

Informing breast cancer control priorities in Namibia



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International Agency
for Research on Cancer



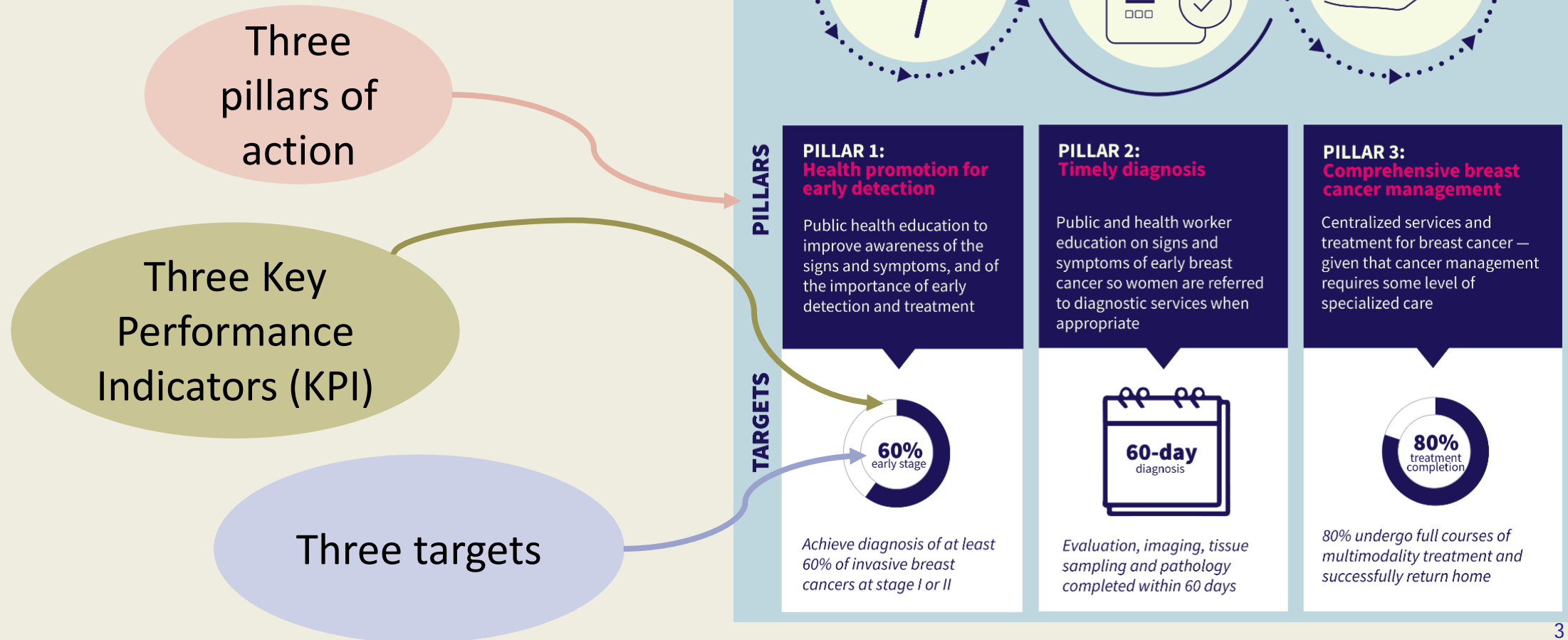
Introduction/Background/Motivation - Namibia

- Multiracial country (87% Black African, 6-7% Mixed ancestry and White) with large remaining inequities
- Breast cancer = 1st cancer in women
- Low 5-year survival after a breast cancer diagnosis: mortality/incidence ratio estimated to ~59% despite functional and low-cost diagnosis and treatment services



Introduction/Background/Motivation – Global Breast Cancer Initiative (GBCI)

GBCI = Initiative launched in 2021 by the **WHO** which aims to **reduce breast cancer mortality** worldwide



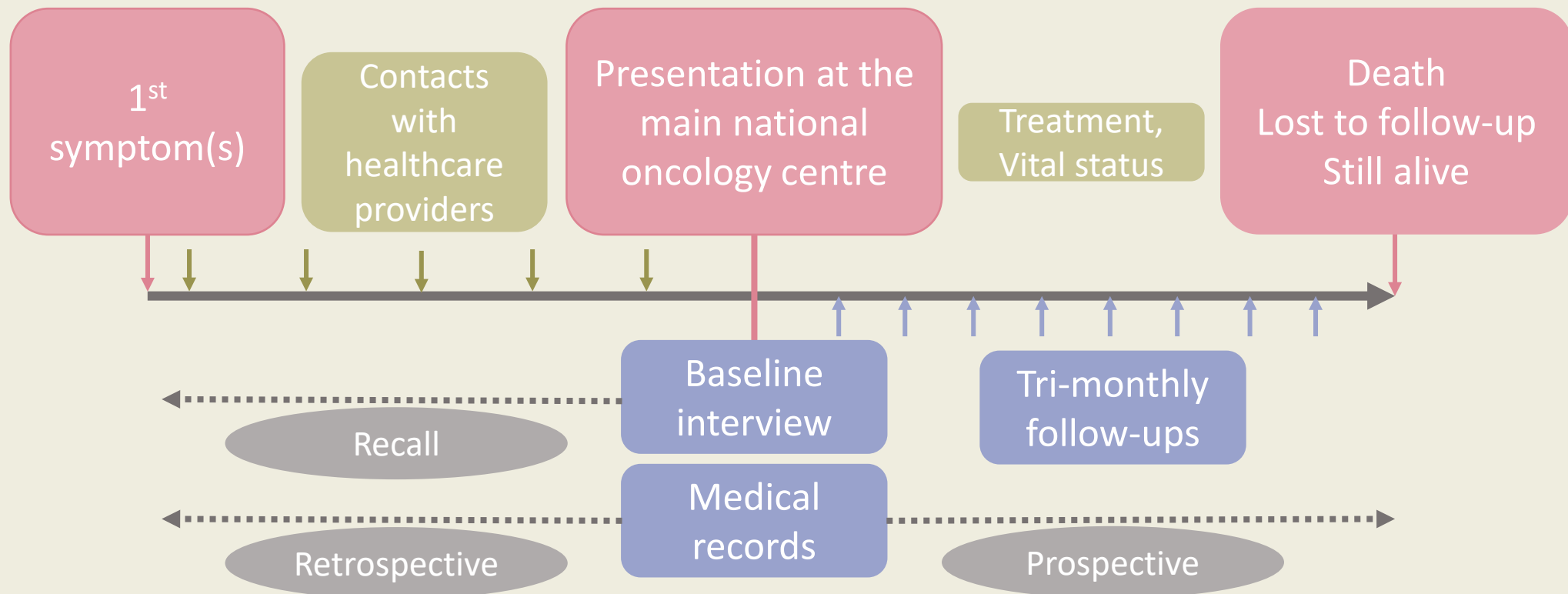
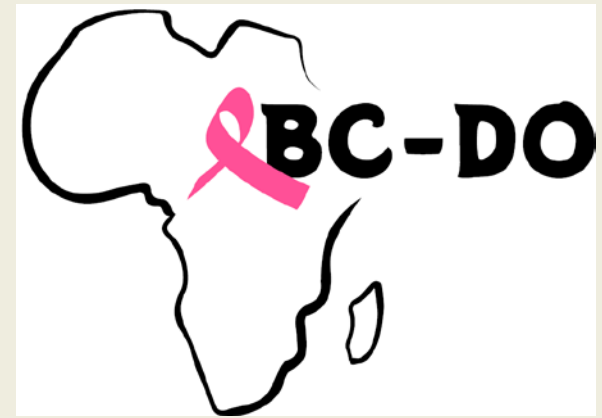
Objective

To identify **priority segments of the breast cancer journey** that need strengthening to reduce patient mortality in Namibia, through an assessment of the extent to which **GBCI pillars Key Performance Indicators** targets are met

Design

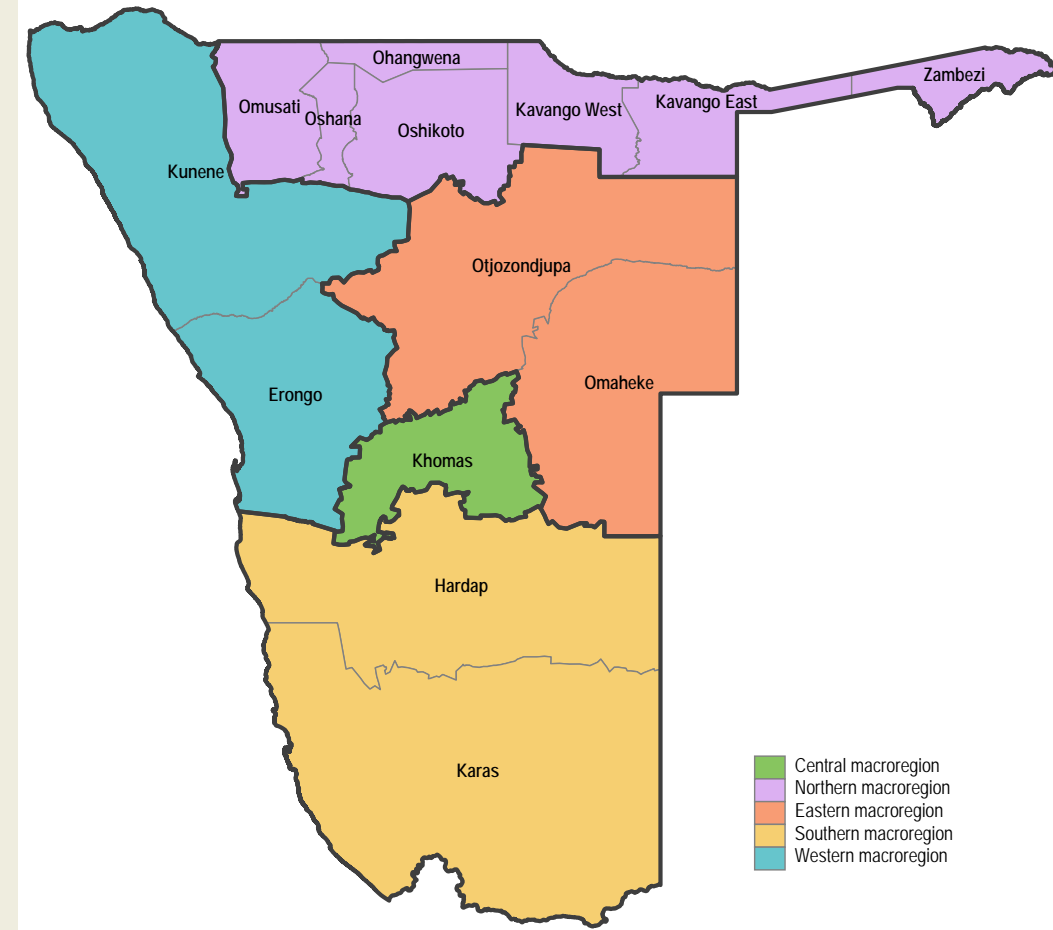
Population:

- Prospective cohort of **405 women** with **incident breast cancer**
- Recruited into **ABC-DO** in Namibia
- Between Sept. 2014 and Oct. 2016
- At presentation to the **main national public oncology centre** to receive treatment



Analysis

- Self-reported ethnicities aggregated into 3 races
- Namibian regions aggregated into 5 macro-regions
- **Cox models** to estimate 3-year overall survival
- **Summary statistics** of GBCI pillars KPIs
- By race and macro-region of residence



Results

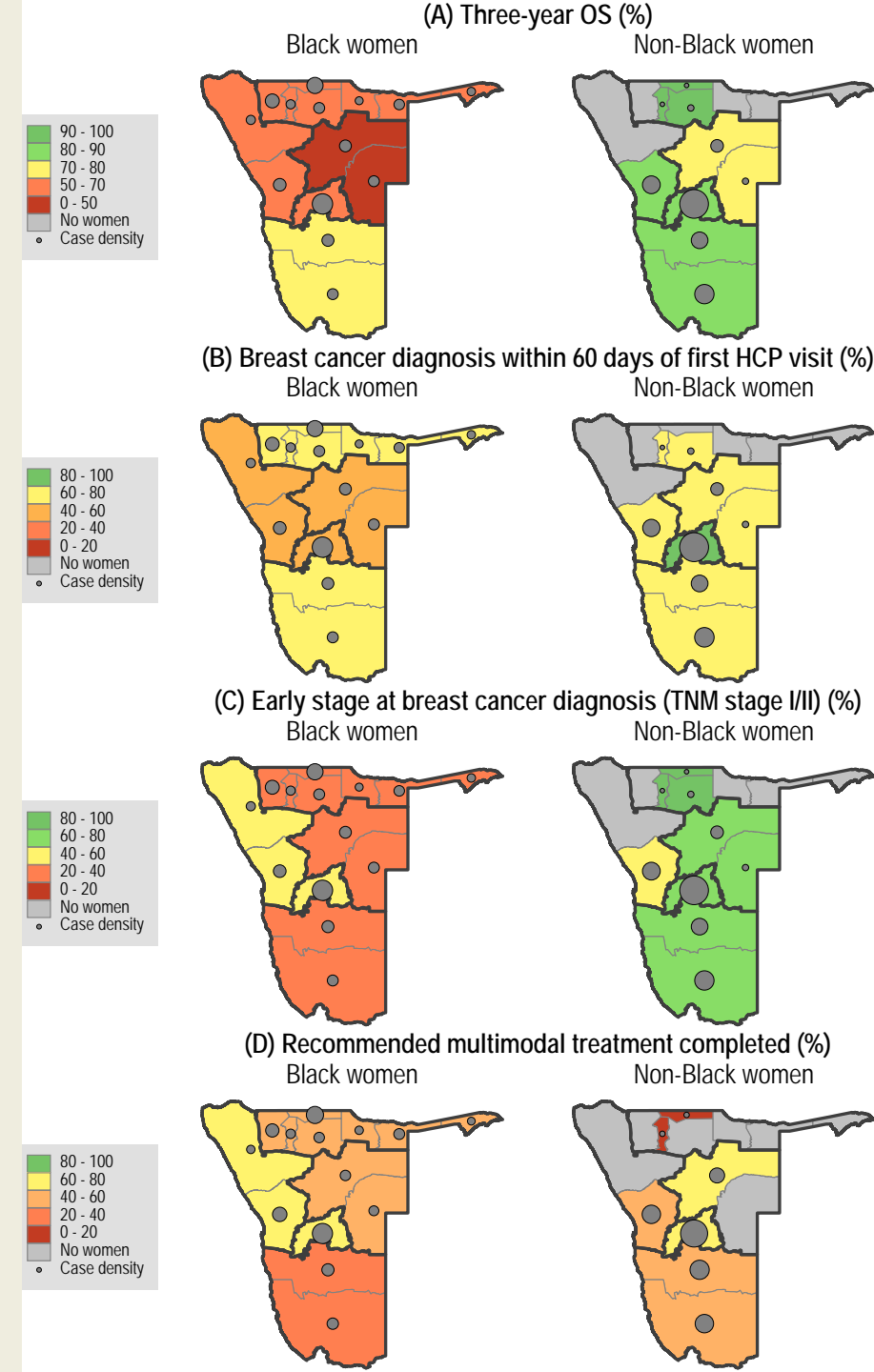
	Black (300)	Mixed ancestry (49)	White (56)
% Three-year overall survival	60	80*	89*
% Early stage at diagnosis target >60%	37	76*	75*
% Diagnosed timely target 100% <60 days	60	71	83*
% Women who completed surgery and chemotherapy target 80%	53	61	62

*: p-value <0.05 in comparison to Black women

➤ **Suboptimal 3-year survival and GBCI KPI estimates**

➤ **Estimates lowest in Black women**

➤ **Racial disparities across regions**



Discussion and Conclusions

Public health impact of this work:

1. Informs the Namibian MoH and Cancer Association on **key local issues** to strengthen breast cancer control
2. Provides a basis to decide on **priority interventions needed** to improve breast cancer survival at specific weak points in the cancer journey

What next? → Implementation of local **interventions** to address the identified issues:

- Targeting both the **community** and **healthcare providers**
- **Context-specific** and **accessible** to all women (address illiteracy, multiple languages)

Funding:

- **Current funder : US National Cancer Institute (R01)**
- Past funder: Susan G Komen

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Key take-home messages

- 1. Survival** after a breast cancer diagnosis is **suboptimal** in Namibia paralleled by **marked racial inequities** in accessing healthcare
- 2. Main priorities** to reduce breast cancer mortality in Namibia are to:
 - Shorten the precontact and diagnostic intervals
 - Strengthen multimodal treatment completion rates
 - Promote earlier diagnosis in Black Namibians