



ADVANCING HER2-POSITIVE BREAST CANCER CARE IN THE UAE

Strengthening Precision Delivery Across a High-Capacity System

EXECUTIVE SUMMARY

INTRODUCTION

United Arab Emirates (UAE) has rapidly expanded access to cancer care and personalized oncology, positioning itself among the region's most advanced systems for HER2-positive breast cancer. HER2 testing is and trastuzumab, pertuzumab, T-DM1, and trastuzumab deruxtecan (T-DXd) are available across public and private hospitals. Screening programs are in place, and clinical guidelines align with international standards. However, disparities in access exist between emirates, and uptake of HER2-low survivorship classification and services remains uneven. As a country at Maturity Level 4 - Advanced, the UAE now faces the challenge of ensuring consistent implementation of precision oncology across its multi-sectoral, multi-emirate system.

CURRENT SITUATION

The UAE has a dual public-private health system, with **national and emirate - level health authorities** including the Department of Health (Abu Dhabi), Dubai Health Authority, and the Ministry of Health and Prevention. HER2 testing is part of routine pathology workflows in both

Breast cancer is the most frequently diagnosed cancer among women in the disease with **HER2-positive** representing 15-20% of all cases. The country has made significant investments in early detection, pathology, and high-cost treatment access, including coverage and sophisticated insurance tertiary care centers in Abu Dhabi, Dubai, and Sharjah. HER2 testing using IHC/FISH is widely available, and advanced HER2 therapies are included in the drug formularies of major hospitals.

Despite these advances. screening participation remains below target levels, especially among migrant women and underserved populations. HER2-specific survival outcomes are disaggregated in public reporting, and HER2-low pathways are not consistently applied. To move from infrastructure readiness to system-wide equity, the UAE must embed HER2-personalized care across all emirates and populations, particularly reforms, through data survivorship planning, and culturally tailored outreach.

private settings. HER2 therapies—including trastuzumab, pertuzumab, T-DM1, and T-DXd—are approved and reimbursed, though access may vary by insurance provider and patient nationality.

The UAE's national cancer strategy emphasizes early detection, innovation, and personalized care. However, HER2-low testing protocols and real-world HER2 outcomes are not standardized. Breast cancer screening is recommended for women aged 40+, but participation remains suboptimal, especially in lower-income and non-citizen groups. The country operates at a strong **Advanced maturity level**, with opportunities to lead regionally by ensuring comprehensive HER2 precision implementation.





HER2 BREAST CANCER IN THE UAE

Key Issues and Policy Recommendations

Pillar	Fact	Barrier	Policy Recommendations
Infrastructure	HER2 testing and pathology are well-developed in major centers	but smaller emirates and non-tertiary facilities may lack standardized capacity.	Mandate HER2 testing availability across all emirates and strengthen quality control mechanisms.
Access to Treatment	Trastuzumab, pertuzumab, T-DM1, and T-DXd are approved and accessible	but disparities remain across insurers and between citizens and expatriates.	Ensure coverage parity for all HER2 therapies under public and private insurance schemes.
Research & Innovation	The UAE is investing in precision medicine and genomic research	but HER2-low research is minimal, and clinical trials are limited.	Launch HER2-low studies and foster UAE-led trials on treatment sequencing and biomarker outcomes.
Awareness & Education	National campaigns promote breast cancer awareness	but HER2 subtype education is lacking in public materials and provider training.	Include HER2 and HER2-low messaging in awareness drives and clinical training programs.
Survival Rates	Survival rates for breast cancer are improving	but HER2-specific data is not publicly reported or benchmarked.	Publish HER2-disaggregated outcomes and track survival by subtype in national cancer reports.
Early Detection & Palliative Care	Breast cancer screening is available through government and private clinics	but uptake is low among non-citizen and migrant populations.	Expand culturally sensitive outreach and workplace-based screening in underserved communities.
Biomarker	HER2 IHC/FISH testing is routine in most centers	but HER2-low is not consistently reported or interpreted.	Standardize HER2-low testing protocols and fund lab training on interpretation and reporting.
Clinical Guidelines	UAE follows NCCN/ESMO-aligned cancer care pathways	but HER2 re-testing at relapse and HER2-low integration are not fully mandated.	Update guidelines to include HER2 re-testing and HER2-low classification across all cancer centers.
Reimbursement	Most HER2 treatments are reimbursed for citizens	but private insurance for expatriates may limit access to later-line drugs.	Expand regulatory oversight to ensure universal reimbursement for HER2+ care regardless of coverage type.
Screening	Mammography screening is recommended every 2 years for women 40+	but participation is low, especially in migrant-heavy populations.	Deploy mobile screening units and digital reminders tailored to linguistically and culturally diverse groups.





CONCLUSION

The UAE has the infrastructure and policy frameworks in place to deliver high-quality HER2-positive breast cancer care. To move from **Advanced to Leading**, the system must ensure consistency across emirates, expand HER2-low integration, and track outcomes disaggregated by subtype and population group. With strong innovation capacity and a growing commitment to personalized care, the UAE is well-positioned to set a regional standard in equitable HER2 cancer treatment.



- HER2 testing and treatment are well-established but unevenly implemented across insurers and regions.
- HER2-low and relapse re-testing are not yet standardized in UAE guidelines or pathology protocols.
- Screening participation is suboptimal among migrant populations, despite available services.
- Data systems must evolve to report

 HER2-stratified outcomes and guide policy and quality improvement.

CALL TO ACTION

- **Update nation**al and emirate-level guidelines to include HER2-low classification and HER2 re-testing at progression.
- Mandate coverage parity for HER2 therapies across private and public insurance, including for expatriate patients.
- Launch HER2-focused research initiatives and promote UAE-led clinical trials.
- Improve HER2-specific reporting in cancer registries and annual health statistics.
- **Strengthen screening uptake** via multilingual campaigns, employer partnerships, and digital health solutions.