, Riva E, Schütz N, et al. Different outcomes for transplant-eligible newly diagnosed multiple myeloma patients in Latin America according to the public versus private management: a GELAMM study. Leuk Lymphoma. 2020;61(13):3112-9.