



BRIDGING THE GAP

Advancing **Colorectal Cancer Care** in Malaysia

EXECUTIVE SUMMARY

Malaysia has made substantial progress in colorectal cancer (CRC) care, with a national screening framework, well-established diagnostic and treatment capacity in urban centers, and adherence to international treatment guidelines in leading hospitals. However, challenges remain in ensuring equitable access to screening and advanced therapies across rural and lower-income populations.

With a **Level 3 – Advanced** maturity, Malaysia is positioned to further strengthen its colorectal cancer system by scaling up screening participation, expanding biomarker access, and improving survivorship care.

INTRODUCTION

Progressing Toward Comprehensive Cancer Control

Colorectal cancer is among the most common cancers in Malaysia, affecting both men and women. Over the past decade, Malaysia has implemented population-based screening programs and expanded oncology infrastructure in major cities. Yet, disparities persist: rural populations, particularly in Sabah and Sarawak, face limited diagnostic access, while the high cost of targeted therapies limits affordability.

Building on strong foundations in policy and infrastructure, Malaysia can move toward a fully mature colorectal cancer system by prioritizing equity and integration of services nationwide.









COLORECTAL CANCER IN MALAYSIA

Current Landscape and Strategic Gaps

Pillar	Current Status	Strength	Policy Action
Early Detection & Diagnosis	National screening program using FIT is in place, but participation remains below targets. Colonoscopy capacity limited in some regions.	Strong public health campaigns and existing screening infrastructure.	Increase public awareness campaigns, incentivize participation, and expand colonoscopy access in rural and semi-urban hospitals.
Biomarker & Molecular Testing	KRAS, NRAS, and BRAF testing available in tertiary centers, but not universally covered by insurance.	Molecular diagnostics available in leading cancer hospitals.	Ensure nationwide insurance coverage for biomarker testing and expand access to regional hospitals.
Treatment Access	Surgery, chemotherapy, and radiotherapy are widely available in urban centers; targeted therapies (biologics, immunotherapy) remain costly.	Skilled oncology workforce and established tertiary hospitals.	Negotiate pricing agreements for advanced therapies, expand access in public sector hospitals, and ensure inclusion in reimbursement schemes.
Clinical Guidelines & Quality Standards	National guidelines align with ESMO and NCCN standards; adherence is strong in major hospitals.	Well-developed guideline framework and training systems.	Enhance implementation monitoring in regional facilities and provide continuous medical education to healthcare professionals.
Palliative & Survivorship Care	Palliative care services are integrated into major hospitals; survivorship programs are emerging but not standardized.	Expanding palliative care workforce and community-based initiatives.	Develop structured survivorship care programs, including rehabilitation, psychosocial support, and dietary guidance.





CONCLUSION & Call to Action

Malaysia's colorectal cancer system is well-structured but faces challenges of equitable access, affordability of advanced therapies, and comprehensive survivorship support. By reinforcing its existing framework and focusing on nationwide integration, Malaysia can achieve further improvements in outcomes.

- **Expand Screening Participation:** Strengthen outreach and ensure FIT and colonoscopy are accessible across all regions.
- Universalize Biomarker Access: Integrate
 biomarker testing into insurance schemes and expand laboratory capacity outside major cities.

KEY
POLICY
PRIORITIES

- Improve Affordability of Therapies: Negotiate lower costs for biologics and immunotherapy, and expand access through public procurement.
- Strengthen Guideline Implementation: Monitor adherence across all healthcare levels and provide ongoing professional training.
- **Scale Up Survivorship Care:** Establish nationwide survivorship programs focusing on long-term monitoring, psychological health, and quality of life.

CONCLUSION

At **Level 3 – Advanced maturity**, Malaysia demonstrates strong foundations in colorectal cancer care, with structured screening programs, established oncology capacity, and robust clinical guidelines. The next step lies in closing urban-rural gaps, ensuring affordability of advanced therapies, and embedding survivorship care into routine practice. By focusing on equitable access and sustainable financing, Malaysia can advance toward a fully mature, patient-centered colorectal cancer system.