



WHO/Europe RC72 Ministerial Lunch: “Access to novel, effective, high-cost medicines” and the Oslo Medicines Initiative (OMI)

Contribution from the Association of European Cancer Leagues (ECL)

The [ECL Access to Medicines Task Force \(A2M TF\)](#), which connects 24 national and regional cancer societies in 22 European countries, welcomed the Ministerial Lunch of the [Oslo Medicines Initiative \(OMI\)](#) on 12 September 2022. We commend the leadership of the government of Norway, and warmly thank the [WHO Regional Office for Europe \(WHO/Europe\)](#) for allowing Non-State Actors to contribute to this new social contract since its inception in 2020 and for inviting civil society to the Ministerial Lunch.

The ECL A2M TF **shares the vision** of the **OMI** to minimise inequalities and improve access to high-quality, novel therapies for patients in the European region. In particular, the A2M TF **aims to ensure that every European patient has timely access to safe, available, effective, and affordable cancer medicines.**

Cancer is the **second leading cause of mortality** in the WHO European region after cardiovascular diseases[1]. When it comes to cancers, there are **three key challenges** that must be addressed:

- **Large unmet needs:** Cancers remain associated with the most unmet needs[2]. In Europe, overall survival[3] for people with cancer has continuously increased in the past 30 years[4], however, there are some forms of cancer where survival has improved very little, and there are limited routes to new therapies[5]. Moreover, while many cancers have high rates of survival, brain, lung, pancreatic and oesophageal tumours, continue to have some of the poorest five-year survival figures and existing treatments have severe side effects[6]. **Every cancer deserves the same attention, regardless of prevalence or profitability. We must strive to meet the needs of every cancer patient.**
- **Growing inequalities:** As clearly demonstrated by OECD (2020)[7], there are unacceptable and widening access inequalities in access to new cancer drugs across Europe. **Every cancer patient has the right to optimal treatment, regardless of their financial means, gender, age or nationality.** We must strive to bring the right medicines, at the right time, to whoever needs them. **Everyone everywhere should be able to access the cancer medicines they need.**
- **Soaring drug prices:** Drug prices keep increasing. The cost of new cell and gene therapies, for instance, is between €100.000 to over €1.000.000. In oncology, the development of **personalised and complex combination therapies** will further increase the financial burden on health systems and contribute to increased inequalities. Unaffordable prices **impede universal access** to pharmaceutical products with proven efficacy and safety, particularly for patients in low- or middle-income countries but also in high-income ones. Moreover, evidence [8] shows that medicine prices are **not always commensurate** with therapies' **true clinical value**, or a country's needs, demand and purchasing power.



As the A2M TF strongly believes in the power of **solidarity, transparency** and **multi-stakeholder dialogue**, we fully support the proposed **establishment of a stakeholder platform for Member States and all relevant stakeholders** to foster constructive dialogue and identify challenges and solutions, which was presented at the welcomed the **OMI Ministerial Lunch on 12 September**.

In this context, the A2M TF wishes to emphasise the importance of ensuring a **balanced representation of stakeholders in the platform**. European health NGOs, such as ECL, are **independent** of commercial interests and political groups and have, over decades, built **extensive networks** of citizens, patients, and members. Our organisations' **expertise, independence, and flexibility**, is a key strength, allowing the voices of patients and citizens to be heard at the European level. We **add value to the work of WHO/Europe** - our ideas, values, and perspectives, reflect the needs and wishes of the most vulnerable in society, a contribution that otherwise would not be heard in the policy process. **Civil society** should therefore **play a key role in the OMI stakeholder platform** and the development of this new social contract.

The lack of affordability in access to medicines has been at the top of the political agenda for some time. The fact that it is now affecting wealthier countries has given the issue a renewed sense of urgency. As the **WHO Regional Office for Europe' Statement on the OMI** presented on 12 September already identified, there are several **possible solutions** to address the multifactorial and complex challenges related to access to new therapies, including public procurement, joint horizon scanning and the implementation of novel prices and payment models.

The A2M TF has **four proposals** which we hope can be presented and discussed when the OMI stakeholder platform is established:

1. The Task Force formulated a **new definition of 'fair price'**[9]. A 'fair price' is **justifiable, predictable** and **cost-effective** within the aims and priorities of healthcare systems and the available budget. A price is justifiable if it reflects the documented and clinically relevant benefit of the medicine, and a reasonable relationship between the cost of bringing the product to market (including R&D, production, marketing) and the price. **We call on stakeholders to adopt a fair pricing policy that takes into account the ethical and financial dimensions of patient access to care, affordability and sustainability of healthcare systems.**
2. The WHO Fair Pricing Forum 2021 made it clear that greater transparency in the pharmaceutical and healthcare sector is urgently needed[10], as a tool to take informed decisions, support solidarity, and improve regulatory systems across the globe. **We call for increased transparency of end-user prices, the cost of research and development, the cost of goods, as well as of public health authorities' decision-making processes.**
3. More efforts should be made to ensure **pharmaceutical policy** is **truly evidence-based** and to apply new scientific evidence into practice[11]. For example, a **recent experiment** demonstrated that only improving price transparency does not lead to better price and expenditure outcomes; whereas the **combination of price and R&D cost transparency** led to better price and access[12]. One way to test new pricing mechanisms is to carry out **real-world pilot studies** guided by strong economic principles. Research is also needed to unravel how to most effectively **translate scientific evidence into effective measures** on the national and international level, taking into account socio-economic differences within and across countries.
4. Ground-breaking **developments in next-generation cell and gene therapies** offer curative value for patients with few to no other therapeutic options as well as an opportunity to reflect on **new models for drug development**. **Academic medical centres and hospitals**, for instance, can play a central role in the development and manufacturing of autologous cell therapy, provided that there is a supportive regulatory framework. There is room for establishing **new ways of collaboration** between the private sector, the public sector, academia and patient organisations. These new types of collaboration will make it possible to tackle more unmet needs and develop affordable treatments.



The ECL A2M TF is looking forward to contributing expertise to the OMI stakeholder platform and engaging in continued dialogues and collaboration with WHO/Europe, its Member States, and all other stakeholders, to achieve the common goal of reducing inequalities and improving access to high-quality, novel therapies for patients in general and cancer patients in particular.

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About the Association of European Cancer Leagues (ECL)

ECL is a non-profit, pan-European umbrella organisation of national and regional cancer societies, currently representing 31 cancer leagues in 26 European countries. ECL provides a unique platform for cancer societies to collaborate with their international peers, primarily in the areas of cancer prevention, tobacco control, access to medicines, and patient support, and creates opportunities to advocate for these issues at the EU level. For further information, please contact the ECL Secretariat at: ECL@cancer.eu

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About the ECL Access to Medicines Task Force (A2M TF)

The ECL Access to Medicines Task Force aims to make cancer medicines available for all cancer patients in Europe by insisting on accessibility, sustainability of the healthcare system and transparency of medicines prices. Today, 25 national and regional cancer leagues, representing over 500 million European citizens, have signed the Task Force's Declaration of Intent. For any questions, please contact Dr. Ward Rommel (Chair of Access to Medicines Task Force) at: Ward.Rommel@komoptegenkanker.be

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