



BRIDGING THE GAP

Advancing Prostate Cancer Care in Algeria

EXECUTIVE SUMMARY

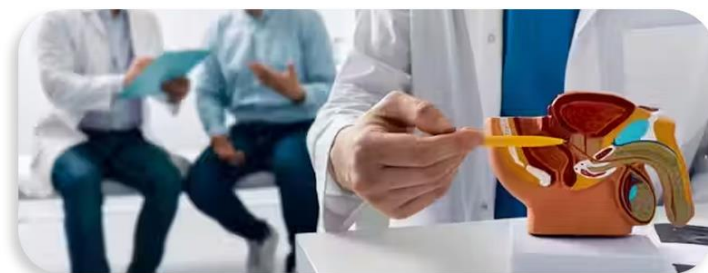
Algeria is making gradual progress in prostate cancer care, with improvements in public awareness and the availability of specialized oncology services in major cities. However, access to early detection, advanced diagnostics, and innovative treatments remains uneven, especially in rural regions. High out-of-pocket costs, uneven service distribution, and limited biomarker availability hinder equitable outcomes.

This policy brief assesses Algeria's **Level 2 – Developing** prostate cancer maturity and outlines strategic reforms to accelerate progress toward a more integrated, patient-centered system.

INTRODUCTION

Building on Gains While Addressing Persistent Gaps

Prostate cancer is one of the most common cancers among Algerian men, and the burden is increasing with an aging population. While public hospitals and cancer centers in urban areas offer diagnosis and treatment, many patients present at advanced stages due to low awareness and limited screening. The government's investment in oncology infrastructure and expansion of health coverage provides a foundation to improve outcomes, but challenges in service reach, diagnostic innovation, and guideline standardization must be addressed.



Algeria Ranks at Level 2 – Developing Prostate Cancer Maturity Framework



PROSTATE CANCER IN ALGERIA

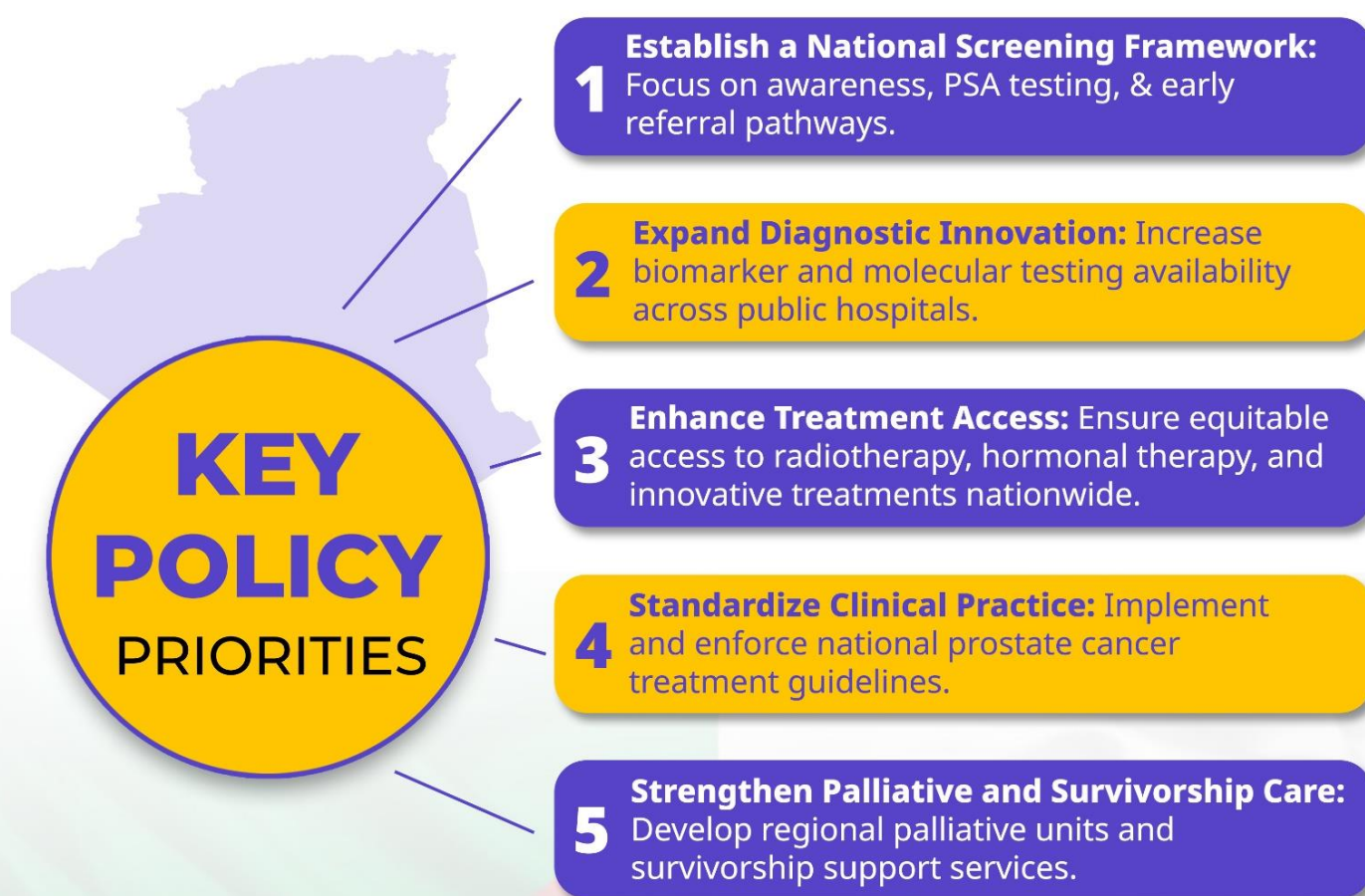
Current Landscape and Strategic Gaps

Pillar	Current Status	Strength	Policy Action
Early Detection & Diagnosis	No national screening program; PSA testing is available in public and private hospitals but not widely promoted. Most diagnoses occur late.	Availability of PSA testing and urology services in major cities.	Implement a targeted national awareness and screening initiative for men aged 50+ & high-risk groups; expand diagnostic services to regional hospitals.
Biomarker & Molecular Testing	Minimal public sector availability; molecular diagnostics limited to a few specialized centers.	Some biomarker testing available in select urban oncology centers.	Expand biomarker access through public-private partnerships and integration into public sector labs.
Treatment Access	Surgery and radiotherapy available in large hospitals; access to hormonal therapy and advanced treatments varies.	National health coverage supports core cancer treatments.	Expand radiotherapy capacity regionally, ensure hormonal therapy is universally available, and integrate newer therapies into the national formulary.
Clinical Guidelines	No dedicated national prostate cancer treatment guidelines; physicians adapt from international protocols.	Trained oncologists and urologists in tertiary hospitals.	Develop standardized national guidelines and ensure nationwide dissemination and training.
Palliative & Survivorship Care	Palliative care services are limited outside major cities; survivorship care is minimal.	Some palliative programs supported by NGOs and cancer centers.	Strengthen community-based palliative care networks and implement survivorship programs, including psychosocial and rehabilitation support.



CONCLUSION & Call to Action

Algeria's **Level 2 – Developing** prostate cancer maturity reflects a health system with foundational services but limited integration and uneven access. Significant opportunities exist to build on existing infrastructure, strengthen early detection, and standardize care to improve survival outcomes.



CONCLUSION

Algeria is positioned to advance from a developing to a more mature prostate cancer care system by leveraging its growing oncology infrastructure and expanding equitable access. Early detection initiatives, stronger diagnostic capacity, and national treatment guidelines are critical next steps. With sustained investment, multidisciplinary collaboration, and community engagement, Algeria can transition toward a comprehensive, patient-focused model that delivers consistent and equitable care to all men, regardless of geography or socioeconomic status.