



BRIDGING THE GAP

Enhancing Equitable Access & Innovation in Lung Cancer Care in Canada

EXECUTIVE SUMMARY

Canada has achieved a high level of maturity in lung cancer care, underpinned by a strong public healthcare system, specialized cancer centers, and consistent investments in research. Yet despite this progress, regional disparities continue to hinder equal access to diagnostics, therapies, and palliative care—particularly in remote and Indigenous communities.

Yes, screening programs, molecular testing, and universal coverage exist—but is access timely and equitable across all provinces and populations? Too often, the answer is no. Wait times, limited specialist availability, and geographic inequities persist.

This policy brief identifies systemic challenges and outlines actionable reforms to ensure that Canada's lung cancer care is not only world-class—but truly accessible for all.

INTRODUCTION

World-Class Framework, Uneven Reach

Lung cancer is one of Canada's leading causes of cancer mortality. While the country benefits from a universal healthcare system, advanced research, and specialized cancer centers, timely access to cutting-edge diagnostics and therapies varies by region.

Canada is classified as Level 5 – Advanced in the Cancer Care Maturity Framework, reflecting the presence of robust infrastructure, funding, and clinical expertise. However, regional gaps—particularly in rural and Indigenous populations — still compromise equitable outcomes. As Canada continues to refine its healthcare delivery, ensuring uniformity in lung cancer care access must be a national priority.



Canada Ranks at Level 5 – Advanced in Lung Cancer Care Maturity Framework



LUNG CANCER IN CANADA

Current Landscape and Systemic Gaps

Canada has built a solid foundation for lung cancer care, but gaps persist across provinces and underserved populations. The table below outlines the country's maturity across critical pillars, barriers encountered, and policy actions needed to strengthen equity and delivery:

| Pillar | Current Status | Barrier | Policy Action |
|--------------------------------|--|---|--|
| Early Detection & Diagnosis | National LDCT screening in place for high-risk groups. | Yes, screening exists—but uptake is inconsistent, especially in rural and Indigenous communities. | Expand outreach and culturally adapted education programs. Invest in mobile screening and primary care training. |
| Biomarker & Molecular Testing | Available and reimbursed in most provinces. | Yes, testing is funded—but logistical delays and workforce shortages limit timely results. | Standardize turnaround times across provinces. Invest in diagnostic staffing and digital integration. |
| Treatment Access | Universal coverage for therapies, including targeted agents and immunotherapies. | Yes, drugs are covered—but access varies by province and wait times can delay initiation. | Harmonize access timelines across provinces. Implement pan-Canadian data tracking on treatment delivery. |
| Clinical Guidelines | National guidelines exist, supported by Cancer Care Ontario and others. | Yes, guidelines are in place—but regional adherence and updates vary. | Establish national compliance benchmarks and periodic guideline updates linked to reimbursement policies. |
| Palliative & Survivorship Care | Broad availability of palliative care services. | Yes, services exist—but access in rural and Indigenous areas is inconsistent and underfunded. | Expand telehealth and home-based palliative care. Increase Indigenous-led palliative support initiatives. |



CONCLUSION & Call to Action

Canada's lung cancer care system ranks among the most advanced globally—but care delays, regional disparities, and underserved populations remain key issues. The challenge now is not infrastructure, but equitable and consistent implementation.

Canada has the tools, the expertise, and the public support to lead in closing these gaps. It's time to ensure that every patient—regardless of where they live—has timely access to life-saving care.



KEY POLICY PRIORITIES

1

Strengthen community engagement and education to improve LDCT screening uptake in rural and Indigenous populations.

2

Streamline biomarker testing workflows to reduce delays in diagnosis and treatment decisions.

3

Harmonize access to therapies and reduce wait times across provinces under a coordinated national framework.

4

Update and enforce national lung cancer treatment guidelines, with a focus on consistent implementation.

5

Expand culturally appropriate and community-based palliative care, with targeted support for remote areas.

Canada has built the foundation—now is the time to ensure every corner of the country benefits equally from its progress.