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STAGES OF FORMATION OF MECHANISMS OF STATE REGULATION OF TRANSFORMATION OF MEDICAL CARE FOR PATIENTS WITH MALIGNANT NEOPLASMS IN UKRAINE

Abstract. The article discusses the stages and mechanisms of state regulation of reforming medical care for patients with malignant diseases in Ukraine, analyzes the action programs in the field of regulatory support, management entities and responsible persons; objects of reform, coordination of the introduced changes with other components of the social system. The shortcomings of the health care system in Ukraine are evidenced by an increase in mortality rates from malignant neoplasms, as well as ineffective protection of the population from the risk of catastrophic costs in the event of cancer. The main task is to reduce the incidence of malignant neoplasms in Ukraine through prevention, early detection, high-quality treatment of patients with malignant neoplasms, improving the quality of life of patients and reducing mortality. Achievement of certain tasks provides for several

important areas of work: provision of primary prevention of oncological diseases, the influence of risk factors and improving public awareness with the involvement of active actions; promoting early detection of malignant neoplasms; ensuring equal and permanent access to a capable network of health care institutions for the diagnosis and treatment of adult patients and children with malignant neoplasms; provision of rehabilitation, care and palliative care for patients with malignant neoplasms and support of nurses at all levels; improvement of information systems for registering malignant neoplasms and monitoring patients with malignant neoplasms to track the dynamics of results and measures to control malignant neoplasms; raising the level of professional education of doctors, nurses, training of management personnel; conducting phase II and III clinical trials with the subsequent use of the results for the control of malignant neoplasms.

The solution to this issue is on the verge of the social, organizational and economic aspects of public life. And it is obviously relevant - there is a continuation of the reform of medical care for patients with malignant neoplasms in Ukraine with the use of future innovative approaches, which should provide constitutional guarantees of unlimited access to medical care for patients with malignant neoplasms.

Keywords: reforming, medical care, malignant neoplasm, oncological service, state policy, innovative approaches.

ЕТАПИ СТАНОВЛЕННЯ МЕХАНІЗМІВ ДЕРЖАВНОГО РЕГУЛЮВАННЯ ТРАНСФОРМАЦІЇ МЕДИЧНОЇ ДОПОМОГИ ХВОРИМ ЗІ ЗЛОЯКІСНИМИ НОВОУТВОРЕННЯМИ В УКРАЇНІ

Анотація. Розглянуто етапи і механізми державного регулювання реформування медичної допомоги хворим зі злоякісними захворюваннями в Україні, проаналізовано програми дій в галузі, нормативно-правове забезпечення, суб'єкти управління і відповідальні особи; об'єкти реформування, узгодження запроваджуваних змін з іншими складовими суспільної системи. Про недоліки системи охорони здоров'я України свідчить зростання показників смертності від злоякісних новоутворень, а також неефективний захист населення від ризику катастрофічних витрат у випадку онкологічного захворювання. Основне завдання — зниження рівня захворюваності на злоякісні новоутворення в Україні шляхом профілактики, раннього виявлення, якісного лікування хворих зі злоякісними новоутвореннями, покращення якості життя пацієнтів та зниження рівня смертності.

Досягнення визначених завдань передбачає кілька важливих напрямів роботи: забезпечення первинної профілактики онкологічних захворювань, вплив факторів ризику та покращення поінформованості населення із залученням до активних дій; сприяння ранньому виявленню злоякісних новоутворень; забезпечення рівноправного і постійного доступу до спроможної мережі закладів охорони здоров'я для діагностики і лікування дорослих хворих і дітей зі злоякісними новоутвореннями; забезпечення реабілітації, догляду і паліативної допомоги хворим зі злоякісними новутвореннями і

підтримка доглядальників на всіх рівнях; покращення інформаційних систем реєстрації злоякісних новоутворень та спостереження за хворими зі злоякісними новоутвореннями для відстеження динаміки результатів і заходів контролю злоякісних новоутворнеь; підвищення рівня професійної освіти лікарів, середнього медичного персоналу, підготовка управлінських кадрів; проведення клінічних досліджень II та III фази з наступним використанням результатів для контролю злоякісних новоутворень.

Вирішення цього питання знаходиться на межі соціального, організаційного та економічного аспектів суспільного життя. І вочевидь нагальним є продовження реформування медичної допомоги хворим зі злоякісними новоутвореннями в Україні із застосуванням майбутніх інноваційніх підходів, які мають забезпечити конституційні гарантії необмеженого доступу до медичної допомоги хворим зі злоякісними новоутвореннями.

Ключові слова: реформування, медична допомога, злоякісне новоутворення, онкологічна служба, державна політика, інноваційці підходи.

ЭТАПЫ СТАНОВЛЕНИЯ МЕХАНИЗМОВ ГОСУДАРСТВЕННОГО РЕГУЛИРОВАНИЯ ТРАНСФОРМАЦИИ МЕДИЦИНСКОЙ ПОМОЩИ БОЛЬНЫМ СО ЗЛОКАЧЕСТВЕННЫМИ НОВООБРАЗОВАНИЯМИ В УКРАИНЕ

Аннотация. Рассмотрены этапы и механизмы государственного регулирования реформирования медицинской помощи больным со злокачественными заболеваниями в Украине, проанализированы программы действий в отрасли, нормативно-правовое обеспечение, субъекты управления и ответственные лица; объекты реформирования, согласование внедряемых изменеий с другими составляющими общественной системы. О недостатках системы здравоохранения Украины свидетельствуют повышение показателей смертности от злокачественных новообразований, а также неэффективная защита населения от риска катастрофических расходов в случае онкологического заболевания. Основное задание — снижение уровня заболеваемости злокачественными новообразованиями в Украине путем профилактики, раннего определения, качественного лечения пациентов со злокачественными новообразованиями, улучшение качества жизни пациентов и снижение уровня смертности.

Достижение определенных заданий предусматривает несколько важных направлений работы: обеспечение первичной профилактики злокачественных нововообразований, влияние факторов риска и улучшение информованости населения с вовлечением к активным действиям; содействие раннему выявлению злокачественных новообразований; обеспечение равноправного и постоянного доступа к обеспеченной сети учреждений охраны здоровья для диагностики и лечения взрослых и детей, больных злокачественными новообразованиями; обеспечение реабилитации, ухода и паллиативной помощи больным со злокачественными новообразованиями и поддежка сиделок на всех уровнях; улучшение информационных систем регистрации

злокачественных новообразований и наблюдение за больными со злокачественными новообразованиями для отслеживания динамики результатов и мероприятий контроля злокачественных новообразований; повышение уровня профессионального образования врачей, среднего медицинского персонала, подготовка управленческих кадров; проведение клинических исследований II и III фазы с последующим использованием результатов для контроля злокачественных новообразований.

Решение данного вопроса находится на стыке социального, организационного и экономического аспектов общественной жизни.Очевидно, актуальным есть продолжение реформирования медицинской помощи больным со злокачественными новообразованиями в Украине с использованием будущих инновационных подходов, которые имеют необходимость обеспечить конституционные гарантии неограниченого доступа к медицинской помощи больных со злокачественными новообразованиями.

Ключевые слова: реформирование, медицинская помощь, злокачественное новообазование, онкологическая служба, государственная политика, инновационные подходы

Formulation of the problem. Malignant neoplasms, together with diseases of the circulatory system, are decisive in the health of the population of Ukraine, given that they account for 12% of cases in the structure of mortality and 26% in the structure of disability. Today the number of patients suffering from malignant neoplasms and registered in oncological departments throughout Ukraine is more than 850 thousand. People. From 160 to 180 thousand people are registered annually with cancer, about 100 thousand people die from it.

Due to the late diagnosis of oncological diseases, there remains a significant number of patients who die within a year after the diagnosis is made, 38-40 percent. Of particular concern is the fact that a significant proportion of the deceased are citizens of working age. The high incidence of malignant neoplasms in the population of Ukraine and the high proportion of this pathology in the structure of mortality of the population requires new approaches to the development of methods and methods of prevention, early detection and effective treatment. This should take into account all the determinants that contribute to the emergence of malignant neoplasms and ways to eliminate them. In Ukraine, cancer is defined as a socially dangerous disease, therefore, registration of each case of malignant neoplasm at the state level is ensured.

Analysis of recent research and publications. The development and reforming of the health care sector and its legislative support has already become the subject of consideration of many researchers. Among them are T. Avramenko, M. Bilinska, N. Vasyuk, Z. Gladuna, L. Zhalilo, V. Knyazevich, N. Krizina, O. Martinyuk, V. Mos-

kalenko, V. Pashkov, J. Radisha, I. Rozhkov, I. Solonenko, N. Yanyuk, N. Yarosh and other scientists. Many works are devoted to the study of issues of public administration and the implementation of public policy in the field of prevention and control of cancer. The issue of ensuring the rights of cancer patients in Ukraine was considered from the point of view of providing such persons with palliative or hospice care (A. Tsarenko, Y. Gubsky, A. Skorina), the idea of the right to life without pain (V. Galunko and V. Naruzhnov, F. Brennan, SH Johnson).

The purpose of this research is to show the urgent need for further reforming medical care for patients with malignant neoplasms in Ukraine, outlining the existing strategic approaches in providing medical care to patients with malignant neoplasms, examining the stages of the formation of mechanisms of state regulation of the transformation of medical care, to consider the prospect of future innovative approaches in the fight with malignant neoplasms price Ukraine. **Presentation of the main material.** The main normative act regulating the activities of the oncological service and the provision of oncological care to the population of Ukraine after 1991 was the order of the Ministry of Health "On measures for further improvement and development of oncological care for the population" (from 30.12.1992 No. 208) [1]. In accordance with the order, planned treatment is prohibited to improve the quality of treatment cancer patients in the general medical network and it is obligatory to involve three specialists in the treatment of a cancer patient - a surgeon, a chemotherapist and a radiation therapist. In addition, the order determined the functioning of the oncological service in general and approved the following provisions on the oncological dispensary, the chief oncologist, the organizational and methodological office of the oncological dispensary, an oncology office of a polyclinic, a children's oncology office, a female examination room of a medical institution, a male examination room of a medical institution, a centralized cytological laboratory of treatment and prevention medical institution, an anticancer expert commission, a department of an automated control system of a regional (city) oncological dispensary, an oncochemotherapy department of an oncological dispensary, an outpatient chemotherapy room for patients at an oncological dispensary. The new edition of the order of the Ministry of Health of Ukraine from 01.10.2013 No. 845 "On the system of cancer care for the population of Ukraine" [2] was approved, the order entered into force on 18.02.2014 and is currently in force. The order provides for the improvement of the state system of anticancer control, improvement of the state of diagnosis, treatment and medical and social rehabilitation of cancer patients, which will help to reduce mortality from cancer, mortality of cancer patients of working age, reduce neglect rates, increase the survival rate of cancer patients, and reduce the degree of disability. According to the authors, the draft order [2] allows for the improvement and further development of a modern, economically feasible and effective system for organizing specialized care for cancer patients, depending on the needs of

the population and the characteristics of the region, which will ensure the highest possible and dignified quality of life for patients with oncological diseases and will increase the life expectancy of cancer patients, reduce the mortality rate of patients of working age, has great social, economic and moral and ethical significance for the whole society. Also, the draft order [2] approved the structure and functions of the subjects of the oncological service, namely the provision on the main institution for oncology, the National Cancer Register of Ukraine, the oncological institution (dispensary, center, hospital), the information and analytical department of the oncological institution, on the day hospital dispensary, oncochemotherapy department of an oncological dispensary, an office for outpatient chemotherapy of patients at an oncological dispensary, an oncological office of a medical and preventive institution, a female examination room of a medical and preventive institution, an office of cervical pathology of a medical and preventive institution, a mammological office of a medical and preventive institution, a male examination room of a medical and preventive institution institutions, a centralized cytological laboratory, an anti-cancer expert commission, an interregional oncological center. By order of the Ministry of Health of Ukraine dated 01.22.1996 №10 "On the establishment of the National Cancer Register of Ukraine", the state takes measures aimed at ensuring systematic control over the completeness and reliability of information on cancer incidence cases. In Ukraine, the National Cancer Register of Ukraine is functioning, where all information about the state of anticancer fight in the state is accumulated, which is a source for the operational management of the oncological service and determining the ways of its development and improvement. Cancer-register is an automated system for collecting, accumulating, storing and processing personalized information about cancer patients. After all, reliable information about the incidence, mortality and prevalence of malignant neoplasms, the state of diagnosis, treatment and rehabilitation of cancer, as well as the quality of life of patients with malignant neoplasms and patients in the terminal stage is the basis for effective public administration in the field of anticancer control [3].

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neoplasms and patients in the terminal stage is the basis for effective public administration in the field of anticancer control [3].

An assessment of the state of the provision of oncological care to the population showed that with an increase in the detection rate of malignant neoplasms in patients in the early stages to 53.1% and an increase in the coverage of special treatment to 68.7%, the proportion of patients who did not live 1 year from the moment of diagnosis remained high. - 31.4%, that is, every third patient died during the first year. These data indicate the need to improve medical care for the population of Ukraine suffering from malignant neoplasms.

In order to increase the effectiveness of national measures for prevention (primary, secondary, tertiary), early detection and treatment of malignant neoplasms, reduce mortality, reduce the number of cases due to malignant neoplasms, create conditions for living and improve the quality of life of patients suffering from malignant neoplasms, March 29 2002 By the Resolution of the Cabinet of Ministers of Ukraine № 392, the Oncology Program for 2002–2006 was approved, and on July 24, 2006, the Draft State Program "Fight against Oncological Diseases for 2007–2016" was created. The main goal of the National Program for Combating Cancer Diseases adopted in 2010 by the Parliament of Ukraine for the period until 2016 was to increase the effectiveness of government measures to improve the quality and availability of care for patients with malignant diseases, to introduce state guarantees of medical care, to improve conditions for extending the life of cancer patients and improving its quality. The implementation of this strategy, according to forecasts of oncologists, should ensure a reduction in mortality from cancer pathology by 8–10% by 2016. According to industry statistics, in 2006, almost 35% of newly registered malignant neoplasms ended up in the third and fourth stages of cancer, when the chances of effective specialized treatment (combined and complex) and healing were unlikely, as a result of which almost every third patient with a malignant disease was in advanced stages within a year of diagnosis was dying. Despite the improvement in the quality of the provision of specialized oncological care to the population of our state due to government measures, the expected cardinal changes in prevention and early diagnosis and, accordingly, the effectiveness of specialized treatment of patients with malignant diseases did not occur [4].

The main problems and shortcomings of the National Cancer Control Program for the period until 2016, approved by the Law of Ukraine dated December 23, 2009 №1794-VI (hereinafter the Program), in this, according to experts: 1) the program provided for the formation of interregional cancer centers, reference laboratories of morphological , cytogenetic and molecular diagnostics of malignant neoplasms in the absence of regulatory documents; 2) an unrealistic volume of tasks and activities was laid down, which cover all components of the organization of anti-cancer struggle, in comparison with the real possibility of budget funding; 3) there were no clear quantitative and qualitative criteria for assessing the

implementation of the Program: their absence is impossible to conduct objective monitoring and control over the use of budget funds; 4) when forming the Program, the needs and benefits of the regions were not analyzed; 5) Program for the period 2009–2016. were financed only partially, mainly for the purchase of funds for chemotherapy and accompanying drugs, according to data released in the period 2010–2015. in accordance with the financing of the Program (the total volume is targeted at UAH 3756115700), at the expense of the state budget - UAH 3238663400) only 56977000 UAH was received, that is, 15.2% of the total planned by the state and 17.6% of the directly promised [5].

But there have already been positive shifts: thanks to the State Program "Oncology" for 2002-2006 adopted by the Cabinet of Ministers of Ukraine, the Draft State Program "Fight against Cancer Diseases for 2007-2016", the Decree of the President of Ukraine "On urgent measures to reform the security system health of the population "of December 6, 2005, preventive technologies (screening programs), new modern approaches to early diagnosis and specialized treatment in clinical oncology, adopted throughout the world, began to develop. The issues of prevention (primary, secondary, tertiary) and early diagnosis and treatment of malignant neoplasms have become priorities in the oncological service of Ukraine. The solution of these critical issues is impossible without fundamental medical and demographic studies of malignant neoplasms.

In the Intersectoral Comprehensive Program "Health of the Nation" for 2002-2011, a separate section "Fight against cancer" is devoted to the above problem, the points of which include the development of regional systems of measures to reduce the carcinogenic effect on humans, prevent cancer at all levels, improve the equipment of diagnostic and treatment units for the provision of medical care to cancer patients in order to improve its quality and timeliness [6].

The result of many years of fundamental and applied scientific research has been the development of measures for the primary and secondary prevention of malignant neoplasms. In particular, the primary prevention of cancer is to create favorable living conditions, thanks to which the genetic risks of the onset of the disease are not realized, for example, we are talking about quitting smoking, drinking too much alcohol, fighting excess weight, physical inactivity and preventing sexually transmitted infections. Secondary Prevention is a preventive examination and timely examination, timely treatment of precancerous conditions and early cancer treatment. For practical health care in terms of implementation, the main problem remains secondary prevention and early detection of cancer, there is a system of measures aimed at identifying chronic pre-tumor and tumor diseases in the initial stages.

The development and implementation into practice will require screening programs, instrumental and laboratory methods for studying high-risk groups of diseases and groups with precancerous pathologies, the effectiveness of which has been proven economically.

Considering that in 2006 almost 35 % of newly registered malignant

neoplasms ended up in the third and fourth stages of cancer, the importance of providing political assistance was undeniable. During the period of independence of our state, the construction of a system of palliative and hospice care began, but in order to better understand this process, we will briefly analyze the important milestones in the formation and development of this assistance in Ukraine. The first hospice-type institutions in Ukraine were opened (with the assistance of international organizations): in Lviv (1996), Ivano-Frankivsk (1997), Korosten (1998), which are currently the leading institutions providing palliative and hospice care inpatient and outpatient. In 1999. the Association for Low-Innovation and Palliative Therapy was created, which developed the Manifesto of the Hospice Movement in Ukraine. In 2001. The All-Ukrainian charitable organization Council for the Protection of the Rights and Safety of Patients, founded with the support of the International Renaissance Foundation, for the first time in our country drew public attention to the pressing issues of ensuring the rights of incurable patients. So, in the approved by the Resolution of the Cabinet of Ministers of Ukraine №14 of 10.01.2002. Intersectoral comprehensive program "Health of the Nation" for 2002–2011. It was envisaged to create networks of hospices for symptomatic treatment of cancer patients in the terminal stage, to expand the network of day care and hospitals at home, institutions (departments) of medical and social care and hospices. In 2006. an Interdepartmental Working Group was created to improve the legal framework for palliative care, and in 2007. All-Ukrainian Association of Palliative Care. In 2008, in accordance with the Order of the Ministry of Health of Ukraine dated 04.17. №210, the Coordination Council for Palliative and Hospice Care at the Ministry of Health of Ukraine was created, which developed a draft concept of the State Target Program for the Development of Palliative and Hospice Care in Ukraine for 2010-2014 [7]. In 2008. By order of the Ministry of Health of Ukraine №159-0 of 24.07.2008, the Institute of Palliative and Hospice Medicine of the basic scientific, methodological and clinical institution of the Ministry of Health of Ukraine was established to provide palliative and hospice care. Also created: the department of palliative and hospice medicine at the National Medical Academy of Postgraduate Education named after P.L. Shupik (2009), which provides professional training for doctors and nurses in this area; All-Ukrainian public organization. In Ukraine, the state policy for the development of the palliative and hospice care system has not yet been formed. Although during the study period certain shifts and successes were achieved in the palliative and hospice care system, initiatives, policy priorities for the development of this system, and their lobbying in political circles are formed and carried out, as a rule, "from below". Often, efforts, attempts by initiative groups consisting of progressive doctors, scientists, and public organizations to solve pressing issues in this system at the state level are met with indifference on the part of politicians, political parties and are leveled by them. This is confirmed by the rejection of the government of

Ukraine of the draft Concept of the State Target Program for the Development of Palliative and Hospice Care for 2010–2014 [7], which in 2008. developed by the "Ukrainian League for the Development of Palliative and Hospice Care", representatives of other public organizations, specialists, scientists in this system and was submitted to the Ministry of Health of Ukraine for consideration by the CMU. Ukrainian politicians, officials, representatives of the executive branch remain insufficiently informed about the scale, current trends towards deepening the problems of palliative and hospice care, superficially understanding its socio-economic and humanitarian significance [8]. Organization "Ukrainian League for the Promotion of Palliative and Hospice Care" (2010), which has its own organizations in almost all regions of Ukraine. There are serious problems in the organization of the provision of palliative and hospice care, which are largely determined by shortcomings in the organizational and other mechanisms of government in this area. The scale of coverage of these problems is nationwide, proving the need for their urgent consideration and solution at the level of the highest, central government bodies, which must ensure the proper regulation of public relations in this system, the realization by incurable patients of their constitutionally guaranteed right to medical care and appropriate support. An urgent need is the development and implementation of such an organizational mechanism for the state management of palliative and hospice care, which would make it possible not only to effectively solve these problems, but also to constantly ensure the provision of such care to both adults and children with malignant neoplasms in the necessary volumes and at the proper level of quality.

Thus, the level of medical care for the population of Ukraine suffering from malignant neoplasms still does not correspond to real needs and modern requirements, and the provision of effective and economically acceptable medical care for patients with malignant diseases should remain one of the priority tasks of protecting public health. To solve this problem, in addition to the clinical part, you need several more components that are on the verge of the social, organizational, economic aspects of a fast life [7, 9]. There is a significant need to organize and conduct rehabilitation measures for able-bodied patients with primary disability due to malignant neoplasms. According to statistics from the Ukrainian State Research Institute of Medical and Social Problems of Disability (based on the annual reports of the Medical and Social Expert Commission, since 2001), the proportion of able-bodied patients among persons with disabilities caused by malignant neoplasms in different regions of Ukraine varies within 50–90 %, in Ukraine as a whole — 65–75 %. Model programs and standards for individual rehabilitation of disabled adults with malignant diseases have not been developed in our country. The Ministry of Health does not have a system for the rehabilitation of oncological patients, and the Ministry of Social Policy does not have normative documents for such rehabilitation. Very few rehabilitation programs for disabled people with malignant neoplasms are deve-

loped and implemented locally (within individual associations and rehabilitation organizations (more often calculated), separate regional programs). Therefore, research and practical steps aimed at ensuring the rehabilitation of cancer patients / invalids not only in the process of standard treatment for malignant neoplasms, but also their longer recovery are relevant. Full rehabilitation is an important component not only of preventing recurrence of malignant neoplasms and complications of anticancer treatment, but also improving the quality of life of patients, restoring their integration into public life, which will have not only purely medical, but also positive social and economic effects [10, 11].

During the XIII Congress of Oncologists and Radiologists of Ukraine, which took place on May 26–28, 2016 in the city of Kiev with the support of the Ministry of Health Protection of Ukraine, the National Academy of Sciences (NAS) of Ukraine, the National Academy of Medical Sciences (AMS) of Ukraine and the National Cancer Institute The Ministry of Health of Ukraine considered the directions of oncology development by creating a general concept for the development of the national system of oncological care in the sequence: “principles” - the logic of development “structure” The slogan of the concept was defined as “The person in the spotlight”. Accordingly, strategic goals were formed: Strategic goal

№ 1 - a consistently high level of quality of medical care; Strategic cylinder № 2 — the formation of an advanced scientific innovation system; Strategic goal № 3 — creation and development of a new educational system; Strategic goal № 4 is to create a highly efficient system for the transfer of advanced technologies. Industry experts note the need to attract investments for the normal development of the industry and separately touched on the key principles of budget policy, in particular: 1) the development of multichannel financing, maximizing it through off-budget sources (in particular, an important resource of off-budget financing, helps to attract investors to expert support of activities and projects, management training, etc., public-private partnerships, 2) participation in multicenter randomized studies of II and III phases to study the effectiveness of drugs in the treatment of patients with cancer (benefits are received by patients, doctors, researchers); 3) attracting investments from international (private and government) organizations to finance scientific research ("Horizon 2020". Action Plan "Ukraine — European Union", 7th EU Framework Program, etc.) [12].

The transformation and reforms carried out in Ukraine are inextricably linked with the search for fundamentally new methods of organization and management of the medical sector. This requires adequate changes in the planning structure of material and technical support for the production of medical services and, accordingly, necessitates improving the accounting information system necessary for making management decisions. The efficiency of economic activities of medical institutions largely depends on the assessment and rational use of inventories.

Based on the needs of today, an urgent need is the analysis of key perfor-

mance indicators and its planning of individual medical institutions. The urgent need for such an analysis is dictated by the requirements of the functioning of a specialized medical institution in a large city. In order to plan the studies of the medical institution selected for analysis in accordance with the priority, the purpose of the analysis is determined; users of research results; the prospect of the study (society, government, medical institution, patient); time parameters of the calculation (length of stay of the patient in the hospital, period until complete recovery, life expectancy of the patient); group of patients (age, gender, diagnosis, comorbidities, etc.); choice of technology and drugs in comparison (best alternative, standard technology, etc.). When choosing, the parameters should be interrelated. If the results of the pharmacoeconomic analysis are needed to compile the form of an individual hospital, then only the costs associated with the patient's stay in the hospital will be taken into account in the calculations [13].

The prophylactic focus of the fight against cancer should be constitutive in the oncological program, which will allow in the near future to reduce the incidence by 50%. Today, there are new directions in the search for financing of the oncological industry and its tariffication based on state norms and standards of oncological care; in addition, there are significant shortcomings in the organization of the procurement of drugs for the treatment of cancer patients and their further distribution in the network of oncological institutions. their autonomization.

Conclusions: Having considered the stages of the formation of mechanisms of state regulation of transformation in the provision of medical care to patients with malignant diseases in Ukraine, within the framework of providing a patient with malignant neoplasms with the constitutional right to receive effective treatment, the industry needs further reform. It is necessary to use innovative approaches in the fight against malignant neoplasms, namely: the implementation of a targeted state policy on the formation of a National Strategy in the Fight against Malignant Neoplasms, aimed at the development of multifunctional financing, management training, participation of Ukraine in multicenter clinical randomized trials of phases II and III with participation of patients with malignant neoplasms, attracting investments from international organizations (private and government) at the regional and local levels; improving performance indicators and planning the work of individual medical oncological institutions (oncological dispensaries, modern cancer care centers), compiling local forms, taking into account the pharmacoeconomic analysis, and also the creation of an appropriate legislative framework and program for the implementation of the national concept of combating malignant neoplasms.

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