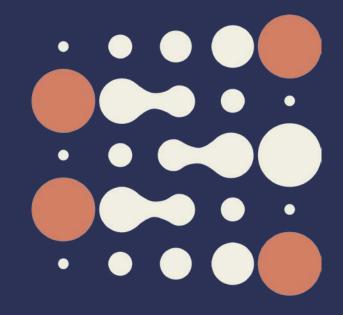
# Avoidable Breast Cancer Deaths in 27 Low- to Middle Income Countries: A SURVCAN-3 Population Based Study

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## **Avoidable Deaths – Background...**



Avoidable deaths have recently been used to estimate and compare disease burden between countries

# **Avoidable Breast Cancer Deaths - Role of timely diagnosis and treatment**

**Data:** SURVCAN-3 population-based cancer registry data from 2008-2012, GLOBOCAN national incidence estimates for 2022, UN Human development index data, WHO life tables

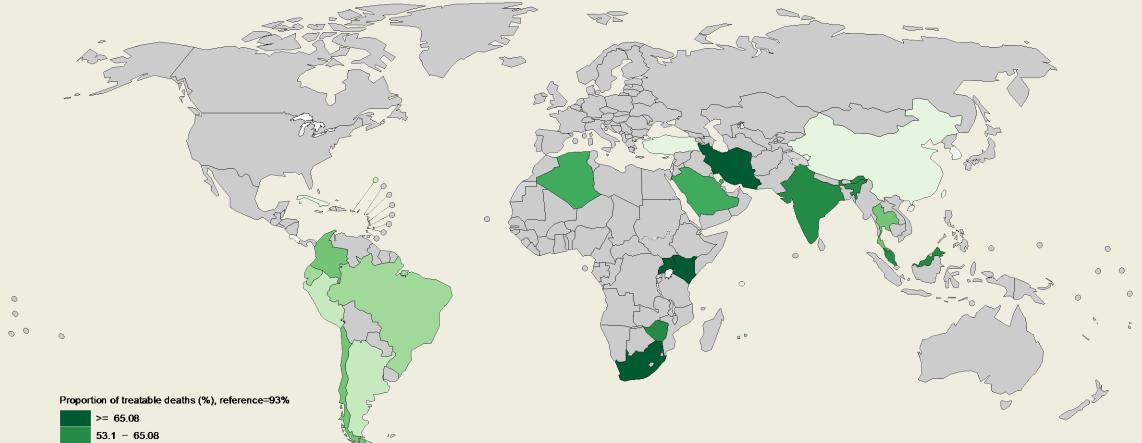
### Method:

- Five-year survival estimates obtained from flexible excess hazard models and patient survival data
- Proportion avoidable deaths calculated (with survival estimates and life tables) by age
- National number of avoidable deaths estimated (national incidence estimates)
- Secondary Analysis: reference survival chosen as maximum by income group

### Inclusion/ Exclusion Criteria:

- Female Breast cancer patients aged 15-99 at diagnosis
- At least ten events in a country (by age group)
- Minimum follow up time of five years available per country/ age-group

#### Results



53.1 - 65.08 53.1 - 65.08 48.25 - 53.1 41 - 48.25 32.65 - 41 29.5 - 32.65 20.68 - 29.5 < 20.68

NA

- 96,000 (43%) avoidable breast cancer deaths in 27 countries
- Large variation in treatable burden -> From 1% in Republic of Korea to 78% in The Islamic Replubic of Iran

-> Larger number AD found in patients aged 50-99 but proportion AD higher in patients aged 15-49

-> Largest proportion AD found in low/medium income countries

### **Discussion and Conclusions**

Large inequalities in treatment and diagnosis exist across the 27 countries in Asia, Africa and latin America

-> Large proportion and number avoidable deaths across the

countries, income levels and regions

- Late diagnosis and treatment significant barrier in LMCI settings for

treatment -> improvments would improve net survival

- **Data scarce** in LMCIs (only one country included from the Low-income group)

### - Burden expected to increase

**Conclusion:** All countries have room for improvements in diagnosis/ treatment but LMCIs are disporportionately affected. Cancer registry capacity building is also needed for data collection and for better estimates of disease

#### burden.

# Take home messages...

96,000 (43%) of breast cancer deaths avoidable overall

- Ca 14% of all breast cancer deaths globally

→ Largest avoidable burden found in LMCIs and in Sub-Saharan Africa

### → Significant

diagnostic/treatment disparities between Lowand High-income countries

- → Global Breast Cancer Initiative's recommendations: health promotion for early detection; timely diagnosis; and comprehensive breast cancer management
- → Focus on screening ages first

Low/ Medium HDI: ca 62% High/ Very High HDI: ca 33%

- More data needed: Building cancer registry capacity
- → Global policy should focus on improving early detection and treatment in LMCIs