



# Improving Breast Cancer Care in Colombia with One-Stop Clinics





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Sebastian Diaz, MD  
National Director of Breast Diseases – SURA



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Unlike the United States and most other Western countries, Colombia and other South American countries are experiencing not a declining rate of breast of cancer deaths, but one that is increasing.<sup>1,2</sup> In 2018, one out of four women in Colombia diagnosed with cancer were diagnosed with breast cancer and 3,702 died. Overall, breast cancer is the most commonly diagnosed cancer in Colombia and the leading cause of cancer-related death in women.<sup>3</sup>

One reason for the high death rate is that nearly half of breast cancers (45 percent) are diagnosed at a late stage. Even though the government mandates coverage of screening mammograms, less than half of women who should have one receive one.<sup>1,4</sup> “In Colombia, many women diagnosed with breast cancer have advanced disease at diagnosis,” said Sebastian Diaz, MD, National Director of Breast Diseases – SURA.

Indeed, one study of 1,106 Colombian women with breast cancer found that 81 percent were diagnosed because they exhibited symptoms rather than through a screening mammogram, and most were diagnosed with advanced stage disease. Twenty percent of the women waited more than three months before consulting a health professional.<sup>5</sup> Another study in the same population found that it took an average of 91 days from the time they saw a doctor to diagnosis, and 137 days before treatment began.<sup>6</sup>

Many years ago, Dr. Diaz said, the wait was as long as 200 days from the time a woman discovered a lump to diagnosis and treatment. Not anymore.

### Faster Treatment to Save Lives

Today, thanks to the One-Stop Clinic opened with the support of GE Healthcare two years ago, women are diagnosed and begin treatment 14 days or less after their initial visit. The clinic is modeled after the One-Stop Clinic at Gustave Roussy Cancer Center in Villejuif, France, one of the leading cancer centers in the world. There, women with abnormal or unclear findings from screening may receive a diagnosis and, often, additional tests required for treatment, in just one day.

Now, in conjunction with GE Healthcare, Gustave Roussy's founder, Suzette Delaloge, is expanding the concept internationally. The Medellin facility is the first to open.

The One-Stop Clinic model is easily replicable, said Delaloge. “When you combine the right people, process, and technology, you can deliver excellent clinical, operational, and financial outcomes with increased value.”

The Gustave Roussy team traveled to Medellin in March 2017 to meet the Colombian team at Ayudas Diagnósticas SURA and assess its existing clinic model. Two months later, some members of the same Ayudas Diagnósticas SURA team traveled to France to tour the Roussy clinic. There, they also received training on the organizational and clinical algorithms Gustave Roussy uses in its clinic.



### Then they returned to Colombia and got to work

Today, the Colombian diagnostic clinic at Ayudas Diagnósticas SURA in Medellín operates two cycles of appointments five days a week with two breast surgeons, two radiologists, and two pathologists. About 34 patients a day pass through the clinic – double the number seen just a year ago. Since opening its doors two years ago, the clinic has screened and/or treated almost 7,000 women.

Patients who have an abnormal breast image (BIRADS 4 or 5) are automatically referred to the clinic and seen within two to three days for a multidisciplinary approach with the specialists, as well as additional exams, including a biopsy. They are then referred to the appropriate specialist to begin treatment.

“The patients love it,” Dr. Diaz said. “They are in one center receiving everything they need to get a diagnosis: the breast surgeon consultation, the radiology, the pathology. The time involved is getting shorter all the time and the patients are obviously very happy with that.”

Now, he said, “they don’t have to go from one building to another for testing and other appointments and to get approval for them, which used to mean days of missed work and additional costs for transportation and childcare.” Instead, he said, “when I see those patients with a positive cancer diagnosis in the clinic, they can receive a treatment decision with all needed exams.”

Patients are guided through their journey by nurse navigators who contact them, send texts and emails, and help coordinate their care.

The physicians also love it, he said. “We are interacting all the time in person. We’re not sending emails. If I have something I don’t understand or the radiologist or pathologist doesn’t understand, we go and talk and take a multidisciplinary approach to making a decision.”

The model is now spreading to other Ayudas Diagnósticas SURAs, with One-Stop Clinics opening in 2020 and 2021 in Barranquilla, Bucaramanga, Bogota, and Cali.

Dr. Diaz has this advice for other hospitals in other countries seeking to start their own One-Stop Clinic: “Just do it. It’s perfect for us, for the patient, and for the insurance company.

## The Value Proposition

The value proposition for a One-Stop Clinic is significant. It includes:

- Implementing payer strategy through a more coordinated approach.
- Standardizing pathways to improve diagnostic quality, timeliness, and efficiency.
- Creating informed and empowered patients who are more knowledgeable about their health risks and their care plan.
- Putting the patient at the center of the healthcare team and ensuring that all involved work to manage the patient’s risk.
- Using the information generated from the clinic to develop databases for research and determining best practices.
- Communicating the results of improved delivery of care.
- Providing cost-effective care.
- Reducing the impact of medical visits on the patient’s work and income, as well as their need for transportation and childcare.
- Improving the survival rate through lifesaving holistic approaches.





1. Birnbaum JK, Duggan C, Anderson BO, Etzioni R. Early detection and treatment strategies for breast cancer in low-income and upper middle-income countries: a modelling study. *Lancet Glob Health* 2018; 6: e885–93
2. Sibioa AD, Abriata G, Forman D, Sierrab MS. Female breast cancer in Central and South America. *Cancer Epidemiology*. 2016;44(Suppl 1): S110-S120
3. World Health Organization. International Agency for Research on Cancer. Colombia. Available at: <https://gco.iarc.fr/today/data/factsheets/populations/170-colombia-fact-sheets.pdf>.
4. Duarte C, Salazar A, Strasser-Weippl K, et al. Abstract P5-13-12: Breast cancer in Colombia: A growing challenge for the health care system. *Cancer Res*. 2019; (79) (4 Supplement).
5. Pineros M, Sanchez R, Cendales R, Ocampo R. Patient delay among Colombian women with breast cancer. *Salud Publica Mex*. 2009;51:372-380.
6. Pineros M, Sanchez R, Perry F, et al. Delay for Diagnosis and Treatment of Breast Cancer in Bogotá, Colombia. *Salud Publica Mex*. 2011;53(6):478-85.

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