

ADVANCING HER2-POSITIVE BREAST CANCER CARE IN FRANCE

Sustaining Equity in a High-Performing System

EXECUTIVE SUMMARY

France offers one of Europe's most advanced healthcare systems for HER2-positive breast cancer. Universal health coverage ensures access to diagnostics and treatment, and HER2-targeted therapies are reimbursed with no direct cost to patients. National screening programs, strong biomarker infrastructure, and participation in global research place France in a leading position.

Yet screening participation remains below target, and regional differences persist in early detection, rural access, and survivorship services.

INTRODUCTION

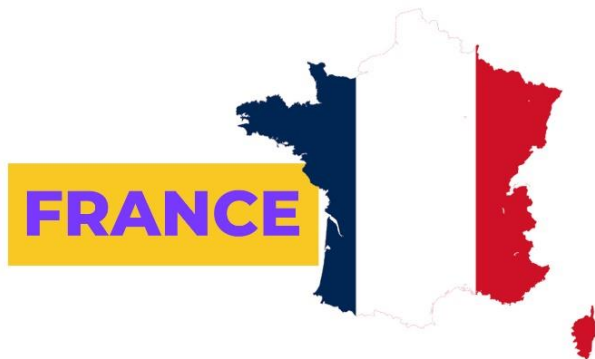
Breast cancer remains the most frequently diagnosed cancer among women in France, with over 58,000 new cases annually and HER2-positive disease comprising approximately 15–20%. France has been a pioneer in HER2 therapy access, with early reimbursement of trastuzumab, pertuzumab, T-DM1, and more recently trastuzumab deruxtecan. HER2 testing is widely available and standardized across the country.

However, screening rates remain below 50%, and disparities in awareness, rural access, and long-term survivorship care still exist. As HER2-low classifications emerge and survivorship needs expand, France must ensure consistent, nationwide implementation of personalized care.

CURRENT FRAMEWORK/SITUATION

France's centralized health insurance system guarantees access to cancer diagnostics and therapies through public hospitals and specialist centers. HER2 testing is integrated into routine pathology, and new therapies are reimbursed through the Assurance Maladie. Five-year breast cancer survival is 88%, one of the highest in Europe. Yet screening participation remains stagnant at ~48%, and regional gaps persist in early detection and palliative care. HER2-stratified outcome data is not routinely collected, and survivorship policies remain underdeveloped. While France has infrastructure in place, policy attention is needed to harmonize the final steps in personalized cancer care delivery.

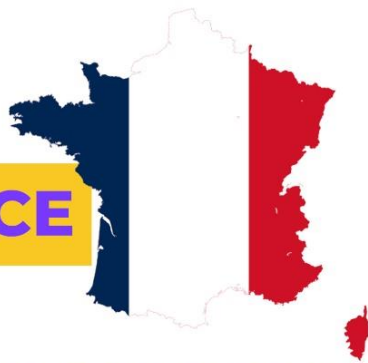
According to the global Maturity Framework for Cancer Care, France ranks in the **"Advanced"** category—but moving to the forefront of equity and precision requires bridging the final gaps in implementation.



HER2 BREAST CANCER IN FRANCE

Key Issues Table and Policy Recommendations

Pillar	Fact	Barrier	Policy Recommendations
Infrastructure	Yes, France has over 140 designated cancer centers and widespread HER2 testing...	...but rural hospitals often lack access to specialized HER2 pathology or clinical trial networks.	Expand digital pathology and regional oncology coordination to reduce urban-rural disparities.
Access to Treatment	Yes, trastuzumab, pertuzumab, T-DM1, and T-DXd are fully reimbursed with no out-of-pocket cost...	...but rural and older patients may face barriers in accessing later-line or trial-based therapies.	Create navigation programs and treatment equity audits for HER2+ patients in underserved areas.
Research & Innovation	Yes, France leads in EU-funded trials & biomarker research through Unicancer and Gustave Roussy...	...but HER2-low research and survivorship innovation are underprioritized.	Launch a national HER2-low research agenda and invest in long-term patient follow-up studies.
Awareness & Education	Yes, national and regional campaigns promote breast cancer awareness...	...but HER2 subtypes are not part of mainstream awareness, and low screening persists.	Embed HER2 messaging into screening invitations and community campaigns.
Survival Rates	Yes, 5-year survival exceeds 88% overall...	...but HER2-stratified survival is not reported, limiting targeted improvements.	Mandate HER2-disaggregated outcomes in national cancer registries and audits.
Early Detection & Palliative Care	Yes, mammography is available for all women aged 50–74...	...but screening participation is only ~47.8%, and palliative services vary by region.	Strengthen primary care outreach for screening and expand hospice funding in low-resource areas.
Biomarker	Yes, HER2 testing is performed routinely and reimbursed nationally...	...but reproducibility of HER2-low classification varies and needs quality controls.	Standardize HER2-low pathology protocols and fund lab-based QA schemes.
Clinical Guidelines	Yes, France follows ESMO/NCCN-aligned national guidelines...	...but HER2-low integration and relapse re-testing are inconsistently applied.	Update national guidelines to mandate HER2 re-testing at progression and HER2-low adoption.
Reimbursement	Yes, all HER2-related treatments and diagnostics are covered under national health insurance...	...but new therapies face 12–18 month delays between EMA approval and reimbursement.	Accelerate HTA processes for HER2 therapies with demonstrated OS benefit.
Screening	Yes, biennial mammography is publicly funded and available nationwide...	...but participation remains under 50% and is lower in low-income and immigrant communities.	Introduce digital screening reminders and mobile outreach in underserved populations.



CONCLUSION

France is a global leader in HER2-positive breast cancer care—but the final step toward equity is implementation. Uneven screening participation, regional variation in diagnostic access, and inconsistent HER2-low adoption must be addressed to protect survival gains. National excellence must translate into local delivery—regardless of geography, age, or socioeconomic status. With the foundation already in place, France has the capacity to lead Europe in precision oncology outcomes—if the system evolves in tandem with its science.



KEY POLICY MESSAGES

- 1 France provides universal HER2+ care access—but rural equity and screening gaps remain.
- 2 HER2-low classification and survivorship care must be integrated into mainstream oncology.
- 3 National data systems must report HER2-stratified outcomes to guide policy decisions.
- 4 Equity requires ongoing coordination—not just access, but timely and consistent delivery.

CALL TO ACTION

- **Standardize HER2-low classification and HER2 re-testing** through national guideline updates.
- **Improve screening uptake** via reminders, primary care prompts, and community partnerships.
- **Accelerate drug access timelines** by streamlining HTA and pricing negotiations for HER2 therapies.
- **Fund HER2-low and survivorship research** via Inserm and French Cancer Plan allocations.
- **Publish HER2-specific survival data** and audit equity of treatment access across all regions.