

#190 - SCARCE EXISTENCE OF PUBLIC HEALTH POLICIES AND TREATMENTS AVAILABLE ON HEPATOCELLULAR CARCINOMA WORLDWIDE

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Background: Hepatocellular carcinoma (HCC) is the third most common cause of cancer-related deaths worldwide.

Aims: To explore HCC-related population-wide public health policies (PHP) in terms of prevention, treatment availability, epidemiological surveillance, and awareness campaigns worldwide.

Methods: We conducted a 43-item survey about HCC: policies and civil society (18 questions), clinical guidelines (5 questions), epidemiology (7 questions), and care management (13 questions). The survey was carried out using an electronic form between May 2022 and January 2023. Data was revised by two independent reviewers and verified with governmental institutions, regulatory agencies, scientific societies, and scientific publications. We classified policies into eight dimensions, including criteria for low, moderate, and strong PHP establishment. We estimated an index using multiple correspondence analysis.

Results: We obtained 134 responses from 66 countries/territories (Africa N=16, the Americas N=18, Asia N=10, Europe N=21, and Oceania N=1). The median index was 43.7 [IQR: 30.9–59.3]. The lower scores were observed in Sierra Leone (0), Lebanon (5.5), and Pakistan (5.5), while Italy (79.7), Brazil (94.1), and Sweden (100) obtained the highest scores (**Figure**). In particular, only 5 (7.6%) had a specific written national strategy or action plan on HCC. Thirty-two (48.5%) countries had national clinical practice guidelines on HCC and 54 (81.8%) had a national disease registry that included HCC. The most common strategies for staging HCC were Barcelona Clinic Liver Cancer (BCLC) (85%) and TNM classification (10%). The survey reflects important differences in the availability of treatments, including surgery (98.4%), tyrosine kinase inhibitors (95.1%), chemoembolization (85.2%), radiofrequency or alcohol ablation (82%), immunotherapy plus anti-VEGF (82%), liver transplant (74.2%), stereotactic body radiation therapy (42.6%), and radioembolization (36.4%).

Conclusions: Existence of PHP on HCC is insufficient worldwide. The most common strategy for staging is BCLC, but there are important differences in treatment availability across countries, especially regarding curative therapies.

Strategies on Hepatocellular carcinoma (HCC) worldide

