

International CME webinar

# GOOD PRACTICES FOR IMPROVING THE EFFICIENCY OF CANCER TREATMENT IN EUROPE

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*Cancer Economics and Access to innovative drug treatment*

Scientific  
Coordination



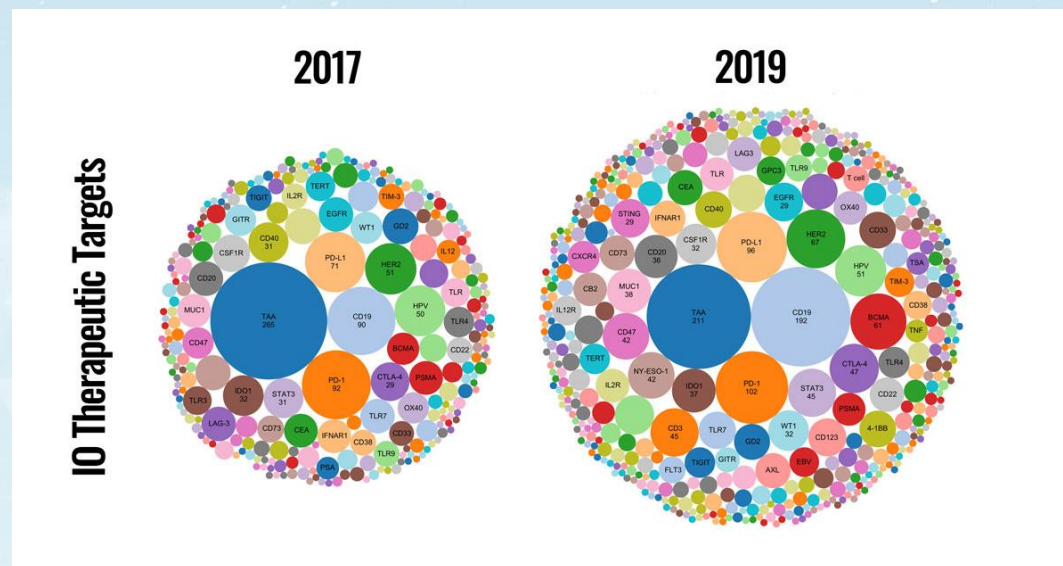
Under the  
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Provider  
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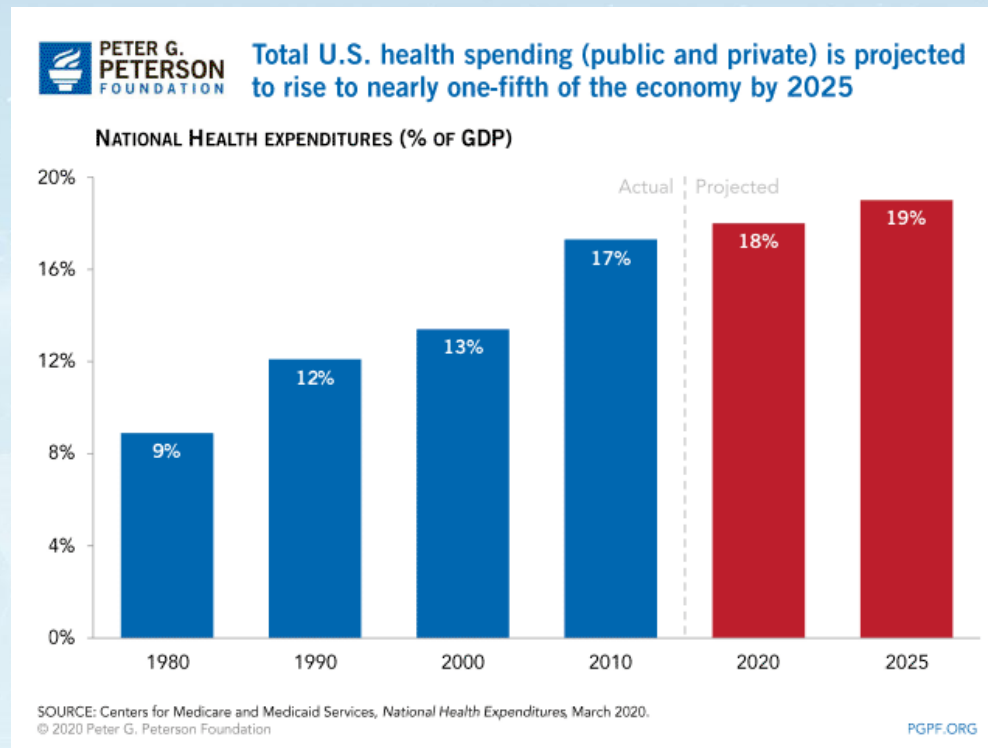


# In the landscape of oncology, impressive results

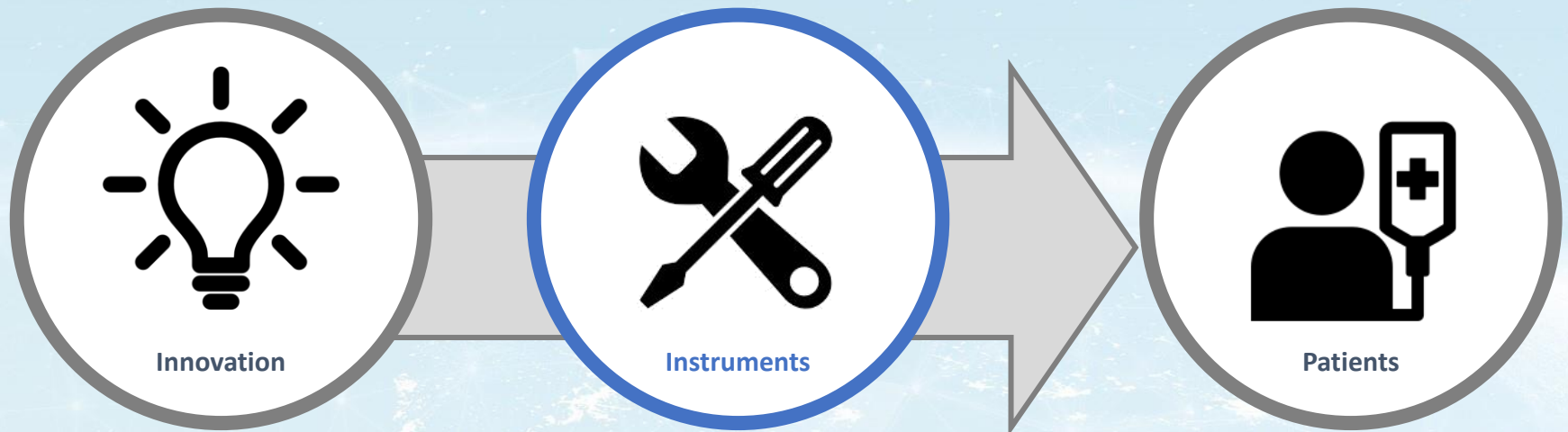




# Costs of cancer are increasing

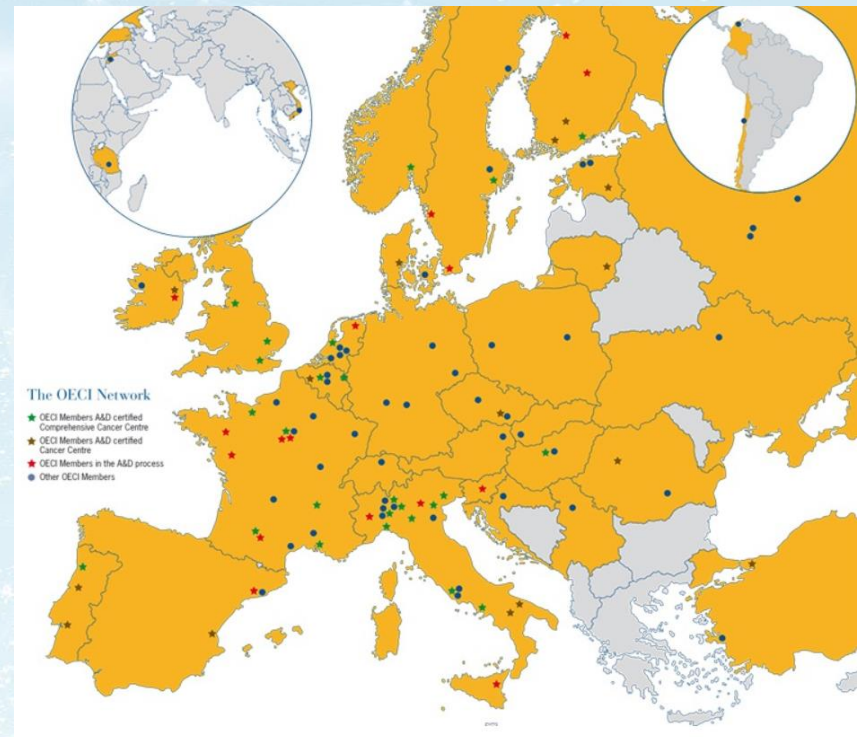


Instruments are needed to bring innovations to patient  
and guarantee equal access



# Organisation of European Cancer Institutes (OECI)

Goal: to improve quality and equity  
in Cancer Care and Research



## Mission & objective of WG Health Economics:

Mission: creation of optimal conditions for coverage of innovative treatments and adequate implementation in clinical practice.

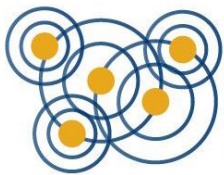
-> Involvement of HTA expertise in early stages of translational oncology research will contribute to that aim.

Objective: to raise awareness and improve the expertise on HTA related issues and -methods in cancer research and -services.



# EFPN aims & initiatives

- To achieve **fair prices for cancer medicines** and works towards a **sustainable pharmaceutical market** which produces accessible, affordable and truly innovative medicines for all patients.



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krebsliga schweiz  
ligue suisse contre le cancer  
lega svizzera contro il cancro



# Ongoing projects with OECD - EFPN



## **1. Patient access to cancer medicine and availability of drugs**

**Interviews with hospital pharmacists**

## **2. Socio-economic consequences trial for cancer patients**

**Patient-trial/survey: for hospitals and patient organizations**



# Patient access to cancer medicine and availability of drugs



## Aim

Analyze differences in actual availability & timely access of innovative cancer treatments from a patient perspective on hospital level

**1. Availability** of the innovative medicines to patients in hospitals between and within countries

- Context of first availability
- Access to important indications

**2. Timely access** of the innovative medicines to patients in hospitals between and within countries

- Time between between EMA approval and patient access
- Time between between national approval and patient access

## Method

- Interviews and surveys with hospital pharmacists

# Availability of the innovative medicines to patients

	Switzerland					Italy		Hungary			Belgium					Netherlands		
Hospitals	Hosp 1	Hosp 2	Hosp 3	Hosp 4	Hosp 5	Hosp 6	Hosp 7	Hosp 8	Hosp 9	Hosp 10	Hosp 11	Hosp 12	Hosp 13	Hosp 14	Hosp 15	Hosp 16	Hosp 17	Hosp 18
Olaparib																		
Niraparib																		
Nivolumab																		
Ipilimumab																		
Osimertinib																		
Ibrutinib										NA								

is/was available in early access

Is only available in regular context

was available off-label

not available at all

No context

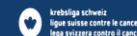
NA: None of the indications of this medicine is treated in this hospital

Comprehensive cancer centers  
University hospital

A lot of diversity in context first access among hospitals



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	Switzerland					Italy		Hungary		Belgium					Netherlands			France	
	Hosp 1	Hosp 2	Hosp 3	Hosp 4	Hosp 5	Hosp 6	Hosp 7	Hosp 8	Hosp 9	Hosp 10	Hosp 11	Hosp 12	Hosp 13	Hosp 14	Hosp 15	Hosp 16	Hosp 17	Hosp 18	Hosp 19
Olaparib																			
Available	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✗	✓	✓	✓	✓	✓
Breast cancer	✓	✓	✓	?	?	✓	✓	✓	?	✓	✓	✓	✗	✗	?	✓	✓	✗	?
Ovarium cancer	✓	✓	✓	?	?	✓	✓	✓	?	✓	✓	✗	✓	✗	?	✓	✓	✓	?
Adenocarcinoma of the pancreas	✗	✓	✓	NA	?	✓	✗	✓	?	✓	✗	✗	✗	✗	?	✓	✗	✗	?
Prostate	✓	✓	✗	?	?	✗	✗	✗	?	✓	✓	✓	✗	✗	?	✓	✗	✗	?
Niraparib																			
Available	✓	✓	✓	✓	✗	✓	✓	✓	✗	✗	✗	✓	✓	✗	?	✗	✓	✓	✓
Ovarian cancer	✓	✓	✓	?	✗	✓	✓	✓	✗	✗	✗	✓	✓	✗	?	✗	✓	✓	✓
Nivolumab																			
Available	✓	✓	✓	✗	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	?	✓	✓	✓	✓
Melanoma	✓	✓	✓	✗	?	✓	✓	✓	✓	NA	✓	✓	✓	✓	?	NA	✓	✗	?
Melanoma (in combination with ipilimumab)	✓	✓	✓	✗	?	✗	✓	✓	✓	NA	✓	✓	✓	✓	?	NA	?	✗	?
Non-small cell lung cancer	✓	✓	✓	✗	?	✓	✓	✓	✓	✓	✓	✓	✓	✓	?	✓	✓	✓	?
Renal carcinoma	✓	✓	✓	NA	?	✓	✓	✓	✓	✓	✗	✓	✓	✓	?	✓	✓	✓	?
Renal carcinoma (in combination ipilimumab)	✓	✓	✓	NA	?	✗	✓	✓	✓	✓	✓	✓	✓	✓	?	✗	?	✗	?
Head and neck squamous cell carcinoma	✓	✓	✓	NA	?	✓	✓	✓	✗	✓	✓	✗	✗	✓	?	NA	✓	✓	✓
Ipilimumab																			
Available	✓	✓	✓	✗	✓	✓	✓	✓	✓	✗	✓	✓	✓	✓	?	✗	✓	✗	✓
Melanoma	✓	✓	✓	✗	?	✓	✓	✓	✓	NA	✓	✓	✗	✓	?	✗	✓	✗	?
Melanoma (in combination with Nivolumab)	✓	✓	✓	✗	?	✗	✓	✓	✓	NA	✓	✓	✓	✓	?	✗	✓	✗	?
Renal carcinoma (in combination Nivolumab)	✓	✓	✓	NA	?	✗	✓	✓	✓	✗	✓	✓	✓	✓	?	✗	✓	✗	?
Osimertinib																			
Available	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✗	?	✓	✓	✓	✗
Non-small cell lung cancer	✓	✓	✓	?	?	✓	✓	✓	✓	✓	✓	✓	✓	✗	?	✓	✓	✓	✗
Ibrutinib																			
Available	?	✓	✓	✓	✓	✓	✗	✓	✓	✗	✓	✓	✗	✗	?	✓	?	?	?
Mantle cell lymphoma	?	✓	✓	NA	?	✓	✗	✓	NA	NA	✓	✓	✗	✗	?	✓	?	?	?
Chronic lymphocytic leukaemia (CLL)	?	✓	✓	?	?	✓	✗	✓	?	NA	✓	✓	✓	✗	?	✓	?	?	?
Chronic lymphocytic leukaemia (CLL) (combo bendamustine and rituximab)	?	✓	✓	?	?	✗	✗	✓	?	NA	✗	✗	✗	✗	?	✓	?	?	?
Chronic lymphocytic leukaemia (CLL) (combo obinutuzumab or rituximab)	?	✓	✗	?	?	✗	✗	✓	?	NA	✗	✓	✗	✗	?	✗	?	?	?
Comprehensive cancer centers		✓	✓	NA	NA	✓	✗	NA	NA	NA	✓	✓	NA	✗	?	✗	?	?	?
University hospital																			
NA: Indication not treated in this hospital																			

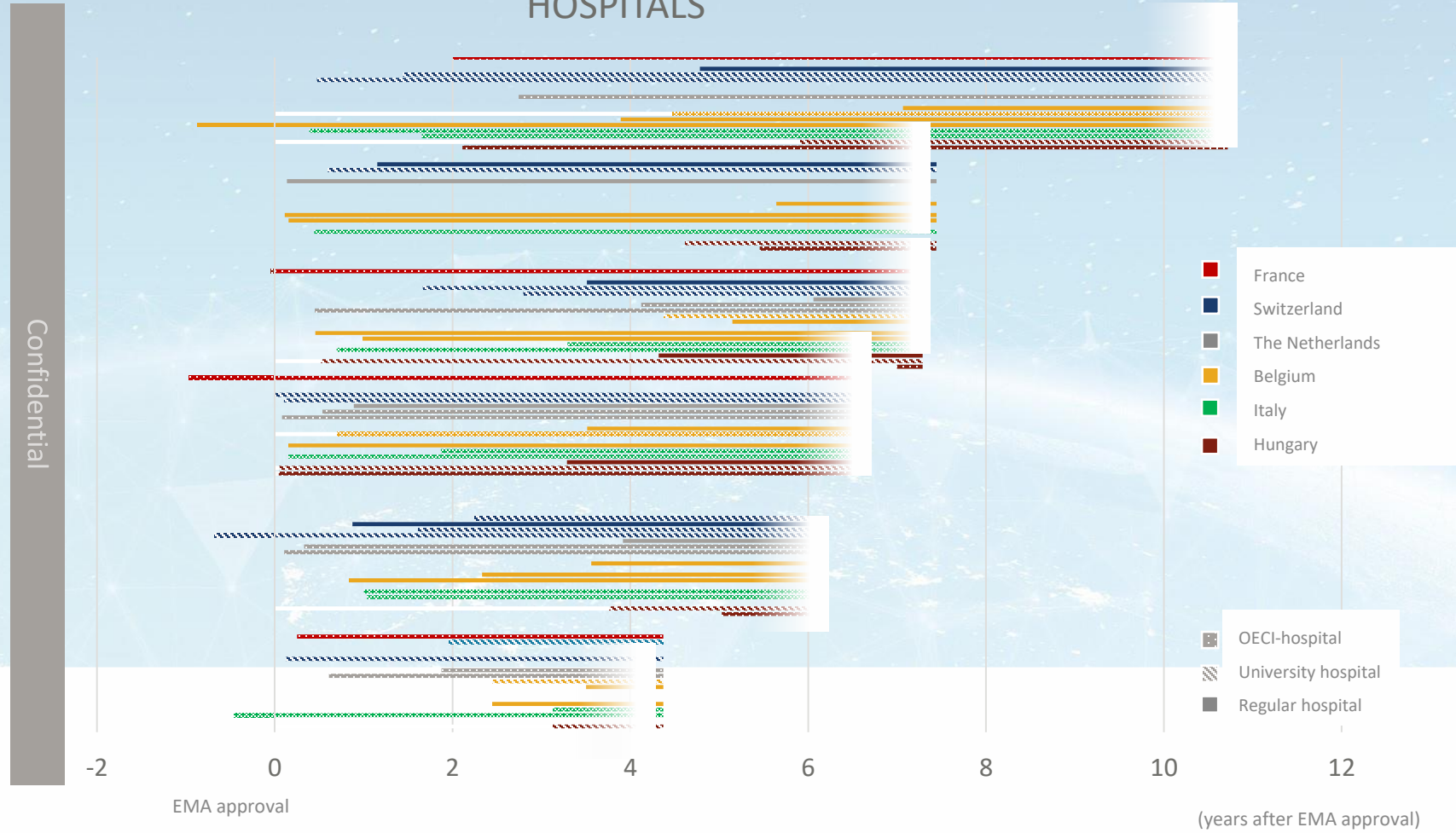


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# TIME FROM EMA APPROVAL TO PATIENT ACCESS IN DIFFERENT HOSPITALS



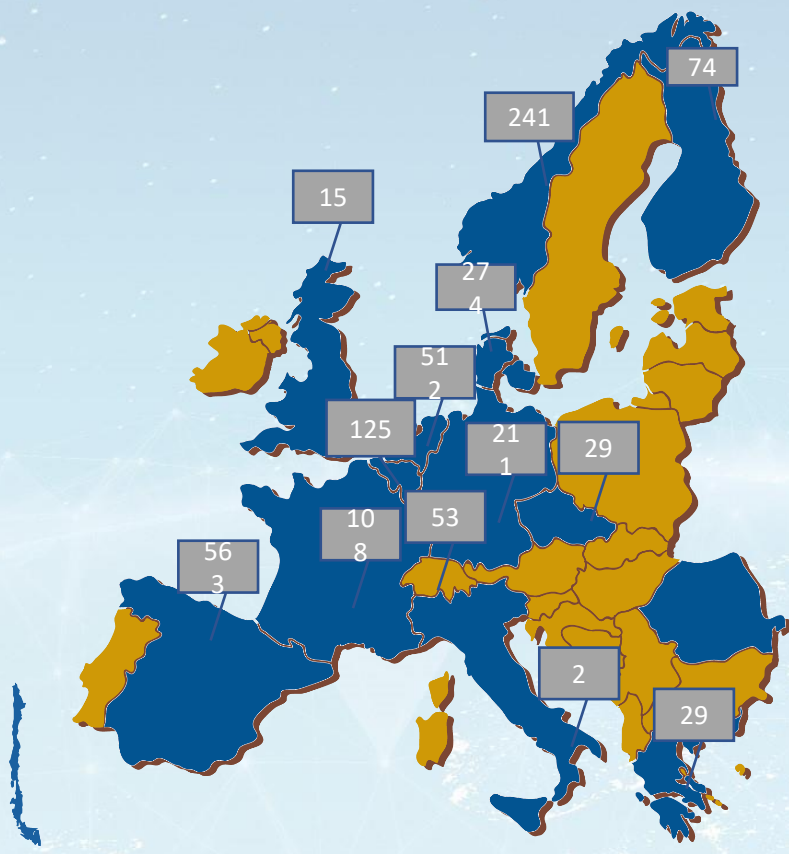
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# Patient survey

- 41 questions
- Topics addressed
  - Demographics, type of cancer, stage and treatment
  - Financial effects (includes FIT questionnaire)
  - Stress related to this and coping strategies
  - QoL assessment (EQ-5D questionnaire)
- Translated in 16 languages
- Anonymous/pseudo-anonymized





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## Hospitals



## Patient organizations & cancer societies





# Socio-economic consequences for cancer patients (SEC-trial)

**Project in collaboration with:**  
Prof. M. Schlander, Heidelberg,  
Germany

- **NOW OPEN FOR ACRUAL!**
- Assess the socio-economic distress after cancer diagnosis
  - patient perspective
  - multi-country / Europe-wide
- Distribution of a survey among patients through 15 hospitals and 20 +patient organizations
  - **Currently 2550+ patients reached**

Country	ES	NL	DK	NO	DE	CY	BE	FR	FI	CH	CZ	GR	UK	IT
#Patients reached	563	512	274	241	211	221	125	108	74	53	29	29	15	2

# Invitation for patients to participate in our trial



## Financial consequences of cancer for patients

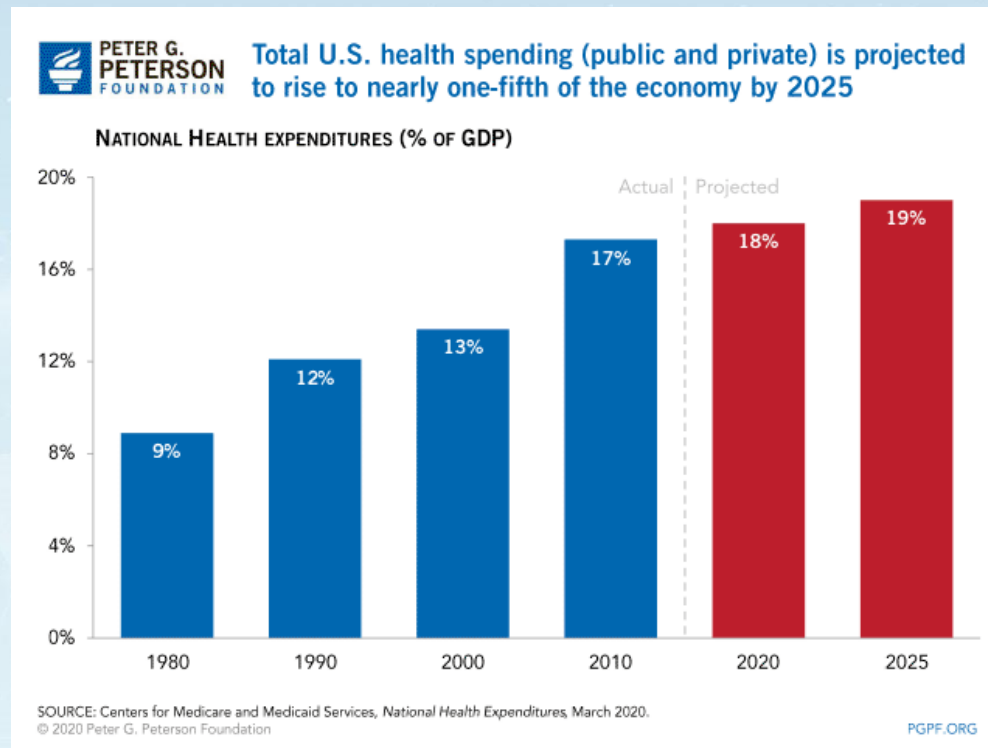


[link.nki.nl/sec](https://link.nki.nl/sec)  
[efpn.eu/survey/](https://efpn.eu/survey/)



Represent your country? Contact [sectrial@nki.nl](mailto:sectrial@nki.nl)

# Costs of cancer are increasing





# Earlier work

THE LANCET  
Oncology

## Actual costs of cancer drugs in 15 European countries

Wim H van Harten ✉ • Anke Wind • Paolo de Paoli • Mahasti Saghatichian • Simon Oberst

Volume 2, Issue 1

January 2022



RESEARCH ARTICLE | JANUARY 27 2022

## Affordable Prices Without Threatening the Oncological R&D Pipeline—An Economic Experiment on Transparency in Price Negotiations

Nora Franzen • Andreas Ziegler • Giorgia Romagnoli • Valesca P. Retèl • Theo J.S. Offerman • Wim H. van Harten ✉

Volume 12, Issue 2

1 February 2022

CANCER  
DISCOVERY

SCIENCE IN SOCIETY | FEBRUARY 09 2022

## Improving the Affordability of Anticancer Medicines Demands Evidence-Based Policy Solutions

Nora Franzen; Giorgia Romagnoli • Andreas Ziegler; Valesca P. Retèl • Theo J.S. Offerman • Wim H. van Harten ✉

JAMA Oncology | Review

## Evidence Underlying Policy Proposals for Sustainable Anticancer Drug Prices A Systematic Review

Nora Franzen, MSc; Valesca P. Retèl, PhD; Winnie Schats; Wim H. van Harten, MD, PhD

# Transparency can have positive effects

... But a comprehensive approach than price transparency alone is needed.

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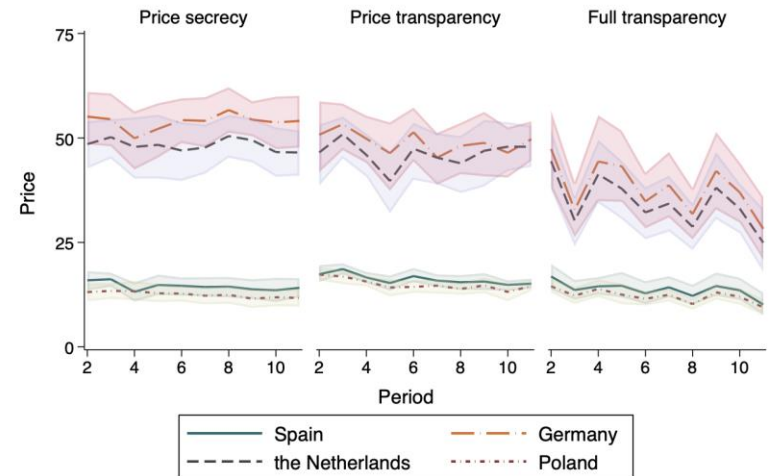


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Figure 1



Prices conditional on agreement, 95% confidence intervals

# Cancer Economics and Access to innovative drug treatment

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**WG attendees, Julie Vancoppenolle & Nora Franzen**

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**Cancer Economics and Access to innovative drug treatment**

**Thank you!**

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