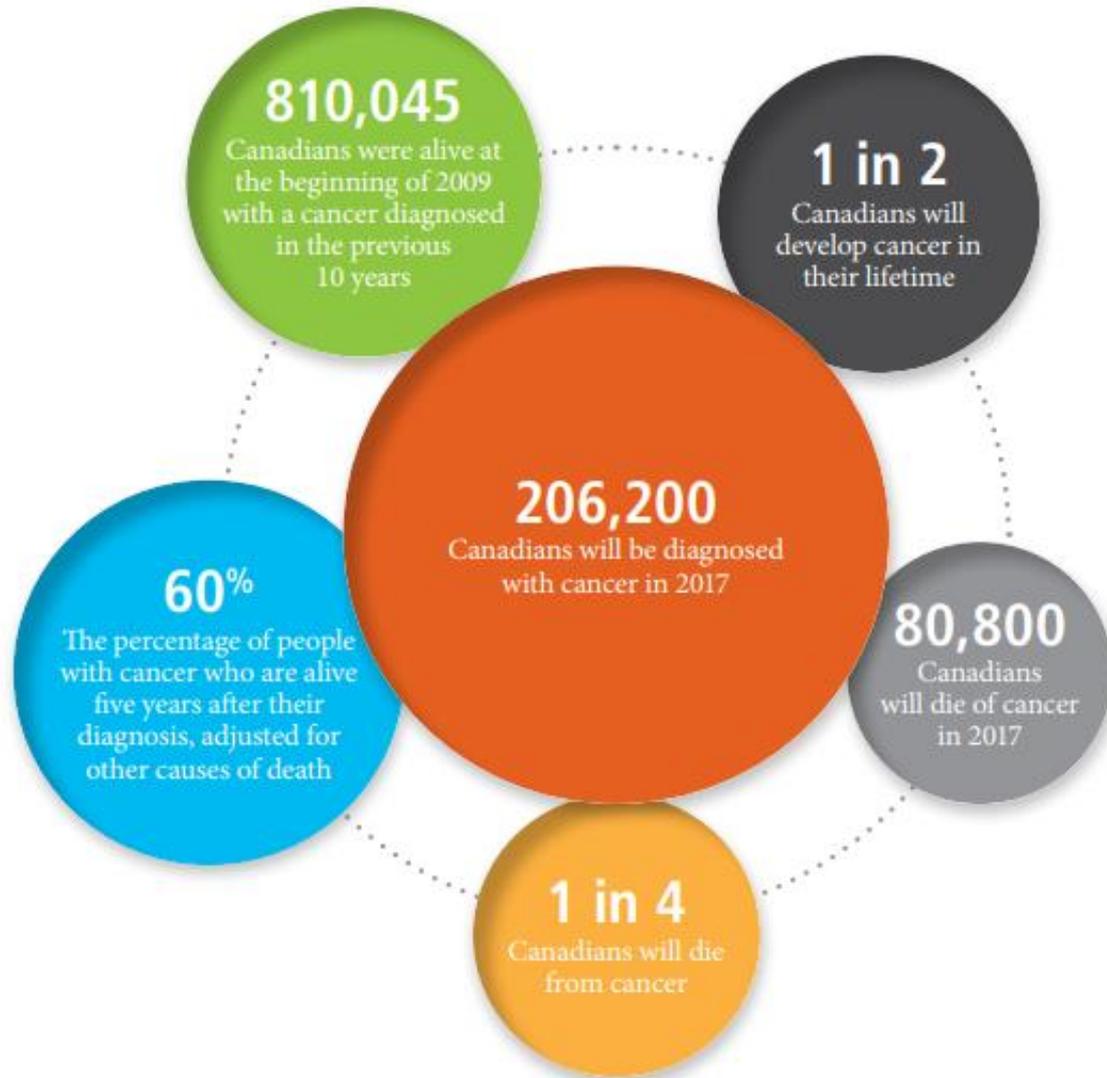




Welcome!

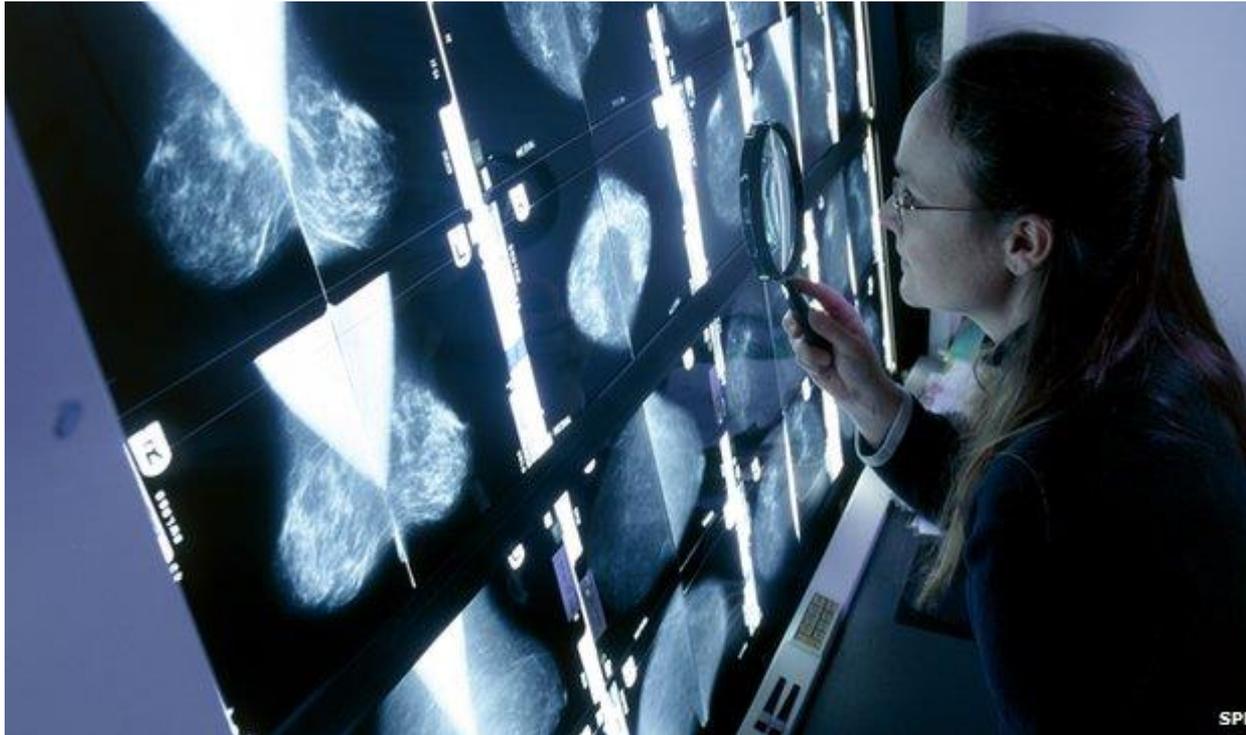
Stuart Peacock
Moderator





B B C

Cancer 'tidal wave' on horizon, warns WHO

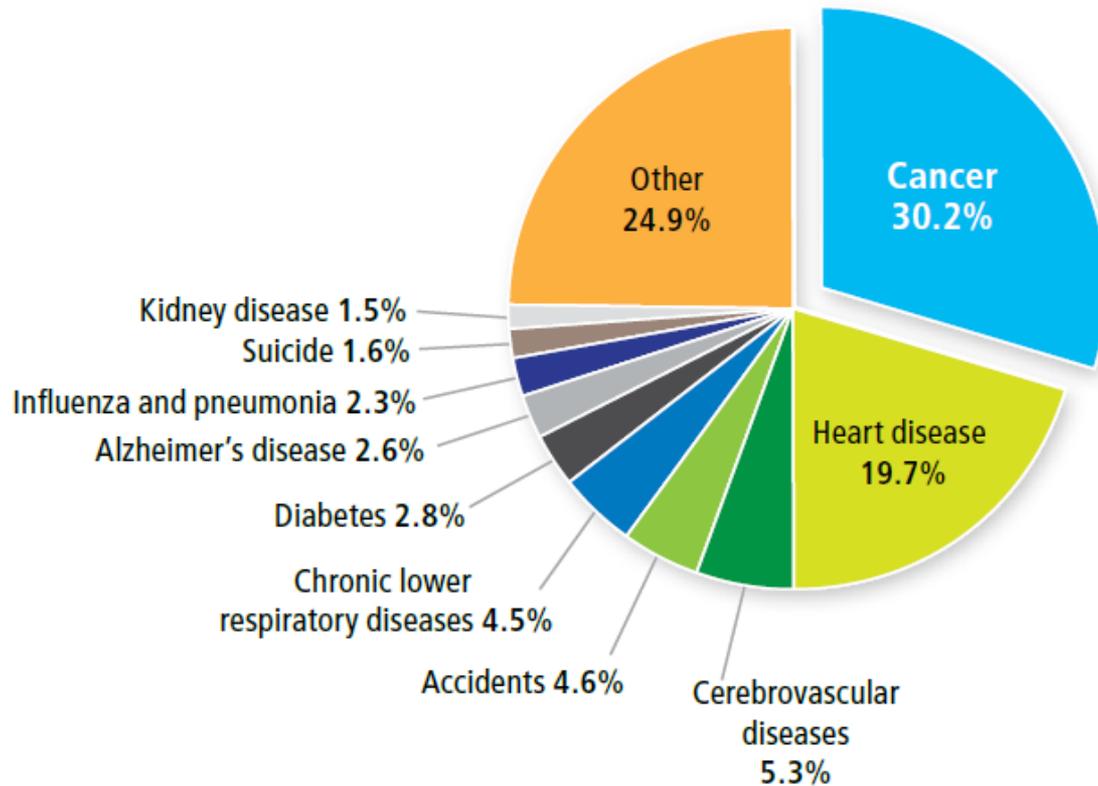


Cancer is the leading cause of economic loss through premature death and disability worldwide - because of the vast sums spent on treatment, but also in lost economic and social activity. In 2010, WHO says the total annual economic cost of cancer was \$1.16 trillion (£700bn).

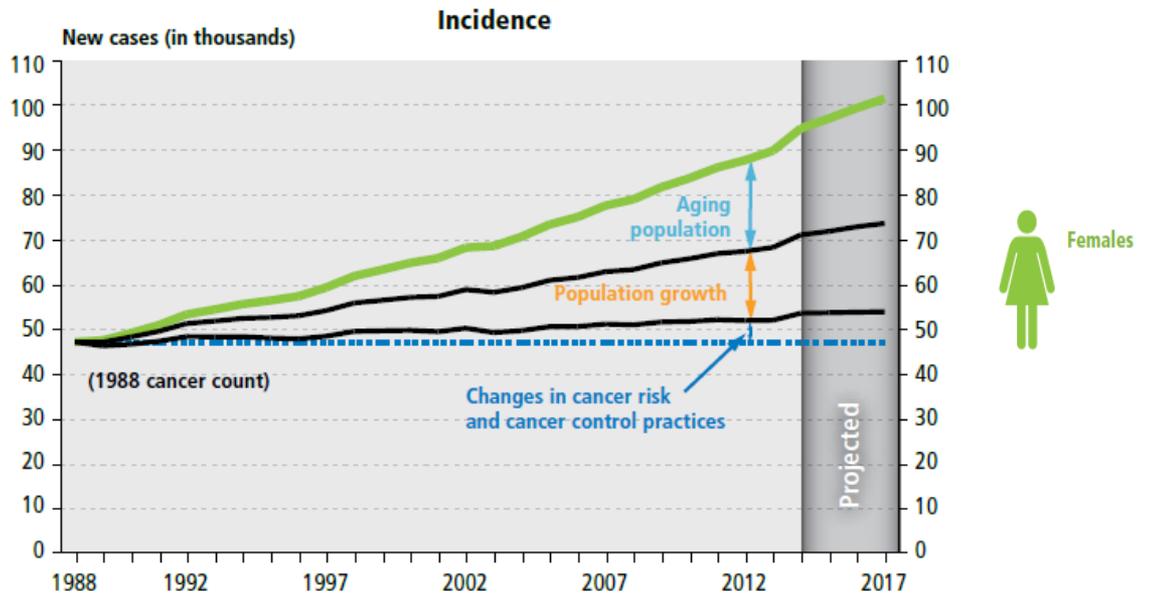
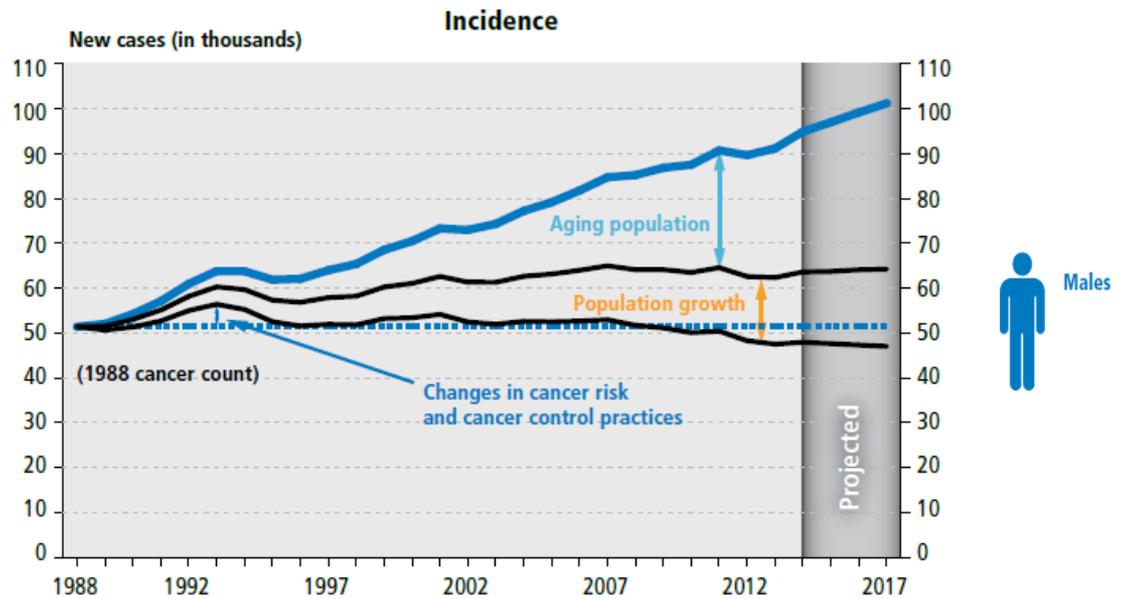
"The global cancer burden is increasing and quite markedly ... If we look at the cost of treatment of cancers, it is spiralling out of control, even for the high-income countries ... Despite advances in the field of cancer research, treatments alone will not be enough to tackle the larger problem." Dr Chris Wild, Director IARC

Canadian Mortality by Cause

FIGURE A Proportion of deaths due to cancer and other causes, Canada, 2012



Drivers of Increases in New Cancer Cases in Canada



Oral cancer drugs: group pushes for universal coverage

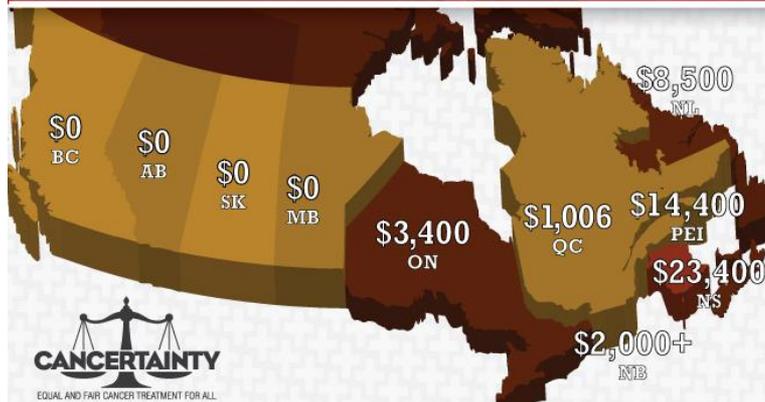
Coalition releases white paper urging greater coverage to ease financial hardship



People in Ontario and Atlantic Canada face financial hardship that other Canadians don't when it comes to accessing cancer treatments taken orally, a coalition of more than 30 cancer organizations says.

The group CanCertainty, led by Kidney Cancer Canada, launched a campaign Monday calling for "equal and fair" cancer treatment for all Canadians, no matter what type of medication they're on.

ONTARIO & ATLANTIC PROVINCES ARE LETTING CANCER PATIENTS DOWN It's Time to Level Up.



Cancer patients in Ontario and Atlantic Canada face administrative hurdles, out-of-pocket costs and delays for their take-home cancer drugs.

**CANCER IS CANCER.
TREATMENT IS TREATMENT.
WHEREVER IN CANADA YOU LIVE.
WWW.CANCERTAINTYFORALL.CA**

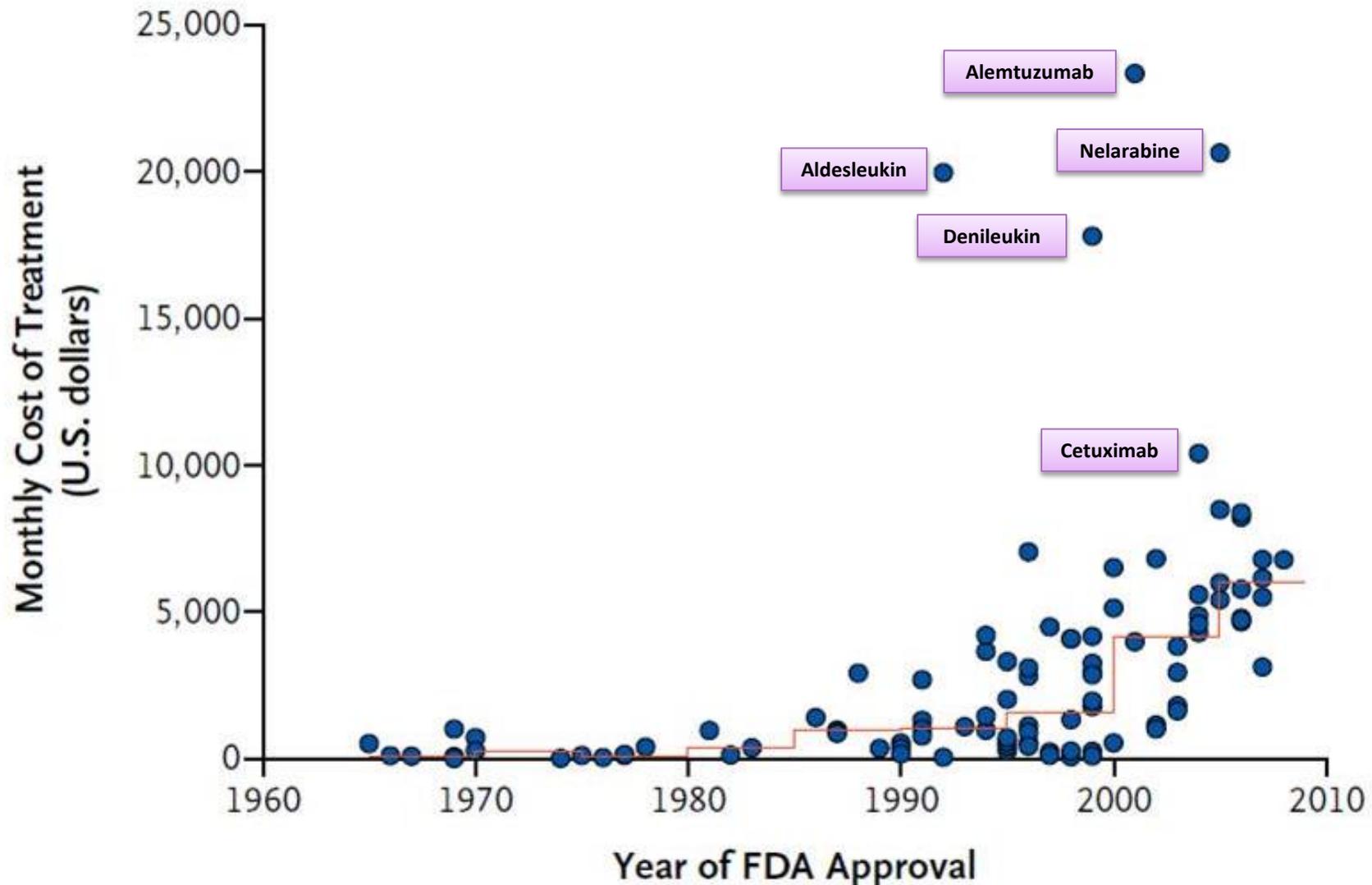
ASSUMPTIONS

1. Based on total household income of \$120,000 (\$85,000 net).
2. Oral cancer medication costing \$6,000 per month for 12 months.
3. No private insurance.

SOURCES

http://www.health.gov.on.ca/en/public/programs/drugs/programs/odp/opdp_trillium.aspx
<http://www.ramq.gouv.qc.ca/en/citizens/prescription-drug-insurance/Pages/amount-to-pay-prescription-drugs.aspx>
 NS Family Pharmacare Calculator: <http://novascotia.ca/dhw/pharmacare/family-calculator.asp>
 NS Family Pharmacare Deductible must be paid in FULL before patients start to pay "only" the copay amount of 20% per prescription.
 NLPD Assurance Plan via <http://www.parl.gc.ca/Content/LDP/ResearchPublications/prb0906-e.htm>
 New Brunswick Drug Plan Premium: <http://www2.gnb.ca/content/gnb/en/departments/health/MedicarePrescriptionDrugPlan/NBDrugPlan/Premiums.html>
<http://healthpei.ca/catastrophic>

Monthly costs of FDA approved cancer drugs (2007 US\$)





DRUG PRICES

Is \$475,000 Too High a Price for Novartis's 'Historic' Cancer Gene Therapy?

Sy Mukherjee
Aug 31, 2017



CAR-T ... ongoing questions

Key messages so far ...

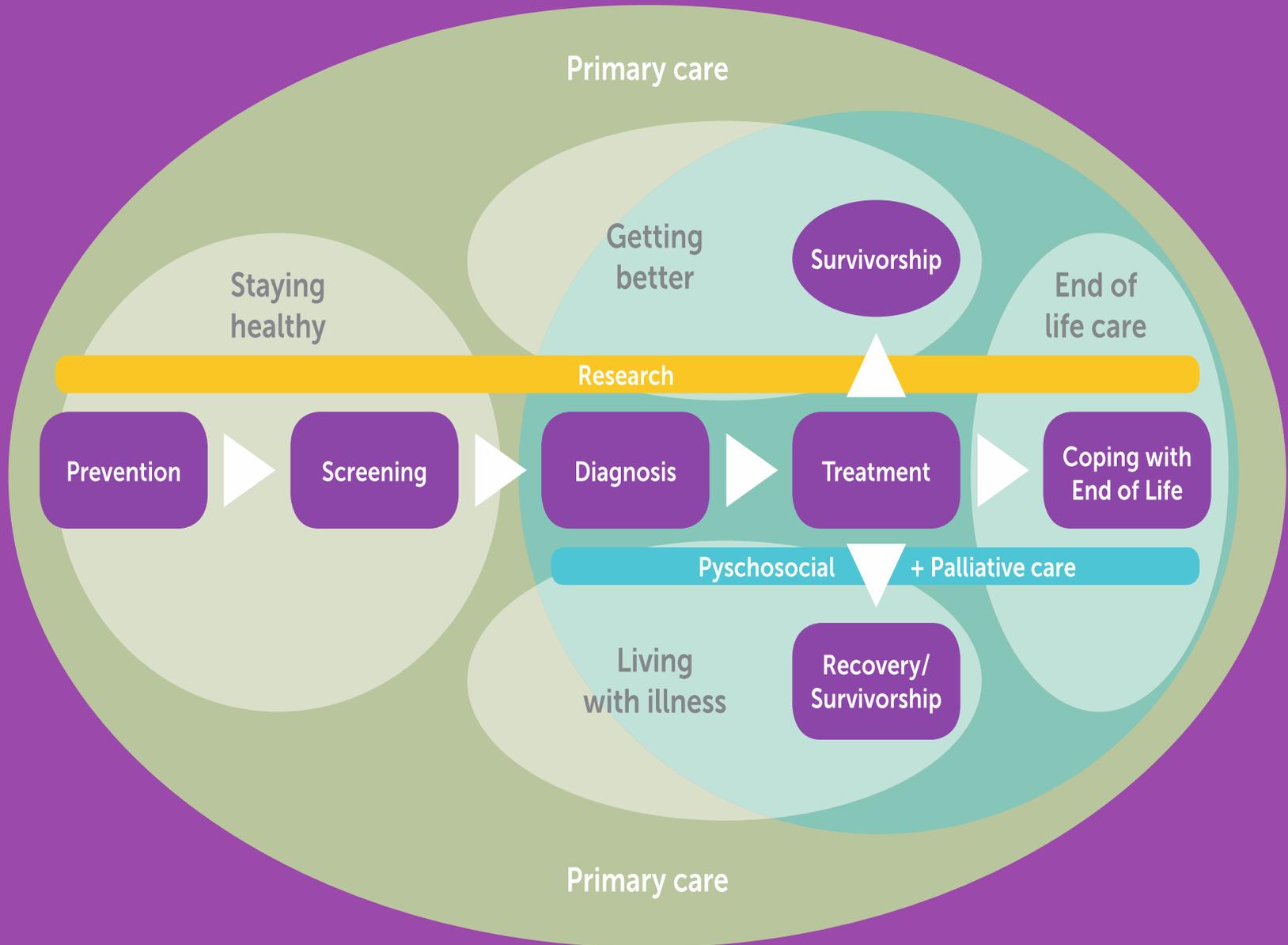
- Increased uncertainty in clinical effectiveness, cost-effectiveness analysis and models
- Additional modeling needed for population scale up, implementation, pricing and budget impact
- Existing HTA and modeling methodologies are sufficient

'Some' challenges

- Single arm studies and real-world evidence – need new/better evidence standards, more data, and more analytic capability
- Modeling of population scale up, implementation, pricing, budget impact
- Coverage with Evidence Development/Managed Entry Agreements and risk-sharing
- Price negotiation and contracting
- New indications – AML, DLBCL, solid tumours, sickle cell disease



Cancer Care Continuum



*How can we inform and promote cancer control policies and practices (from prevention to palliative care and survivorship) that are **evidence-based, sustainable and ethical** in order to reduce the burden of cancer for Canadians?*

