



BRIDGING THE GAP

Enhancing Equitable Access & Innovation in Lung Cancer Care in Ethiopia

EXECUTIVE SUMMARY

Ethiopia faces the most severe challenges in lung cancer care across all measured domains. From nonexistent screening programs and minimal awareness efforts to the near-total absence of treatment infrastructure, the country's lung cancer maturity remains critically low.

With a population of over 120 million and only one major cancer treatment facility, this situation demands immediate national and international attention.

This policy brief outlines the pressing gaps and proposes targeted, scalable interventions to address the systemic failures in lung cancer prevention, diagnosis, treatment, and palliative care.

INTRODUCTION

A Nation at the Brink of a Lung Cancer Emergency

Ethiopia's healthcare system is grappling with a multifaceted cancer crisis, with lung cancer care standing out as one of the most underdeveloped areas. Ranked as **Level 1 – Critically Underdeveloped**, Ethiopia shows the weakest scores across all care dimensions. The absence of screening, treatment infrastructure, and public awareness has resulted in staggeringly low survival rates and delayed diagnoses that render many cases untreatable by the time patients seek help.

Without a coordinated and well-funded lung cancer strategy, the burden on individuals and the national health system will continue to escalate.



Egypt Ranks at Level 1 – Critically Underdeveloped in Lung Cancer Care



LUNG CANCER IN ETHIOPIA

Status and Urgent Needs

Pillar	Current Status	Strength	Policy Action
Early Detection & Diagnosis	Virtually no screening programs exist. Diagnosis often occurs at terminal stages.	Growing national interest in non-communicable diseases offers an opportunity for reform.	Launch a basic screening and referral network integrated within primary healthcare services, focusing on symptomatic high-risk individuals.
Biomarker & Molecular Testing	No access to molecular diagnostics for lung cancer in public hospitals; basic pathology capacity is extremely limited.	Black Lion Hospital in Addis Ababa can serve as a nucleus for future diagnostic expansion.	Prioritize pathology and diagnostic infrastructure investment and partner with international stakeholders to establish biomarker testing capacity.
Treatment Access	Only one radiotherapy machine serves over 120 million people. Chemotherapy and surgery are inaccessible for most.	Black Lion Hospital is a central treatment hub with trained professionals.	Procure additional radiotherapy units and chemotherapy drugs and ensure equitable geographic distribution by decentralizing services.
Clinical Guidelines	No national treatment guidelines exist for lung cancer, leading to fragmented and inconsistent clinical practices.	Ethiopia's Ministry of Health has experience with national health campaigns that can be leveraged.	Develop national clinical protocols for lung cancer aligned with global standards and supported by telemedicine-based clinician training programs.
Palliative & Survivorship Care	Pain management is severely limited due to regulatory restrictions on morphine and other opioids.	Palliative care discussions are beginning to emerge within national policy circles.	Reform opioid regulation for medical use, train primary care workers in basic palliative care, and expand end-of-life support services across regions.
Awareness & Prevention	No formal awareness campaigns have been conducted; stigma and low literacy about lung cancer symptoms are widespread.	The Ministry of Health has successfully conducted large-scale campaigns for infectious diseases.	Integrate lung cancer awareness into broader health communication campaigns, focusing on tobacco use, air pollution, and early symptoms.



CONCLUSION & Policy Imperative

Ethiopia stands at a critical juncture. Without significant, immediate action, lung cancer will continue to claim lives prematurely and silently. The current situation is not only a public health emergency but a moral and economic imperative for national leadership and international collaboration.

Coordinated investment in infrastructure, awareness, and treatment access could save thousands of lives annually and strengthen Ethiopia's broader health system.



Addressing the lung cancer crisis in Ethiopia requires a shift from neglect to action. With the right investments, partnerships, and policy commitments, Ethiopia can begin to reverse the trajectory of suffering and create a foundation for better cancer care. The time to act is now—before more lives are lost to a preventable and treatable disease.