



ELEVATING LUNG CANCER CARE IN THE UAE

Advancing Equity, Early Detection & Precision Oncology

EXECUTIVE SUMMARY

The United Arab Emirates has made significant strides in lung cancer care, offering broad access to advanced diagnostics, targeted therapies, and immunotherapies through both public and private healthcare systems. Major emirates like Abu Dhabi and Dubai have well-equipped oncology centers, and routine testing for EGFR, ALK, and PD-L1 is available. However, screening programs are lacking, late-stage diagnosis remains common, and disparities exist in biomarker testing and therapy access between emirates and between nationals and expatriates. As an Advanced-level system, the UAE must now unify lung cancer care across regions, strengthen early detection infrastructure, and build national outcome monitoring frameworks.

INTRODUCTION

Lung cancer is a leading cause cancer-related mortality in the UAE, with increasing incidence among both nationals and the large expatriate population. Although smoking rates are declining among Emirati males, risk remains high due to waterpipe use, air pollution, occupational exposures. The UAE has embraced precision oncology, with broad access to first- and second-generation EGFR TKIs, ALK inhibitors, and immunotherapies pembrolizumab and nivolumab. Molecular testing is available in public and private hospitals, and coverage through Thiga and private insurers has improved.

Despite this progress, **no national lung** cancer screening program exists, and care access, insurance coverage, and data systems remain fragmented across emirates and healthcare sectors. Coordinated national policies are needed to ensure that advanced capabilities translate into improved early diagnosis, equity, and survival.

CURRENT SITUATION

The UAE health system is divided between **federal oversight and emirate-level authorities**, with Dubai Health Authority (DHA), Department of Health-Abu Dhabi (DoH), and Ministry of Health and Prevention (MoHAP) governing different regions. Advanced cancer diagnostics and therapies are available at leading hospitals like Cleveland Clinic Abu Dhabi, Tawam Hospital, Sheikh Shakhbout Medical City, and Dubai Hospital.

While Emirati citizens benefit from comprehensive public coverage (e.g., Thiqa in Abu Dhabi), expatriate access is dependent on private insurance policies. Biomarker testing is increasingly routine, but implementation of **HER2, NTRK, RET**, and re-biopsy at progression is inconsistent. Data on stage-at-diagnosis, mutation prevalence, and survival remains limited.





LUNG CANCER IN THE UAE

Key Issues and Policy Recommendations

Pillar	Fact	Barrier	Policy Recommendations
Infrastructure	Major cancer centers offer full diagnostics and molecular profiling	but capacity in smaller emirates and public hospitals is still limited.	Expand diagnostic access and create a national oncology network to ensure service parity.
Access to Treatment	UAE provides access to most EMA/FDA-approved lung cancer drugs	but private insurance restrictions affect expatriate access and second-line therapy uptake.	Harmonize coverage policies and create public-private reimbursement schemes for all residents.
Research & Innovation	UAE is expanding clinical research through national centers	but lung cancer trials are limited and registry participation is low.	Establish a national cancer research platform with incentives for lung cancer trials and data sharing.
Awareness & Education	Anti-smoking and cancer awareness campaigns are active	but lung cancer symptoms and screening awareness remain low, especially among non-smokers.	Launch lung cancer-specific awareness initiatives focusing on both nationals and migrant workers.
Survival Rates	Outcomes have improved with access to targeted agents	but survival remains suboptimal due to late-stage presentation.	Link survival gains to early detection and improve patient referral pathways in primary care.
Early Detection & Palliative Care	Some emirates offer opportunistic LDCT	but there is no structured national screening program or referral protocol.	Implement a national LDCT screening strategy targeting high-risk Emiratis and long-term residents.
Biomarker	EGFR, ALK, and PD-L1 are routinely tested in major centers	but HER2, RET, and re-biopsy at relapse are inconsistently applied.	Mandate standardized reflex testing panels and progression re-biopsy through updated guidelines.
Clinical Guidelines	UAE follows NCCN/ESMO-aligned protocols	but application varies across institutions and insurers.	Develop unified national lung cancer care guidelines and monitor implementation with audits.
Reimbursement	Emirati citizens receive full coverage; expats rely on variable private plans	leading to unequal access to high-cost therapies.	Introduce national co-financing schemes or coverage guarantees for essential lung cancer care.
Screening	LDCT screening is not yet implemented	and many patients are diagnosed at Stage III/IV.	Pilot LDCT screening in Abu Dhabi and Dubai, and scale nationwide with MoHAP leadership.





CONCLUSION

The UAE has positioned itself as a regional leader in healthcare innovation and lung cancer care access. However, **fragmentation**, **screening gaps**, **and population-based disparities** limit system-wide outcomes. By aligning policies across emirates, expanding early detection, and standardizing biomarker protocols, the UAE can lead the region in equitable precision oncology—offering advanced care for both citizens and long-term residents.



- The UAE has strong capabilities in diagnostics and treatment, but care varies across emirates and insurance tiers.
- 2 A national LDCT screening program is critical to reducing late-stage presentation and mortality.
- Biomarker protocols should be expanded beyond EGFR/ALK to include HER2, RET, NTRK, and re-testing at progression.
- Harmonized guidelines and funding models are essential to ensure all patients receive timely, evidence-based care.

CALL TO ACTION

- Pilot and implement a national LDCT lung screening program, targeting high-risk groups across all emirates.
- Develop unified national guidelines for biomarker testing and treatment pathways, applicable
 to public and private sectors.
- Expand drug reimbursement coverage for targeted therapies and immunotherapies to all residents with lung cancer.
- Establish a UAE National Cancer Registry that tracks mutation prevalence, treatment patterns, and survival outcomes.
- Foster clinical trial capacity and join regional research collaborations to advance lung cancer innovation.