

Assessing Access to Innovative Oncology Medicines in Latin America: Availability and Time-to-Access Across Health Systems

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Objectives

Innovative oncology medicines have transformed cancer care globally, yet patients in Latin America continue to experience delayed and uneven access. This study aimed to assess real-world access to innovative oncology medicines across Latin American health systems by measuring availability and time to access, and by comparing regional performance with selected European benchmarks.



Methods

Across-sectional descriptive analysis was conducted including 159 innovative oncology medicines approved globally between 2014 and 2024. Access was measured across ten Latin American countries using a harmonized framework that captured real-world availability beyond regulatory approval. Local extended availability was defined as access through full public coverage, limited public coverage, or private market access. Data were collected in collaboration with national pharmaceutical associations, innovative pharmaceutical companies, and publicly available regulatory and coverage sources. Descriptive analyses were performed to compare access levels and timelines across countries and against available European oncology datasets.



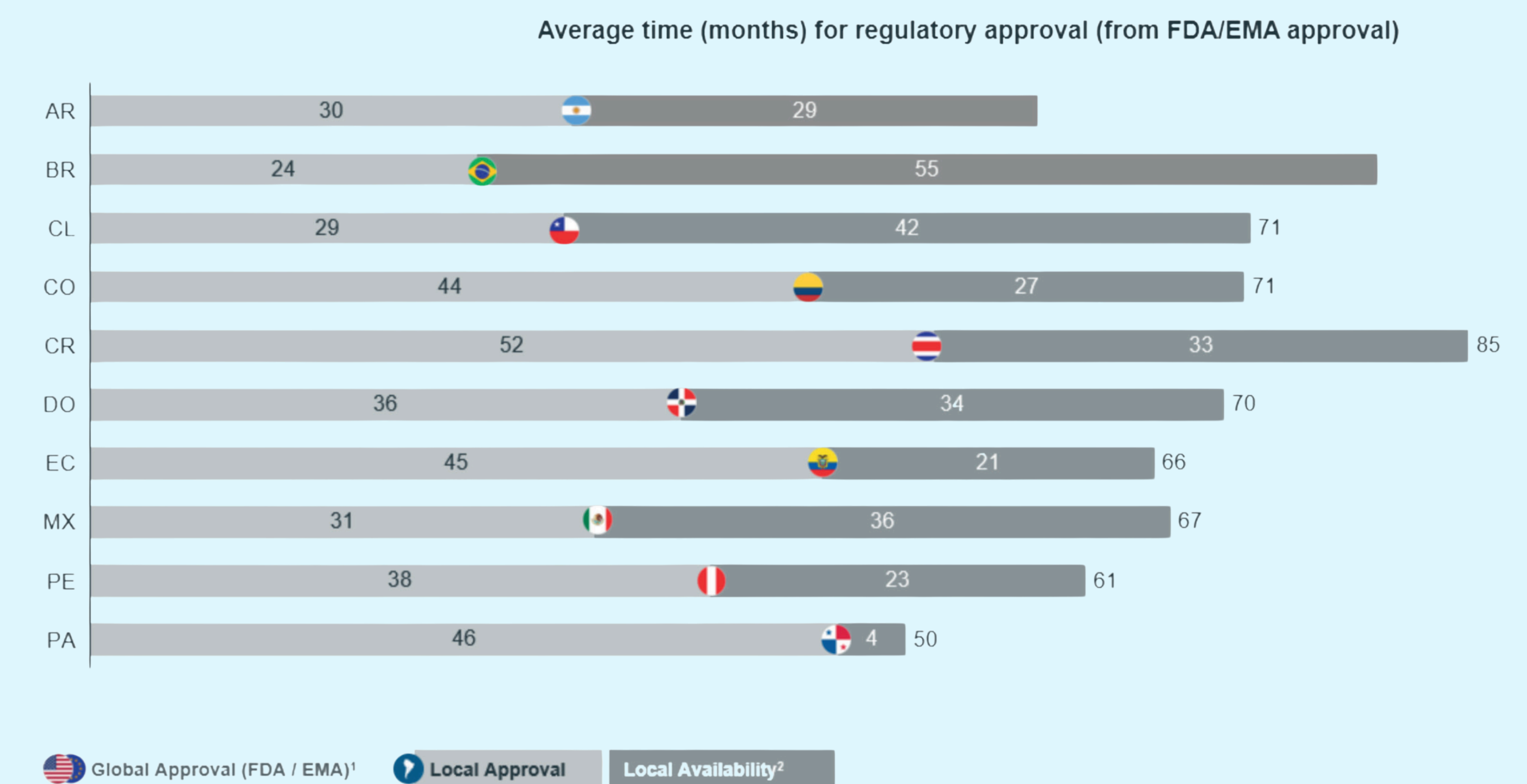
Results

Average extended availability of innovative oncology medicines across Latin America reached 25%, with marked variation between countries. Argentina showed the highest availability (40%), while the Dominican Republic presented the lowest (11%). Time from first global approval to local access ranged from 21 to 56 months. In comparison, available European oncology datasets demonstrated higher average availability and shorter access timelines than all Latin American countries included in the analysis.

Conclusions

Access to innovative oncology medicines in Latin America remains limited and delayed, reflecting structural barriers within health systems rather than a lack of innovation. Fragmented access pathways, prolonged decision-making processes, and constrained financing contribute to persistent inequities in patient access. Strengthening coordinated access strategies, improving system efficiency, and recognizing timely access to innovation as a driver of better health outcomes are essential to closing the oncology access gap in the region.

Time to availability (2014 - 2024)



Local availability (2014 - 2024)

