ACCEPTANCE CODE:

HPR1

Availability of Innovative Cardiometabolic Medicines in Latin America: Implications for Health System Efficiency and Access

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Objectives

To assess access to innovative cardiometabolic medicines across Latin America and provide evidence to support value-based health system decision-making.

Methods

Thirty-eightinnovative cardiometabolic medicines approved globally between 2014 and 2024 were analyzed across ten countries. Availability and time-to-access definitions were standardized. Extended availability included full, limited, and private access. Data were collected in collaboration with national associations, research-based companies, and public sources. Descriptive quantitative analyses were conducted.

Results

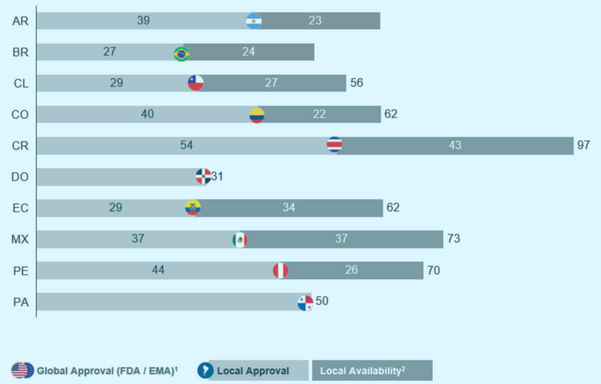
Average extended availability reached 23% of those globally approved, ranging from 8% in Brazil to 39% in Argentina. Time to availability varied between 22 and 43 months. Due to the absence of comparable international datasets, analyses focused on regional performance.

Conclusions

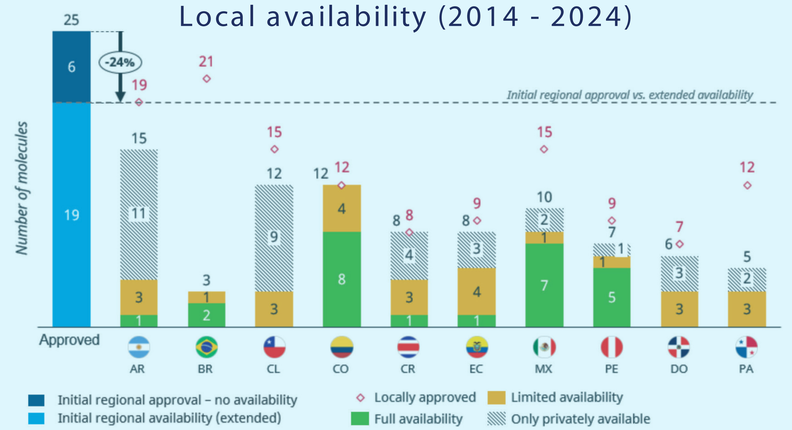
Despite the growing burden of cardiometabolic diseases, access to innovative treatments remains delayed and uneven. Addressing regulatory, HTA, and budgetary barriers is critical to improve system e ciency and accelerate patient access to high-value therapies.

Time to availability (2014 - 2024)

Average time (months) for regulatory approval (from FDA/EMA approval)



Local availability (2014 - 2024)



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Recommended ISPOR Track: Health Policy / Cardiometabolic Disorders