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The Cancer Control Challenge:
Better Understanding It to Better Face It

EPIDEMIOLOGICAL PROFILE OF MORBIDITY DUE TO NON-HODGKIN'S LYMPHOMA IN BRAZIL (2015–2024)

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Introduction: Non-Hodgkin lymphoma (NHL) comprises a heterogeneous group of malignancies arising from the clonal proliferation of B-cell or T-cell lineages and represents the most common hematological malignancy worldwide. Previous studies have demonstrated a rising incidence of this disease in recent years, with increasing prevalence particularly from the sixth decade of life onward. Therefore, epidemiological surveillance, including the description of mortality rates, is essential for the development of strategies aimed at early detection and timely treatment. **Objectives:** To describe the epidemiological profile of deaths due to Non-Hodgkin's lymphoma in Brazil over the past ten years. **Methods:** This is a retrospective, cross-sectional, and quantitative study. Data collection was performed using the Hospital Information System of the Brazilian Unified Health System (SIH/SUS), stratified by region, covering the period from 2015 to 2024. The variables analyzed included age group, sex, and race/skin color, evaluated according to the number of deaths and mortality rates. **Results:** During the analyzed period, 14,127 deaths due to NHL were recorded, corresponding to an average mortality rate of 8.33%. The Southeast region accounted for the highest proportion of deaths (44.7%) but presented the second-lowest mortality rate (7.95%), while the Central-West region registered the lowest mortality rate nationwide (7.87%). In contrast, the Northern region showed the highest mortality rate (9.12%), despite having the lowest absolute number of deaths (625; 4.4%). The remaining regions reported the following numbers and proportions of deaths: Central-West (895; 6.33%), South (3,064; 21.7%), and Northeast (3,225; 22.8%). Regarding age distribution, the highest frequency of deaths occurred in the 60–69 age group (3,348; 23.7%), with a progressive increase in mortality observed with advancing age, reaching 23.8% in the 80–89 age group. A higher number of deaths was observed among males (8,110; 57.4%). Concerning race/skin color, the highest absolute numbers were recorded among White (6,643; 47%) and mixed-race individuals (5,143; 36.4%), while the highest mortality rates were observed in Black (9.0%) and Indigenous (8.9%) populations. **Conclusion:** The findings reveal significant

sociodemographic disparities in NHL-related mortality in Brazil. Regional differences, particularly the elevated mortality rate in the Northern region, suggest structural limitations in access to specialized oncology services, potentially intensified by geographic and economic barriers acting as social determinants of health. The higher mortality observed among Black and Indigenous populations underscores persistent inequities in access to modern therapies and adequate follow-up care. These results highlight the urgent need to reassess oncology care models in Brazil, incorporating sociodemographic disparities and prioritizing resources for the populations most affected by this condition.

Keywords: Clinical epidemiology; non-hodgkin's lymphoma; oncology