

Cancer Care Cost-Effectiveness in Africa

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Editorial Note

EDITORIAL NOTE

Developed countries spend a fortune on health care compared to developing countries. However, concerns have recently been raised about the ever increasing cost of cancer care even in the most affluent countries in the world [1]. Cancer therapy is one of the most expensive aspects of health care as it embraces screening, diagnosis, treatment, surveillance and palliative measures [2]. Screening involves the use of evidence based methods to detect early cancers. Diagnostic methods have evolved into very complex radiological, nuclear and molecular testing [3]. Treatment comprises special and complicated surgeries, chemotherapy and targeted therapies as well as radiation therapy at the initial stages of diagnosis or as palliative options. Surveillance includes schedules doctor visits with associated blood test, numerous radiological and nuclear imaging [4]. Palliative care involves not only the use of pain medication but may involve any of the above interventions that may improve quality of life.

New medical interventions such as imaging, Intensity Modulated Radiotherapy, Cone beam radiotherapy improve health outcomes but at relatively high cost. The economic impact of cancer care is now a reality and is expected to continue to raise causing concern across all countries wealthy or poor [5]. Unlike most countries that share the cost between government and insurance partners, in Africa, most patients and their families have to bear the cost of treatment from already meager resources [6]. This can be attributed to the low percentage of resources allocated health budgets and the fact that cancer control is the least amongst the priority list competing with communicable diseases. But then, due to the devastating nature of cancer, any expenditure that may improve survival and decrease suffering is mostly considered appropriate by society without analyzing the economic impact and absolute benefit. There are various components of health economic evaluations that compare alternatives of treatment to standard choices. Of course, there are various limitations in applying economic analysis to oncology e.g. is it worth spending tens of thousands of dollars per patient for a three month increase in survival, not to talk about the cost of managing the associated toxicities arising from these therapies? [7].

The universal declaration of Human rights Article states that everyone has a right to share on scientific advances and its benefits but how do we do that if it cost us too much? [8,9]. How do we appropriately allocate our meager state health resources to reduce suffering from cancer especially with the looming cancer burden that is expected to befall developing countries within the next decade? Below is a table to analyze the economic concepts of health expenditure [10]

CONCLUSION

The burden of cost affecting effective cancer management could be lifted if our governments generate more interest in cancer control. With early presentations, treatments both basic and advanced become more cost effective. The quality of palliative care in advanced cancer cannot be ignored as it is an essential component of cancer management. We need the most cost effective treatments as the final days of life are the most expensive aspect of cancer care. At least basic but effective cancer treatments should be fully funded, basic radiation therapy and imaging/diagnostic equipment ensured to run efficiently by skilled personnel to derive the most benefit.

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