

ADVANCING HER2-POSITIVE BREAST CANCER CARE IN ARGENTINA

Building Equity in a Fragmented Yet Capable System

EXECUTIVE SUMMARY

Argentina has long provided access to HER2 testing and HER2-targeted therapies within a mixed public-private healthcare system. Trastuzumab, pertuzumab, and T-DM1 are available and reimbursed, and HER2 testing is routine in most oncology centers. However, fragmentation across national, provincial, and social security schemes, delays in drug access, and uneven diagnostic capabilities hinder equity. HER2-low classification and survivorship services are not yet well integrated.

Argentina is currently classified at **Maturity Level 3 – Intermediate**, indicating a system with strong clinical capacity but hampered by delivery gaps and systemic inefficiencies. National harmonization of testing, access, and data systems is essential to unlock the full benefits of precision HER2-positive care.

INTRODUCTION

Breast cancer is the most commonly diagnosed cancer among women in Argentina, with over 22,000 new cases each year. HER2-positive disease, representing 15–20% of cases, benefits from a wide range of effective targeted therapies. Argentina was an early adopter of HER2 testing and trastuzumab availability, and has national policies supporting oncology drug access. However, due to a fragmented health system comprising public, social security (Obras Sociales), and private sectors, care delivery is highly uneven. While patients in major urban areas may access advanced therapies, those in rural or underserved provinces face delays and denials. HER2-low identification and data disaggregation remain limited, and survivorship care pathways are underdeveloped. Argentina must now move from access on paper to equitable implementation in practice.

CURRENT FRAMEWORK/SITUATION

Argentina's healthcare system consists of a large public sector, a decentralized provincial network, hundreds of social security schemes (Obras Sociales), and numerous private providers. HER2 testing is offered in most urban pathology labs, particularly within Instituto Nacional del Cáncer (INC)-affiliated hospitals and university centers. Trastuzumab, pertuzumab, and T-DM1 are reimbursed under multiple programs, but authorization and supply delays are common. Disparities between provinces in testing availability, treatment timelines, and follow-up care remain a key concern.

Clinical guidelines from the Argentine Association of Clinical Oncology (AAOC) reference international standards but lack mandatory implementation across health subsystems. National breast cancer screening exists but is not uniformly enforced, and mammography coverage remains suboptimal in rural areas. HER2-stratified survival data is not publicly available, limiting system-wide improvement planning. With strong scientific capability but inconsistent execution, Argentina is currently at **Maturity Level 3 – Intermediate**, requiring a coordinated push to unify policy, improve rural access, and implement HER2-specific reforms nationwide.

HER2 BREAST CANCER IN ARGENTINA

Key Issues and Policy Recommendations

| Pillar | Fact | Barrier | Policy Recommendations |
|-----------------------------------|---|--|--|
| Infrastructure | Most major oncology hospitals offer HER2 testing and treatment... | ...but rural and low-resource provinces face shortages of trained personnel and labs. | Fund regional pathology labs and digital pathology expansion, especially in underserved provinces. |
| Access to Treatment | Trastuzumab and other HER2 therapies are reimbursed under public & social security schemes... | ...but delays in authorizations & fragmented funding mechanisms create barriers. | Streamline access processes across all subsystems with centralized authorization platforms. |
| Research & Innovation | Argentina has research hubs like CONICET and INC contributing to cancer studies... | ...but HER2-low research is limited, and real-world HER2-positive data is underutilized. | Support HER2-specific research through public grants and integrate real-world data into national cancer registries. |
| Awareness & Education | National campaigns and public-private partnerships promote breast cancer awareness... | ...but HER2 subtypes are rarely emphasized, and rural outreach is limited. | Integrate HER2 content into national awareness campaigns and train primary care providers in subtype identification. |
| Survival Rates | Breast cancer 5-year survival is approximately 75%... | ...but survival is not disaggregated by HER2 status and varies by socioeconomic background. | Mandate HER2-stratified survival reporting at national and provincial levels. |
| Early Detection & Palliative Care | National breast cancer screening exists for women 50–69... | ...but screening rates remain below targets, and palliative care services are inconsistent. | Increase mobile screening and expand hospice funding, especially in low-coverage provinces. |
| Biomarker | HER2 IHC testing is widely available in urban centers... | ...but confirmatory FISH testing is inconsistent, and HER2-low protocols are not standardized. | Create national HER2 testing quality standards and subsidize confirmatory testing. |
| Clinical Guidelines | National guidelines reference global standards... | ...but HER2-low inclusion and HER2 re-testing at relapse are not yet mandated. | Update national protocols to require HER2 re-testing and integrate HER2-low treatment pathways. |
| Reimbursement | HER2-targeted drugs are reimbursed through public and Obras Sociales systems... | ...but cost negotiations and delayed procurement hinder timely access. | Establish fast-track reimbursement processes and national drug purchase pools to avoid supply lags. |
| Screening | Breast cancer screening is recommended and partially implemented nationally... | ...but enforcement, coverage, and awareness remain inconsistent. | Strengthen regional accountability for screening programs and link mammography with national health ID systems. |

CONCLUSION

Argentina possesses the foundational elements of a strong HER2-positive breast cancer care ecosystem—testing, therapy access, and oncology expertise. However, system fragmentation, bureaucratic bottlenecks, and regional inequities limit consistent delivery. The country's **Intermediate maturity level** reflects a system with capability but lacking in integration and equity. By aligning HER2 testing protocols, harmonizing treatment access across sectors, and enforcing data reporting by subtype, Argentina can significantly improve outcomes for HER2-positive patients and move toward precision care leadership in Latin America.



KEY POLICY MESSAGES

- 1** HER2 therapies and testing are available in Argentina but hampered by bureaucratic and regional disparities.
- 2** HER2-low and relapse re-testing remain unaddressed in clinical practice.
- 3** HER2-specific survival data is absent, limiting targeted policy and funding decisions.
- 4** National reform must prioritize integration across health subsystems and investment in diagnostic equity.



CALL TO ACTION

- **Standardize HER2 testing and HER2-low reporting** through national QA programs and mandatory lab protocols.
- **Simplify and accelerate therapy access** through unified authorization and reimbursement systems.
- **Mandate HER2 re-testing at relapse** and include HER2-low pathways in national oncology guidelines.
- **Fund regional screening and survivorship outreach** through national and provincial co-investment.
- **Require HER2-disaggregated data** in national cancer registries to inform planning and accountability.