

# Issue Brief: The Role of a Strong Innovation Ecosystem & Equitable Access Measures in Advancing Healthy Ageing

## A Case Study in Cancer Care & Innovation in CAR T-Cell Therapy

The UN Decade of Healthy Ageing seeks to change attitudes toward ageing, create age-friendly environments, support healthcare systems and services that are more integrated and responsive to older adults, and ensure long-term care for the ageing population.<sup>1</sup> Strengthening health system capacity through the creation of appropriate standards and interventions will improve the lives of older people worldwide, and will reinforce the likelihood of success in achieving UN Sustainable Development Goals (SDGs) by 2030.<sup>2</sup>

As we enter the year of the 2025 UN High Level Meeting on Non-Communicable Disease (NCD) and move into the second half of the Decade of Healthy Ageing, we must underscore the critical role of health system resilience as a fundamental building block in supporting the Decade of Healthy Ageing and attaining the SDGs. **A key determinant of success in creating resilient health systems that enable healthy ageing will be close collaboration between the public and private sectors.** Nowhere is this more pressing than in the field of cancer, the second highest cause of death globally and a disease that continues to present significant challenges to every health system worldwide.<sup>3</sup>

Innovative therapies such as CAR T-cell therapy that can deliver targeted benefits across various disease areas have been revolutionary and show great promise for several conditions that are notoriously difficult to treat successfully, including blood cancer. CAR T-cell therapy is a custom-made, one-time cancer treatment that engineers a patient's own white blood cells and harnesses their immune system to treat certain types of cancers.

A panel discussion at the 2024 Global Coalition on Aging (GCOA) Silver Economy Forum in Berlin, Germany focused on healthy ageing through innovation and yielded the following calls to action:

- **Invest in equitable and accessible preventive health measures** to enhance quality of life, reduce costs, and support UN SDGs as populations age.
- **Support an innovation ecosystem and ensure equitable access** to enhance healthy longevity through increased lifespan and healthspan.

*"CAR T-cells is a very nice example of how innovation can change lives. This treatment can cure patients or extend the life of some patients and moreover a healthy life for patients. CAR T-cells were science fiction for most of us in science 10 or 15 years ago. It was totally unbelievable."*

*– Dan Tovar, Head of Medical Affairs Midsize Markets Europe, Kite Pharma*

<sup>1</sup> United Nations. (n.d.). [What is the UN Decade of Healthy Ageing? – The Platform](#)

<sup>2</sup> United Nations. (n.d.). [The 17 Goals](#).

<sup>3</sup> American Cancer Society (n.d.). [The Global Cancer Burden](#).

# Key Principles: Health System Resilience & Preparedness Through the Lens of Healthy Ageing

The GCOA *Alliance for Health Innovation* has identified the following three key principles, seen through the prism of cancer and reflected upon at the 2024 Silver Economy Forum in Berlin, that will need to be adhered to in order to drive success in preparing for the demographic shift that comes as we live longer lives than ever.

## 1. Acknowledge the importance of strengthening health system resilience to advance healthy ageing and reduce mortality in cancer, the second highest cause of death globally.

Mortality with many cancers, such as non-Hodgkin lymphoma, is strongly related to age, with the highest mortality rates being in older people. This largely reflects higher incidence and lower survival for non-Hodgkin lymphoma in older people.<sup>4</sup> In the United Kingdom between 2017 and 2019, on average each year around 6 in 10 deaths (59%) were in people aged 75 and over.

## 2. Recognise the multi-dimensional nature of the access challenge in combatting variations in cancer care for older patients.

To ensure access to potentially curative treatment within the short time window that enables patients with urgent medical needs to benefit, health systems must address national and systemic challenges simultaneously, including:

- Ensuring that the relevant technology is reimbursed for the patients that need it,
- Improving clinical awareness around diagnosis, and
- Investing in qualified nurses, physicians, and pharmacists with the right skills and equipment.

Patients undergoing CAR T-cell therapy are required to stay in qualified treatment centers after their infusion to be closely monitored and aid recovery. Some CAR T centers have limited resources to pay for necessary leukapheresis equipment, ICU beds, or expanding hematology wards. Some care centers may also face limitations in providing therapy to eligible patients in the short window that patients with urgent medical needs require.

*“When I was diagnosed, [I didn’t] think about ageing because [I thought] about all the things I wanted to do. I’ve been given a second life. This innovative treatment makes me even more ambitious, passionate, more full-of life than I was when I was 20 or 30. I want to give much more back because I’m so thankful and I’ve met a lot of people as a patient advocate who feel the same way.”*

*– Jonathan Clark, Patient Advocate, Inspire2Live*

<sup>4</sup> CancerResearchUK, <https://www.cancerresearchuk.org/health-professional/cancer-statistics/statistics-by-cancer-type/non-hodgkin-lymphoma/mortality#heading-One>

### **3. Collaborate with policymakers to promote a thriving biomedical innovation sector and make sustainable investments in health system capacity to avoid unnecessary variations in care for older people and deliver hope to people with cancer.**

Although access barriers differ across countries, they fundamentally stem from the same structural challenges around health system readiness, including delays in identifying eligible patients, due to limited knowledge and connections between community hospitals and clinics, and lengthy referral processes, caused by an absence of clear and well-defined referral pathways or national guidelines limiting the likelihood of a patient receiving the treatment.<sup>5,6</sup>

- A recent analysis covering Spain, Germany, Italy, and France found that up to 70% of clinically eligible patients did not receive CAR T for relapsed or refractory DLBCL.<sup>7</sup>

Pharmacological innovation has played a critical role in enabling us to live longer, healthier lives, despite non-communicable diseases such as cancer posing challenges for societies and health systems across the world. In order to create equitable outcomes at a population level, governments must invest in health system reform and champion policies that support a robust and sustainable innovation ecosystem that enables the introduction of new treatments.

To effectively plan for the future and an ageing global population, early and sustained collaboration is critical among all stakeholders, including industry, academia, health system leaders, government, patient groups, and payers, to ensure health systems are ready to allow patients to benefit from the latest anti-cancer therapy. This should manifest itself through:

- Horizon-scanning with regulators, policymakers, and payers,
- Strategic planning with policymakers, health system leaders, and patient groups, and
- Implementation and resource planning with health system and clinical leaders.

## **Advance Policies that Support a Thriving Innovation Ecosystem & Access to Effective Medicines**

**Leaders at the UN, the World Health Organization, private companies, and policymakers across the world all have a vital role to play in supporting healthcare system resilience to enable healthy ageing into the future.** Policies that support a thriving medical innovation sector and enable patients to access and utilize the most effective medicines as prescribed by their physician are critically important in protecting against disparities related to healthy ageing and ensuring all patients impacted by cancer have the opportunity to live longer, healthier lives.

<sup>5</sup> Data on File. Path to CAR T analysis for US and ACE

<sup>6</sup> Front. Med., 30 May 2023: Comparative analysis of CAR T-cell therapy access for DLBCL patients: associated challenges and solutions in the four largest EU countries Volume 10 - 2023 | <https://doi.org/10.3389/fmed.2023.1128295>. Accessed 5 November 2023

<sup>7</sup> Front. Med., 30 May 2023: Comparative analysis of CAR T-cell therapy access for DLBCL patients: associated challenges and solutions in the four largest EU countries, Volume 10 - 2023 | <https://doi.org/10.3389/fmed.2023.1128295>. Accessed 5 November 2023