Improving cancer care
Patient Perspective on value & access

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To be meaningful for patients, innovation should aim to:

- Promote patient-centred, multidisciplinary care that makes optimal use of all therapeutic modalities
- Improve upon existing care, improving quality of life as well as extending life
- Reduce inequalities in care.
Main systemic barriers

• Low health expenditure on cancer:
  • Cancer is the #1 killer in 17/28 EU Member States
  • 19% of overall disease burden in Europe
  • Only 4-6% of health budgets is allocated to cancer

• Lack of enabling environments
  • Lack of dialogue patient/ health professionals = suboptimal relations at hospital level = innovation does not target patients’ needs

• Limited patient involvement in decision making
  • At all levels
Improving access to innovative medicines: Development of new drugs

- **Clinical trials**
  - European Commission & industry should support the creation of a patient-friendly European clinical trials database

- **Fast-track approvals**
  - European Commission should promote fast track approvals, but: more transparency needed on the criteria

- **Transparency Directive**
  - European Commission should tighten implementation of 180-day time limit for Member States to implement pricing and reimbursement decisions

- Patients should routinely involved in R&D (IMI-PREFER)
- Quality of Life must be integrated as endpoint in all phase 2 & 3 trials
HTA and Access to Innovative Medicines

- Health Technology Assessment can be instrumental in promoting innovation that delivers **better outcomes for patients** and society, and as a tool to ensure faster access, **measuring** what matters to patients.
- HTA is **not a purely technical process**: includes economic, ethical, political & societal aspects.
- It is necessary to **embed patients in all levels of HTA**.
- Delays in access can result in **disease progression, reduced quality of life and distress** for the patient and carers, and potential additional cost to the healthcare system.
- Regulatory, HTA and payer decision-making processes need to evolve, recognising the need for **patient-focused assessments of benefit**, including Quality of Life, consideration of surrogate endpoints, comprehensive patient involvement, appropriate data monitoring to confirm expected benefits, and with accountability for timelines.
Thank you!

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