

BRIDGING THE GAP

Strengthening Colorectal Cancer Care in Vietnam

EXECUTIVE SUMMARY

Vietnam's colorectal cancer (CRC) care system is progressing, with growing awareness, expanding diagnostic services, and availability of surgical and chemotherapy treatments in urban centers. However, the absence of a nationwide screening program, limited biomarker testing outside major hospitals, and disparities in rural access hinder equitable outcomes.

With a **Level 2 – Developing** maturity, Vietnam has a foundation in place but must scale up screening, improve affordability of advanced therapies, and expand palliative and survivorship services to move toward comprehensive cancer care.

INTRODUCTION

Advancing from Awareness to Structured Care

Colorectal cancer is among the top five cancers in Vietnam and is a growing public health concern. Government and medical societies have initiated awareness programs, and tertiary hospitals in Hanoi and Ho Chi Minh City offer advanced diagnostics and treatments. Yet, most cases are still diagnosed at late stages, reflecting gaps in screening participation and system-wide infrastructure.

Moving beyond **Level 2 maturity** requires the integration of structured national screening, equitable distribution of biomarker testing, and nationwide treatment standardization.





COLORECTAL CANCER IN VIETNAM

Current Landscape and Strategic Gaps

Pillar	Current Status	Strength	Policy Action
Early Detection & Diagnosis	No national CRC screening program; opportunistic testing with colonoscopy/FOBT in urban hospitals. Many cases diagnosed late.	Awareness campaigns in major cities and existing endoscopy infrastructure.	Implement a nationwide screening program using FIT, with referral to colonoscopy; expand diagnostic services to provincial hospitals.
Biomarker & Molecular Testing	KRAS and NRAS testing available in leading hospitals but limited in regional centers.	Advanced diagnostics in Hanoi and Ho Chi Minh tertiary hospitals.	Expand biomarker testing capacity to provincial hospitals and include under health insurance reimbursement.
Treatment Access	Surgery, chemotherapy, and radiotherapy widely available in major hospitals; advanced targeted therapies are limited by high costs.	Experienced oncology workforce in tertiary centers.	Negotiate pricing for targeted therapies, expand public procurement, and improve referral networks between urban and rural areas.
Clinical Guidelines & Quality Standards	National oncology guidelines exist but not uniformly enforced; treatment varies by facility.	Use of international guidelines in leading centers.	Standardize and monitor implementation of CRC clinical guidelines nationwide through continuous medical education.
Palliative & Survivorship Care	Palliative care services limited to urban oncology hospitals; survivorship care is emerging but underdeveloped.	Growing palliative initiatives supported by NGOs and hospitals.	Expand palliative care services nationwide and integrate survivorship programs (nutrition, psychological support, rehabilitation).

CONCLUSION & Call to Action

Vietnam has a growing foundation for colorectal cancer care, yet gaps in screening, diagnostics, and equitable access persist. To progress beyond Level 2, the health system must implement structured nationwide screening, ensure affordability of advanced therapies, and strengthen survivorship care.



KEY POLICY PRIORITIES

- 1 Launch a Nationwide CRC Screening Program:** Implement FIT-based population screening with follow-up colonoscopy in high-risk individuals.
- 2 Expand Access to Biomarker Testing:** Ensure testing is available and reimbursed in regional hospitals.
- 3 Improve Affordability of Targeted Therapies:** Integrate advanced therapies into public insurance schemes and negotiate pricing agreements.
- 4 Strengthen Clinical Standardization:** Ensure nationwide adoption of evidence-based guidelines through training and monitoring.
- 5 Scale Up Palliative and Survivorship Care:** Invest in palliative services beyond urban centers and create structured survivorship pathways.

CONCLUSION

Vietnam's **Level 2 – Developing** maturity reflects meaningful progress but also systemic gaps that limit early detection and equitable treatment access. By scaling up screening, decentralizing diagnostics, and ensuring affordable therapies, Vietnam can transition toward a more comprehensive colorectal cancer response. Strengthening survivorship and palliative care will further support long-term outcomes and quality of life for CRC patients nationwide.