Widening inequality threatens outcomes for Australians with neuroendocrine cancer

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LATEST NEWS

New analysis of Australian Institute of Health and Welfare (AIHW) data shows neuroendocrine cancer diverging from the national trend of improving and more equitable cancer outcomes, with worrying gaps opening along lines of income, geography and Indigenous status.

While overall cancer survival gains in Australia are slowly becoming more evenly shared, neuroendocrine cancer has emerged as an outlier.

The AIHW figures reveal that people living in the country's most disadvantaged communities face the highest mortality rates, rural and remote residents are experiencing the fastest rise in new diagnoses, and Aboriginal and Torres Strait Islanders have substantially higher incidence rates than non-Indigenous Australians across more than a decade of data.

"This isn't simply a cancer story. It's an equity story," said Meredith Cummins, CEO of NeuroEndocrine Cancer Australia. "Where you live, how far you are from specialist care, and your socioeconomic circumstances are increasingly influencing outcomes for people diagnosed with neuroendocrine cancer."

Neuroendocrine cancers are often hard to identify because their symptoms mimic more common conditions. Many patients are diagnosed only after the disease has progressed, when treatment choices can be

The analysis makes clear that improvements in detection, treatment and survival are not being shared equally. Socioeconomic disadvantage and distance from specialist care are linked to worse outcomes, suggesting health system advances are bypassing some of the people who need them most.

NeuroEndocrine Cancer Australia has been working to close that gap through virtual services. Last year, its specialist nurses, counsellors and dietitians delivered more than 75,500 minutes of one-to-one online support to people who cannot easily reach specialist services.

“This data reinforces what patients have been telling us for years,” Ms Cummins said. “No Australian should have a poorer chance of accessing specialist care simply because of their postcode.”

She added an urgent policy warning, saying those inequities demand action now. “These findings are a call to action. Earlier diagnosis, better access to specialist expertise and greater support for rural, regional and disadvantaged communities must become national priorities.”

Ms Cummins also flagged the risk to existing supports if funding lapses. “The Australian Cancer Nurse Navigation Program, which funds Specialist Cancer Nurse, Counselling and Dietician services online for NeuroEndocrine Cancer Australia, is key to addressing the inequities. Funding for this is due to expire in June 2027, and without further government commitment, this vital support will be impacted, creating further inequity.”