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New Approach to Reviewing Cancer Drugs Starts March 1, 2007
February 28, 2007

A new cancer drug review process begins its pilot project in Canada on Thursday in all provinces and territories except Quebec.

The provinces pay for most cancer drugs, with each one doing its own review and deciding on when and if to pay for a medication.

Given the high price of some new drugs, many provinces will only pay under special circumstances or not at all, resulting in a patchwork of coverage, said Dr. Tony Fields, vice-president of medical affairs for the Alberta Cancer Board in Edmonton.

"This is hugely confusing and disturbing to patients, and to cancer specialists," said Fields. "Why is a drug available on the other side of the border or not here?"

In some provinces, patients end up paying for expensive cancer drugs out of pocket. The drugs may be given in private clinic.

Provinces look to Ontario



Judy Young's life could be extended by four years if she could afford a new colorectal cancer drug. (CBC)

The new national system of reviewing cancer drugs is supposed to help change things beginning on March 1, when drug companies will submit new applications to Ontario's committee to evaluate drugs and Cancer Care Ontario.

"It will at least enable the final decision-makers to work from a common recommendation that has been based on a thorough review of the evidence," said Dr. Carol Sawka, vice-president of clinical programs at Cancer Care Ontario in Toronto.

Quebec has its own program to evaluate new cancer drugs, but is contributing to the national program by sharing information and best practices.

The Ontario decision will be more of a guideline than a ruling, and each province will continue to decide whether or not to pay for the drug.

It's hoped that the national approach will give cancer boards more clout to negotiate better prices with drug companies, which may help end the inequities in treatment among provinces.



Dr. Tony Fields says that the patchwork of cancer drug coverage across provinces is frustrating. (CBC)

The process is not getting universal support.

Dr. Rob Grimshaw of Cancer Care Nova Scotia said the province will continue to do its own parallel drug review until it sees how well the new process works.

'Why are they setting the standard?'

Suzanne Aucoin of St. Catharines, Ont., was treated with two expensive drugs, Avastin then Erbitux, for her colorectal cancer. Ontario's ombudsman has ordered the province to reimburse her medical and legal expenses because her case was so poorly handled.

"You have the worst province on record leading this review," said Aucoin. "Why are they setting the standard?"

The change comes too late for Judy Young of Halifax. The former nurse was diagnosed with colorectal cancer four months ago.

Young, who has a husband and an eight-year-old son, could have a year to live, five years if she does well on chemotherapy, or maybe longer with Avastin.

British Columbia and Newfoundland and Labrador pay for Avastin, but because Young lives in Nova Scotia, which does not, she would have to pay \$8,000 a month for the medication.

"I'm not putting my family into bankruptcy because of that," Young said of her decision to go without Avastin. "That doesn't help their life so I'm not."