

Multiple Myeloma in Colombia

Supporting early and equitable access
to care to improve patient outcomes

Sponsored by



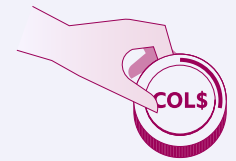
51.8m
Population¹



7%
Government funding
allocated to health,
as a % of GDP²

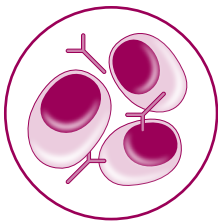


45.4% Contributory regime
49.5% Subsidiary regime
4.3% Special scheme for select occupations
0.8% Uninsured

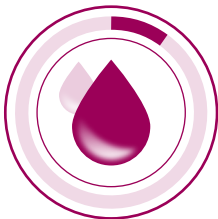


28.1%
of total expenditure on
health care comes from
private sources⁴

What is multiple myeloma?



It is an incurable blood cancer that typically **originates in the bone marrow.**



Accounts for 10% of all blood cancers and is the **2nd most common blood cancer globally.**

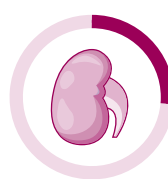


It is **more common among older adults.** The median age of multiple myeloma patients at presentation in Colombia is 67 years.⁵

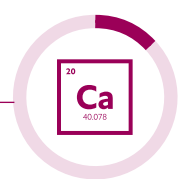
Signs and symptoms

Prevalence among myeloma patients in Colombia⁶

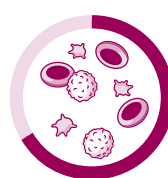
Kidney failure
26.6%



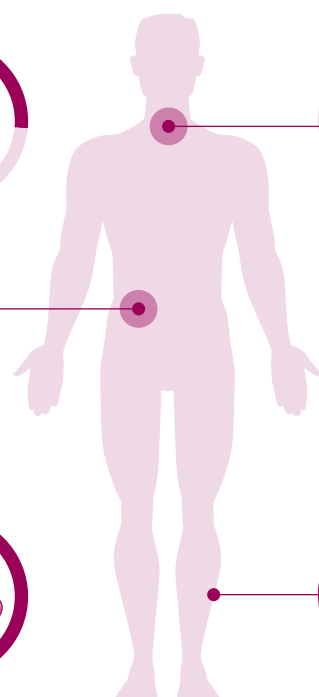
Hypercalcemia
13.1%



Anemia
66.4%



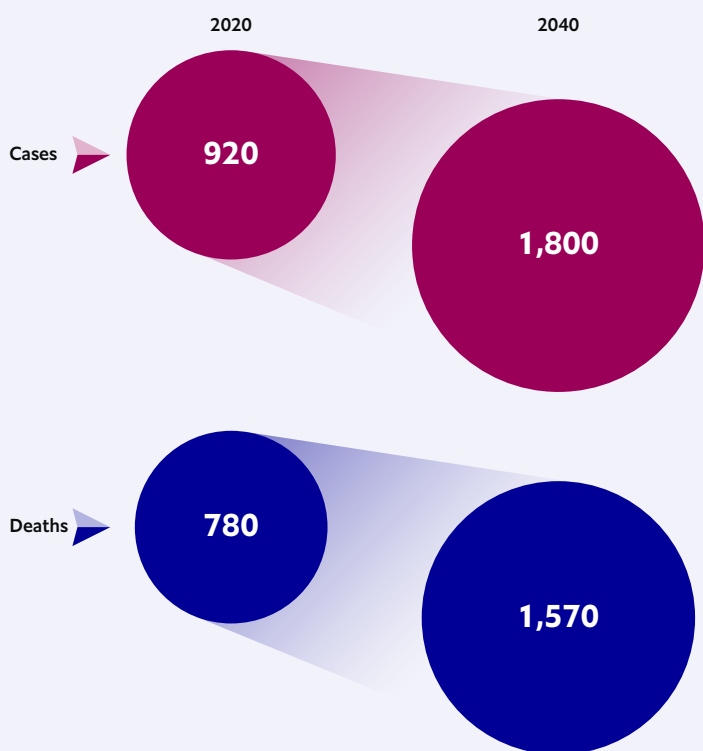
Bone disease
79.5%





Burden of Myeloma on the rise

Cases and deaths in Colombia are projected to double by 2040.⁷



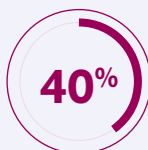
Access to care



The average time between a cancer treatment receiving regulatory approval in Colombia to the **treatment being available to patients through the public health system**.⁸



Almost 60% of patients are **diagnosed with advanced disease (Stage III)**⁵



Of patients ≤65-year-old, that were transplant-eligible, **less than half (40%) received an autologous stem cell transplant**⁵



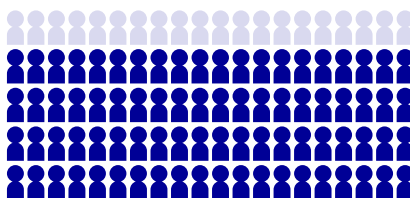
The average time to **access a transplant** is 8 months.⁹

Survival

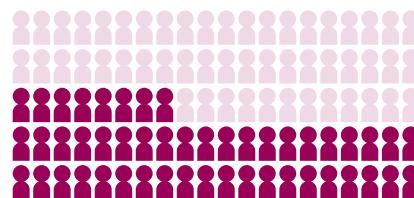
A study of 1293 patients with myeloma across Latin America highlighted **stark differences in outcomes** between patients receiving care in the public and private sectors.

The 5-year overall survival rate in patients treated in the private sector was almost twice the rate of those treated in the public sector.¹⁰

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



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



¹ Economist Intelligence Unit. Data Tool [Internet]. London: The Economist Intelligence Unit. Available from: <https://data.eiu.com/>.

² The World Bank. Current Health Expenditure Data Tool [Internet]. France: The World Bank. Available from: <https://data.worldbank.org/indicator/SH.XPD.CHEX.GD.ZS>

³ Colombian Ministry of Health and Social Protection. Health insurance figures [Internet]. Available from <https://www.minsalud.gov.co/proteccionsocial/Paginas/cifras-aseguramiento-salud.aspx>

⁴ World Health Organization. Global Health Expenditure database - Government schemes and compulsory contributory health care financing schemes % Gross domestic product (GDP) [Internet]. Available from: <https://apps.who.int/who/databases/Select/Indicators/en>

⁵ Abello V, Mantilla WA, Idrubo H, et al. Real-World Evidence of Epidemiology and Clinical Outcomes in Multiple Myeloma. Findings from the Registry of Hemato-Oncologic Malignancies in Colombia, Observational Study. Clin Lymphoma Myeloma Leuk. 2022;22(6):e405-e413

⁶ 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.

⁷ World Health Organization International Agency for Research on Cancer [Internet]. Cancer Tomorrow. Available from: https://gco.iarc.fr/tomorrow/en/dataviz/trends?cancers=35&age_start=12

⁸ FIFARMA. Patients W.A.I.T Indicator 2022 Survey [Internet]. Available from: https://fifarma.org/wp-content/uploads/2022/12/FIFARMA-WAIT-Indicator-2022_Report_vFinal-30SEP2022-4.pdf

⁹ ACHO. Impact of Multiple Myeloma: the Unmet Therapeutic Needs of Relapsed and Refractory Patients [Internet]. Available from: <https://acho.com.co/impacto-mieloma-multiple-pacientes-recaida/>

¹⁰ Peña C, Riva E, Schutz 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