



CLOSING THE GAP

Advancing Equitable HER2-Positive Breast Cancer Care in Canada

EXECUTIVE SUMMARY

HER2-Positive Breast Cancer affects up to 1 in 5 breast cancer patients and is among the most aggressive forms—yet it is also one of the most treatable with timely, targeted care. In Canada, world-class infrastructure meets real-world inequality. Access depends on where you live, how fast your province acts, and how deep the system is willing to go for the most advanced care. While the foundation is strong, the cracks are showing—especially for those in rural, remote, or marginalized communities.

This brief outlines clear, impactful policy actions to close these gaps and make equity the standard, not the exception.

INTRODUCTION

Canada is a global leader in cancer care, with a mature and well-resourced system for breast cancer treatment. Yet, HER2-positive patients continue to face uneven access to the very innovations that can extend or save their lives. Cutting-edge diagnostics and next-generation HER2 therapies are available—but not always accessible.

The reality? Geography, bureaucracy, and budget cycles still dictate patient outcomes.

CURRENT FRAMEWORK AND CHALLENGES

Canada scores as a "**Leading - Highly Developed**" country in the **Maturity Cancer Care Index**, backed by over 70 specialized cancer centers, strong public funding, and universal access to standard therapies. HER2 testing is a national norm, and survival rates remain among the highest globally.

But cracks in the system—especially around the rollout of next-generation sequencing (NGS), treatment reimbursement delays, and underserved populations—must be urgently addressed.



HER2 BREAST CANCER

Core Pillars, Facts, Barriers & Policy Recommendations

Pillar	Key Fact	Barrier	Policy Recommendations
Infrastructure & Delivery	Over 70 cancer centers across Canada	Rural and Indigenous communities often face delayed diagnoses due to distance and logistics.	Invest in regional hubs, expand tele-oncology, and incentivize rural oncology practice
Diagnostic & Genomic Testing	HER2 testing in >95% of new cases; NGS expanding, but uneven	Yes, basic testing is strong... but advanced diagnostics like NGS remain limited by geography and funding.	Ensure NGS reimbursement nationwide and create regional genomic labs
Access to Therapies	Enhertu (Trastuzumab deruxtecan) approved for HER2+ and HER2-low patients	Yes, it's on the formulary... but cost and provincial delays prevent timely access.	Accelerate HTA processes and negotiate national pricing agreements
Research & Innovation	>CAD 100 million invested annually in breast cancer research	Yes, research is robust... but HER2-specific trials often cluster in major centers.	Decentralize trial access and embed research in regional cancer networks
Clinical Guidelines	National guidelines aligned with ESMO/NCCN, supported by expert	Uptake varies across provinces, delaying standardization of best practices.	Mandate provincial adherence to national HER2 treatment guidelines
Screening & Early Detection	Organized mammography programs with >70% participation rate	Yes, screening is free... but cultural, linguistic, and geographic barriers reduce uptake.	Launch culturally tailored campaigns and mobile units for high-risk, underserved groups
Palliative & Survivorship	Integrated palliative care system; hospice access varies	Yes, services exist... but psychosocial and home-based care is inconsistent.	Expand funding for home-based and culturally competent palliative support



CONCLUSION

Canada has the tools, talent, and therapies to lead in HER2-positive breast cancer care. But leadership isn't just about what you have—it's about who gets access. **If a woman in Vancouver has a radically different care journey than one in rural Manitoba, can we really call our system equitable?**

We know what works. Now we need to fund it, scale it, and deliver it everywhere.



CALL TO ACTION

- Guarantee universal access to HER2 diagnostics and next-generation sequencing through equitable reimbursement across all provinces.
- Accelerate access to newly approved HER2-targeted therapies by streamlining HTA and pricing processes nationally.
- Expand regional equity, including investment in remote care delivery, mobile screening units, and culturally competent services.
- Enforce national standards for HER2 care by ensuring provincial alignment with established clinical guidelines.
- Close the participation gap by decentralizing research and clinical trial access across Canada.

*Let's stop asking if we can afford to act—and start asking if we can afford not to.
Canada's next step is clear: make HER2-positive breast cancer care equal, everywhere, for everyone.*