



Global Summit on International Breast Health and Cancer Control:

Improving Breast Health Care through Resource-Stratified Phased Implementation

Multidisciplinary Coordination for Curative Treatment

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MULTIDISCIPLINARY COORDINATION FOR CURATIVE TREATMENT



Alejandro Mohar, MD
10 / 16 / 2018
Seattle, WA



Presented by: Karla Unger-Saldaña

CONTENTS



- ❖ Cancer in LMIC
 - ❖ Mexican Health System in context
 - ❖ Multidisciplinary coordination
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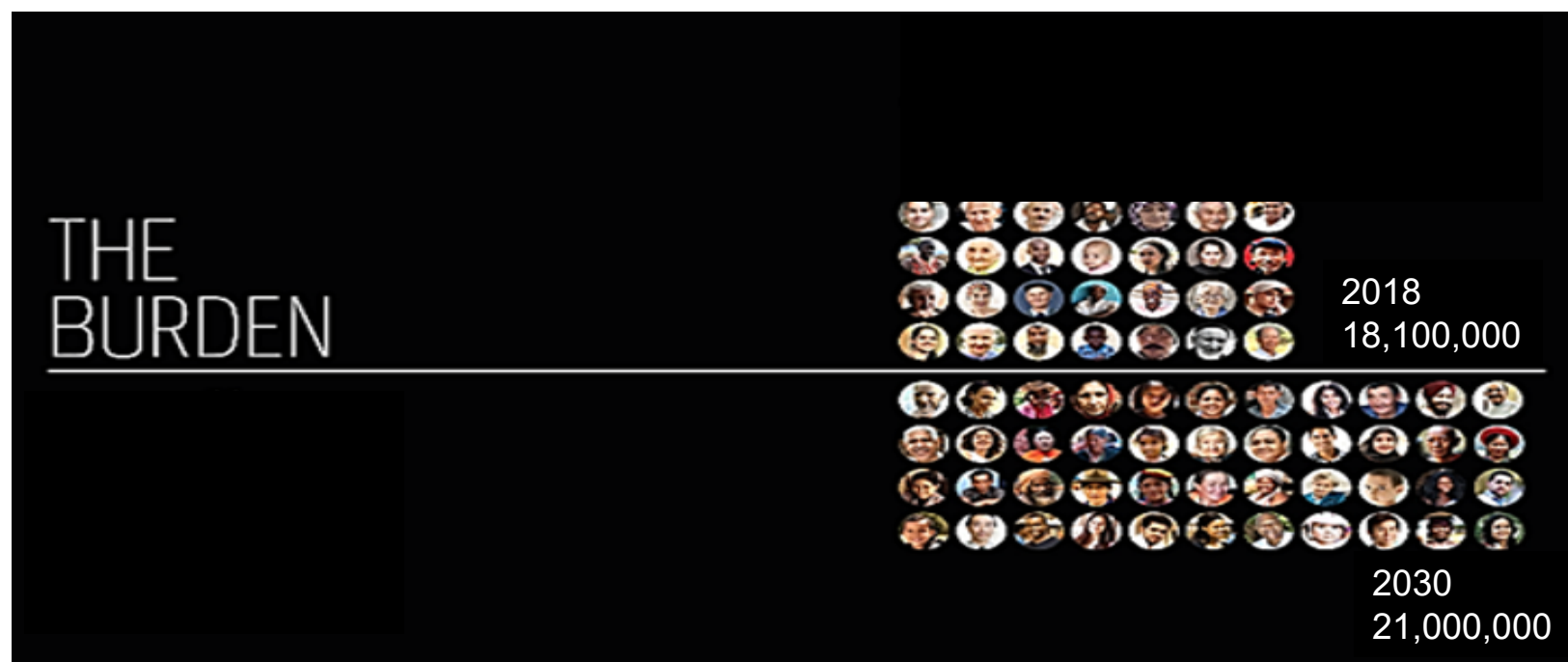
CONTENTS



- ❖ **Cancer in LMIC**
 - ❖ **Mexican Health System in context**
 - ❖ **Multidisciplinary coordination**
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TRANSITION IN CANCER, TWO FACTS:

1. Projected growth of new cases: 18.1 m (2018) → 21 m (2030)
2. 75% of future cancer burden will occur in low and middle income countries

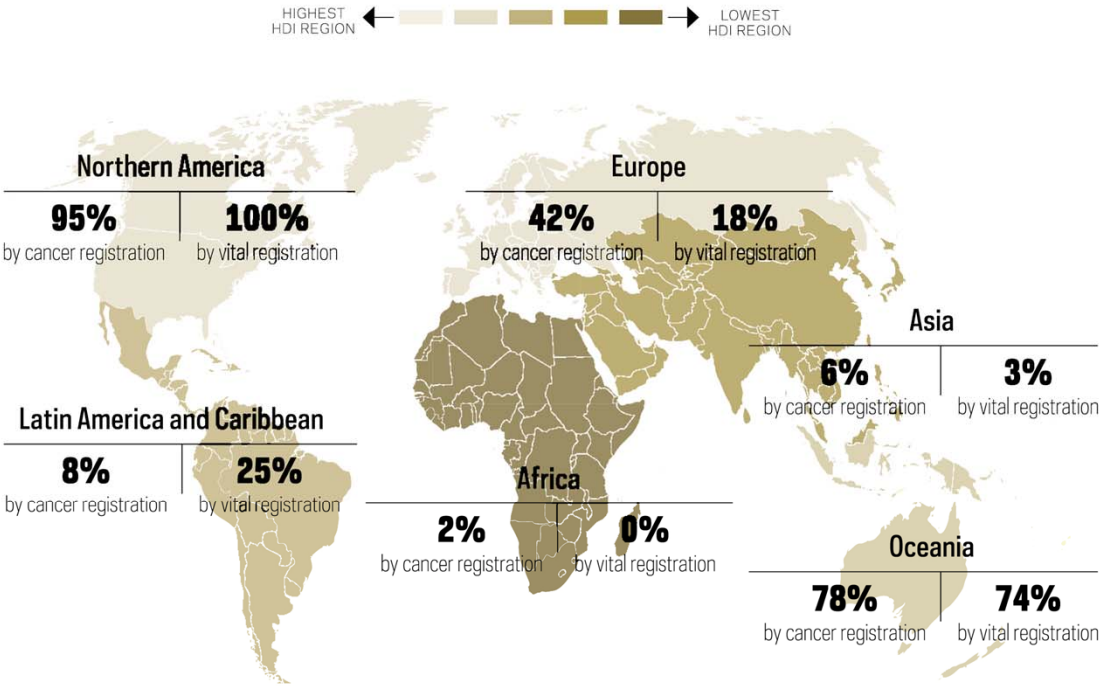


International Agency for Research on Cancer



CA J Clinicians, GLOBOCAN 2018

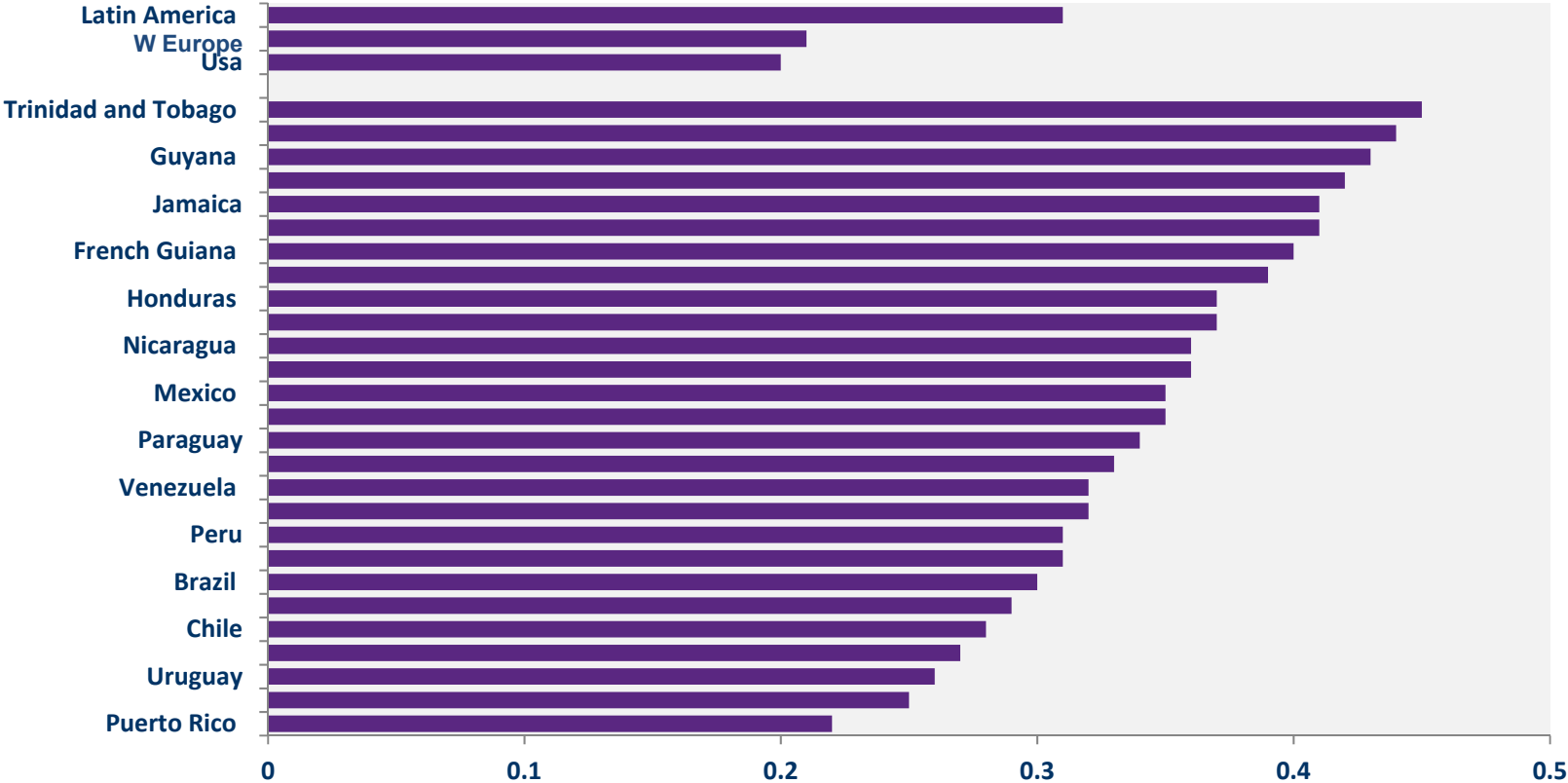
CANCER REGISTRIES IN THE WORLD



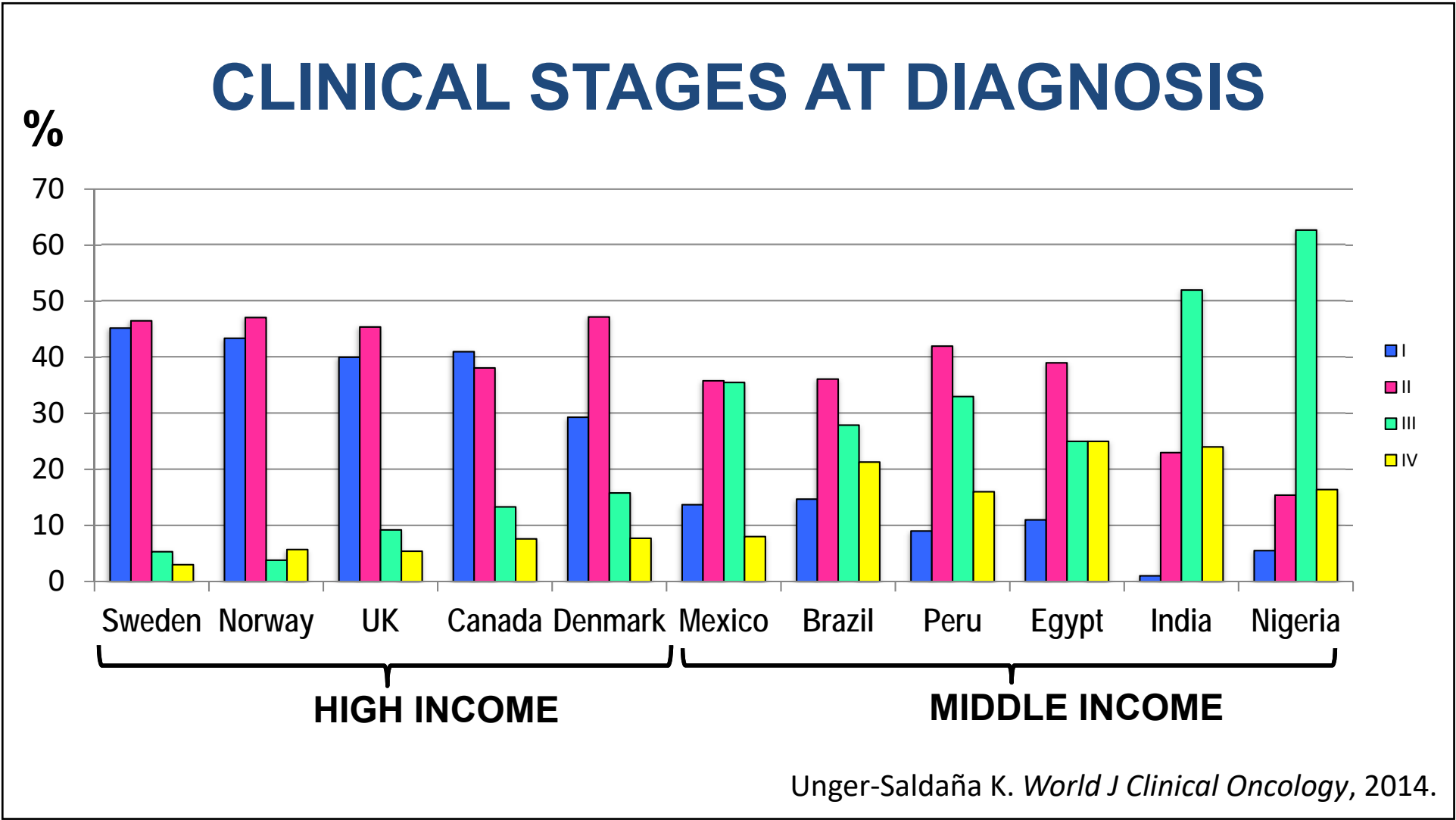
THE CANCER ATLAS

CANCER.ORG/CANCERATLAS
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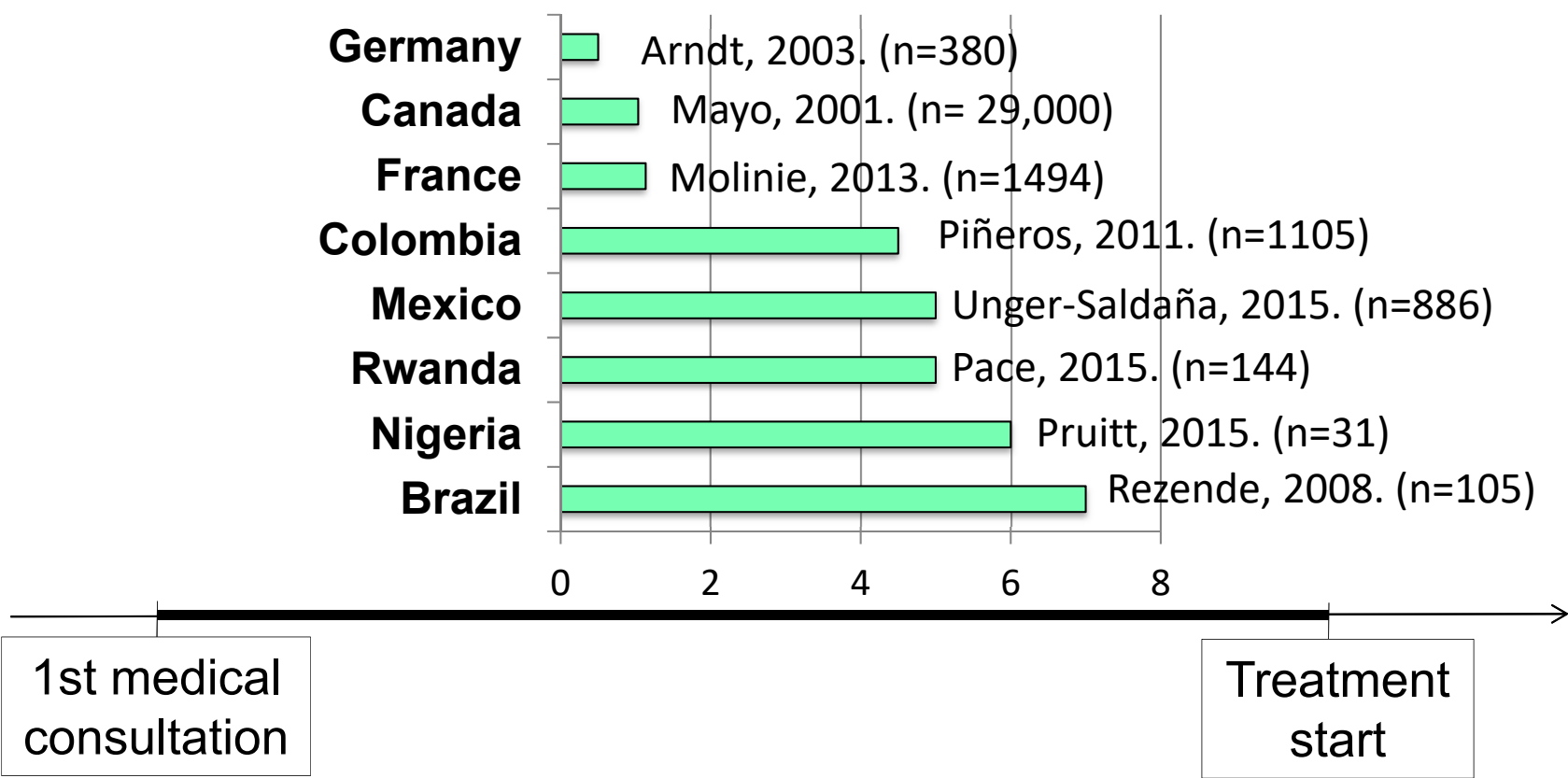
BREAST CANCER MORTALITY:INCIDENCE RATIO



BRAY & PIÑEROS, SALUD PUB MEX, 2016.

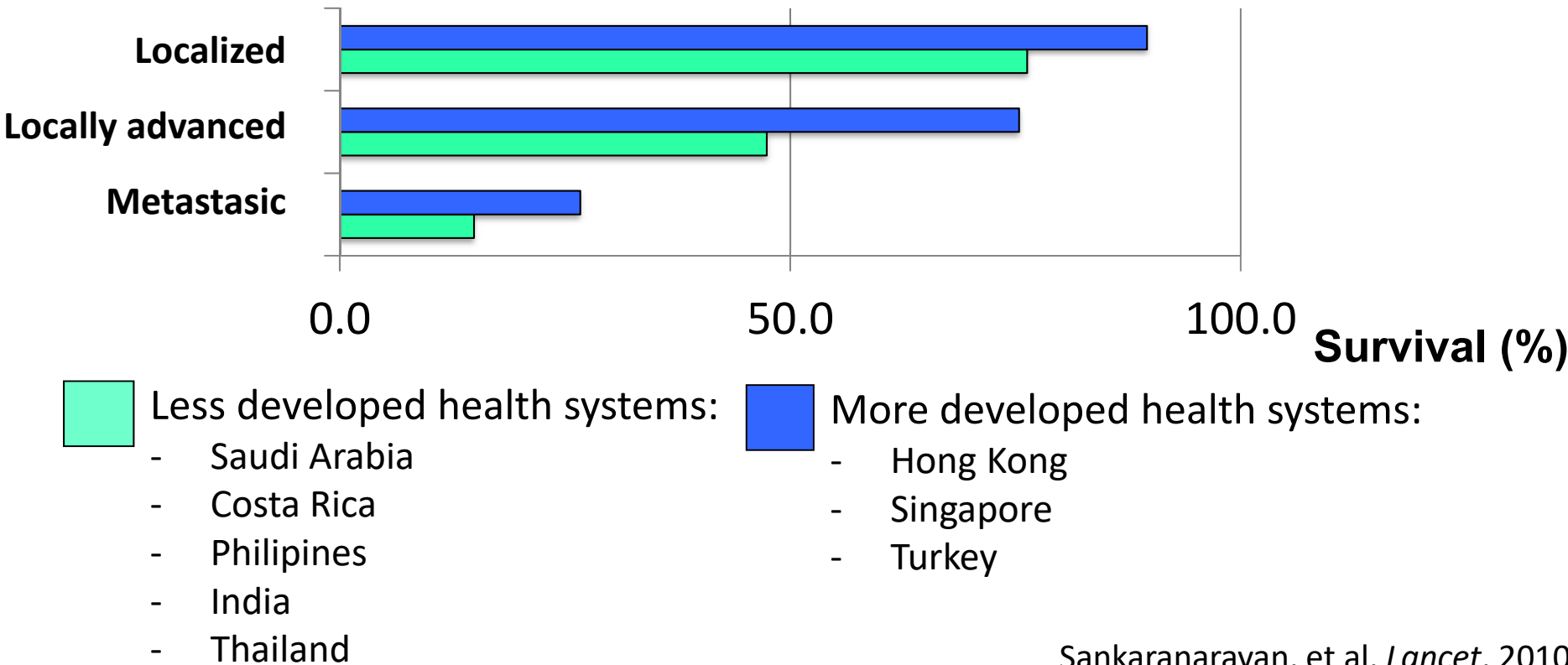


BC HEALTH SYSTEM INTERVALS



BC 5-YEAR SURVIVAL RATES

Clinical stage



Sankaranarayan, et al. *Lancet*, 2010.

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MEXICO

- 1,964,375 km²
- 131,000,000 inhabitants
- LE: 76.9 years
- ↑ Inequities
 - 6th Richest man in the World (70 billion USD)
 - 9 million: < 50 USD/month
 - 53 million: < 150 USD/month

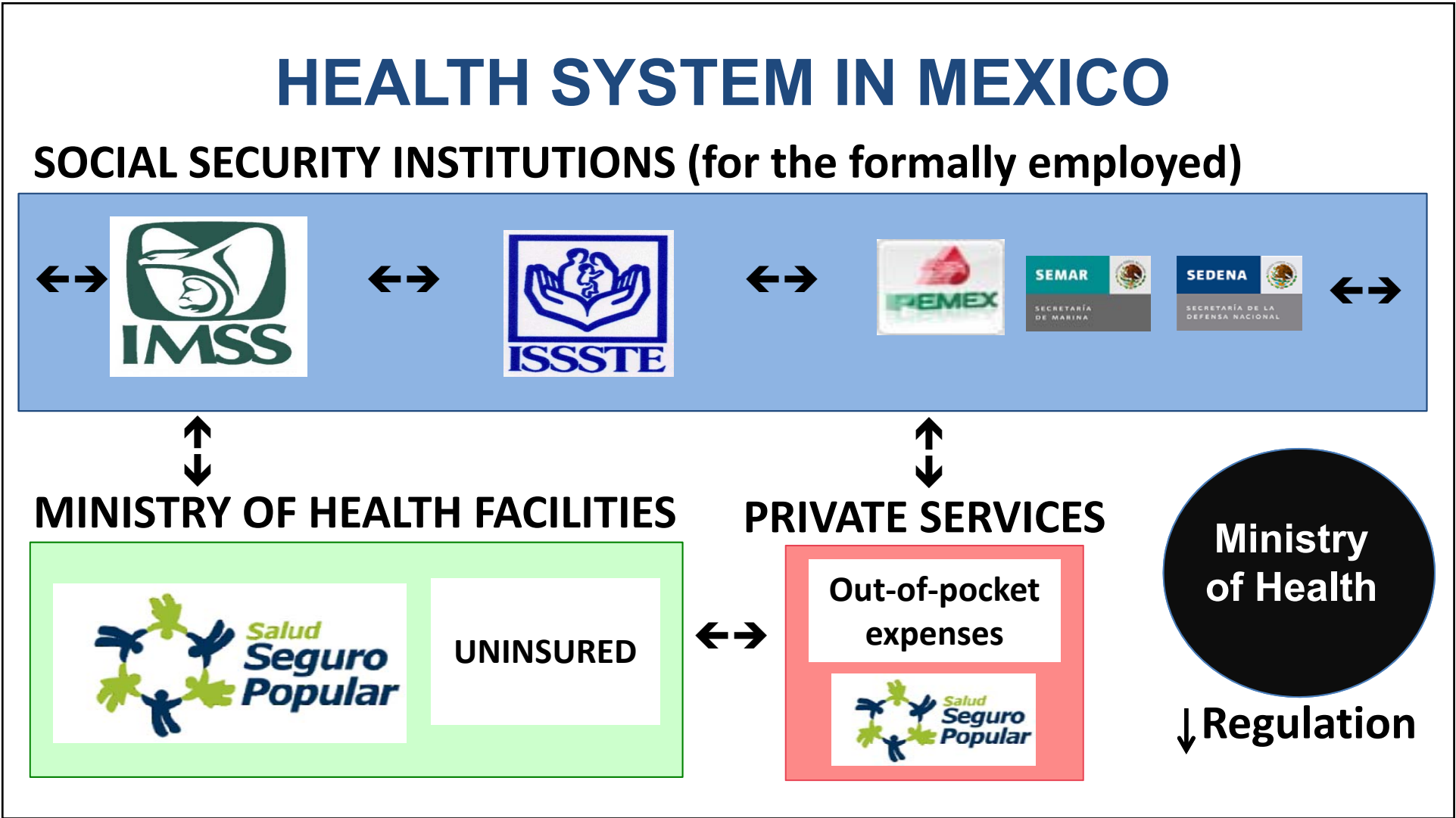




Table 6: National health spending and its sources, 2014 (continued)

	Total health spending per capita (US\$)	Total health spending as % of GDP	Government health spending as % of total	Prepaid private spending as % of total	Out-of-pocket spending as % of total	Development assistance as % of total
Colombia	975	7.2%	71.9%	9.5%	15.3%	3.2%
Costa Rica	1,418	9.3%	73.1%	1.8%	25.0%	0.0%
Ecuador	1,071	9.2%	48.8%	2.2%	48.5%	0.5%
Mexico	1,088	6.3%	51.7%	4.2%	44.0%	0.1%
Panama	1,743	8.00%	72.50%	4.50%	22.30%	0.80%
Paraguay	863	9.8%	45.6%	4.6%	49.3%	0.5%
Peru	626	5.20%	63.30%	6.30%	30.00%	0.40%
Study upper-middle-income	1,163	7.57%	58.73%	8.31%	32.31%	0.64%

* Total health spending is 4 times lower than the OCDE countries average.





FUND FOR PROTECTION OF CATASTROPHIC HEALTH EXPENSES

TUMOR	YEAR OF INCLUSION
Uterine cervix	2003
Breast	2007
Children /adolescents	2008
Non-Hodgkin’s lymphoma	2011
Testicular	2011
BMT	2011
Prostate	2011
Colo-rectal	2015
Ovary	2016

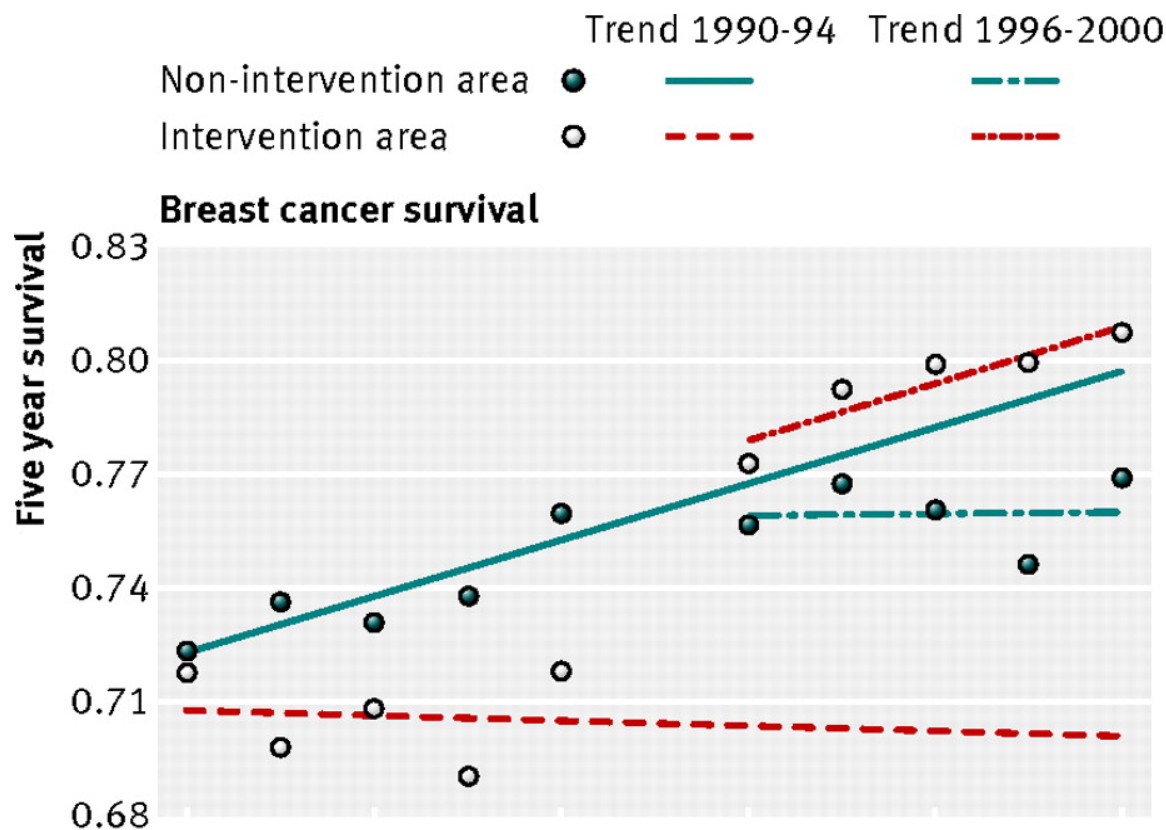
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 - ❖ **Multidisciplinary tumor boards**
-

EFFECT OF MULTIDISCIPLINARY TUMOR BOARDS

- Scotland
- n = 13,722
- Non-random interv.
- 1995: inclusion of multidisc. care
- Retrospective cohort
- Time series analysis



Kesson et al. BMJ 2012;344:bmj.e2718

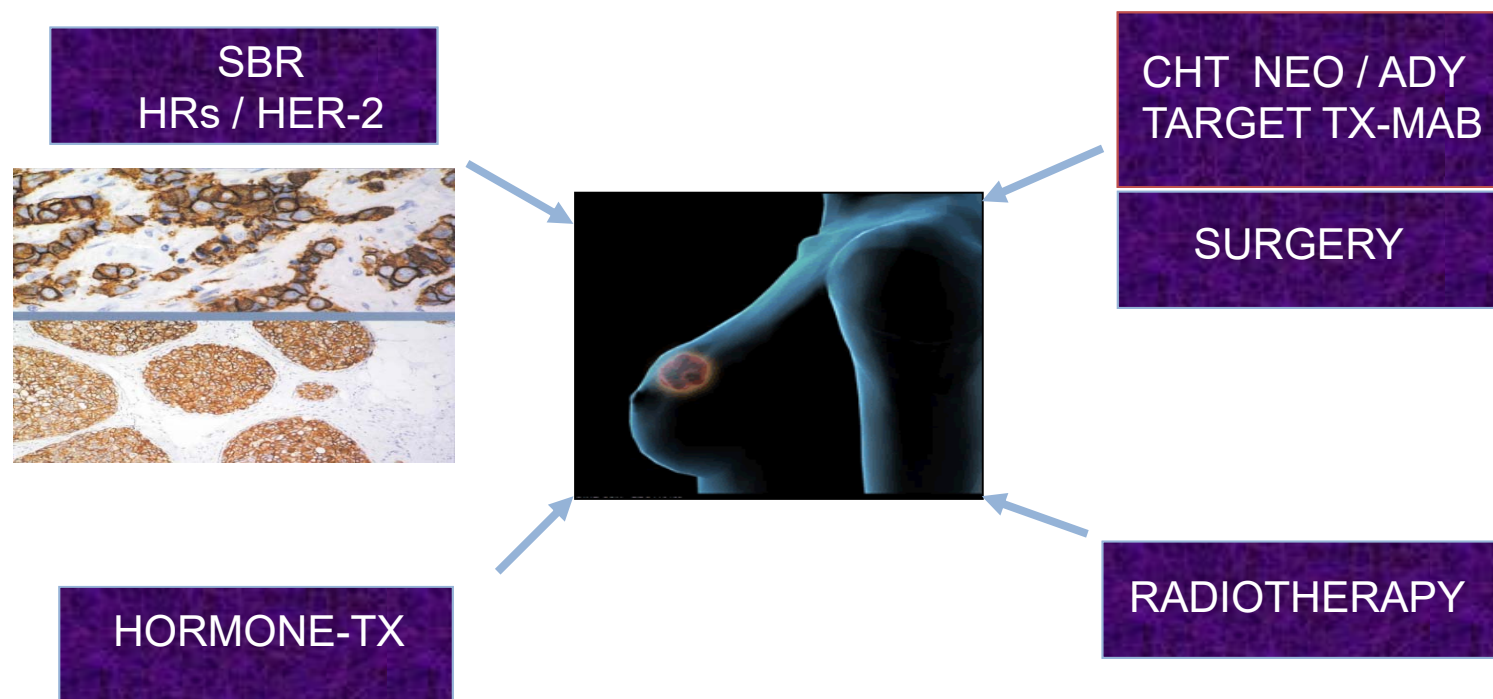
GLOBAL TUMOR BOARDS



- **Global Cancer Institute**
- **500 participants**
- **25 LMIC**
- **37 USA experts**

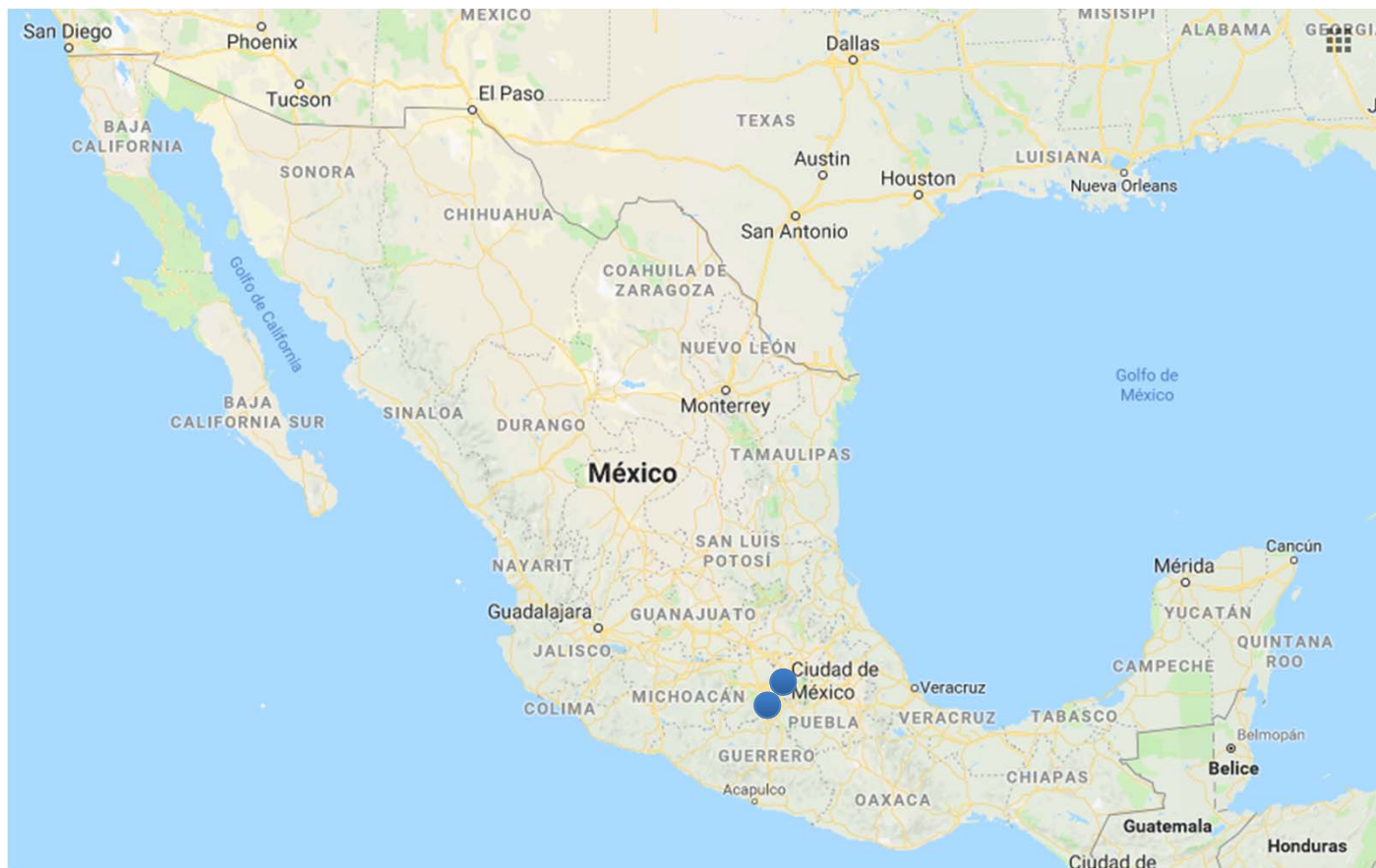
St. Louis *et al.* ASCO, 2017. Abstract 6556.

MULTIDISCIPLINARY TREATMENT IN MEXICO



***** Seguro Popular - NCCN & St. Gallen adapted guidelines**

BC CLINICAL DATA IN MEXICO



Mexico:
Pop. 130 millions

Mexico City &
Metropolitan Area:
Pop. 22 million

3 institutions (SP):
- INCAN
- FUCAM
- COE

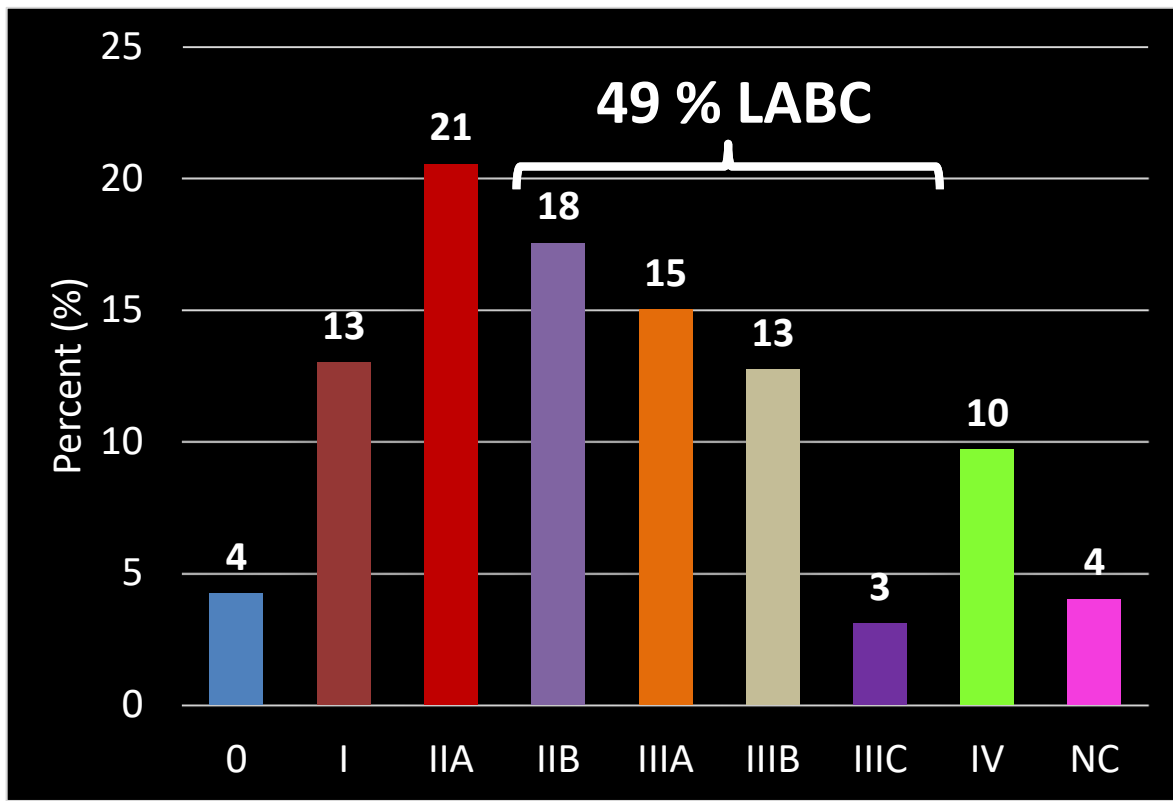
BC dx 2008 -2013
n = 10,433

CLINICAL RESULTS

Variable	Num (%)
Age (Mean, DE)	52.5±12.2
Presentation:	<i>n</i> =4651
- Screening	883 (8.5)
- Symptoms	3,768 (91.5)
Tumor size (mm) (Median, range)	<i>n</i> =7,076 35 (20-50)
TYPE OF SURGERY	<i>n</i> =8,230
Radical	5,481 (66.6)
Conservative	2,749 (33.4)
SYSTEMIC TX	<i>N</i> =6,878
Adjuvant	3,422 (49.8)
Neoadjuvant	2,941 (42.8)
Palliative	515 (7.5)

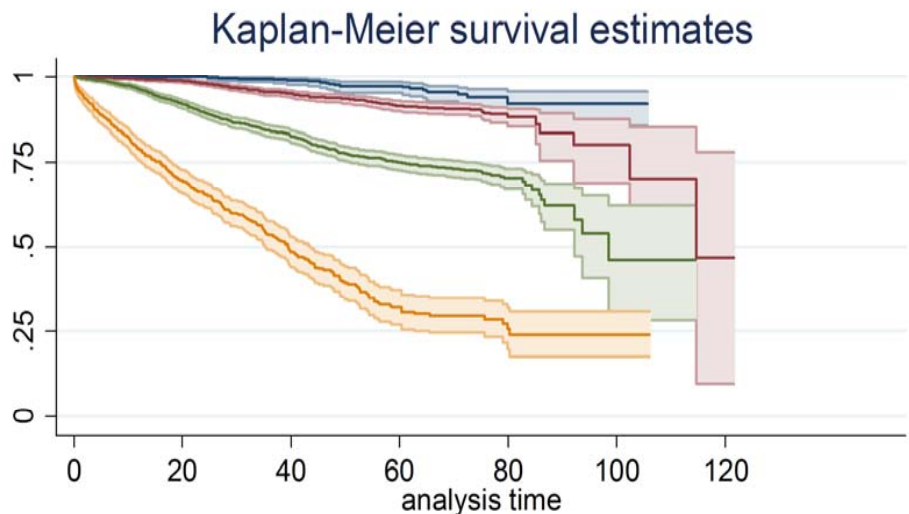
DISTRIBUTION BY CLINICAL STAGE

(3 institutions: INCAN, COE, FUCAM 2008 - 2013)



n = 10,433

OVERALL SURVIVAL BY CLINICAL STAGE



CLINICAL STAGE	OVERALL 5-YEAR SURVIVAL
EARLY D.	94.86
LOC. ADV.	78.31
METAST.	27.78

Number at risk

I	881	(13)	329	(8)
II	2252	(110)	878	(33)
III	2055	(370)	759	(57)
IV	727	(328)	89	(25)

95% CI

95% CI

95% CI

95% CI

I

II

III

IV

CLOSING REMARKS

❖ Breast Cancer

- ❖ NATIONAL PUBLIC HEALTH PROBLEM → LATE DX

 - ❖ *An epidemic within an epidemic...*

- ❖ THE COSTS WILL BECOME UNSUSTAINABLE (\$ 20,000 USD/ patient)

❖ Proposal: collaborative effort

- ❖ PRIMARY & SECONDARY PREVENTION

- ❖ MULTIDISCIPLINARY TREATMENT

- ❖ PILOT IMPLEMENTATION PROJECTS

- ❖ LONG RUN → **National Cancer Control Plan**

Dr. Mohar:

- **Elected member of the UICC
Board of Directors 2018-2021**



Thank you

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Breast Health
Global Initiative

Global Summit on International Breast Health and Cancer Control:

Improving Breast Health Care through Resource-Stratified Phased Implementation



 BHGIatFredHutch

 BreastHealthGlobalInitiative

 **FRED HUTCH**
CURES START HERE™

 *susan g. komen.*

 **BREAST
CANCER
INITIATIVE 2.5**

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