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EVIDENCE BASED DEPRESCRIBING GUIDELINE SYMPOSIUM
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Health Canada Policy Perspective
Improving the Affordability, Accessibility and Appropriate Use of Prescription Drugs for Canadians

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YOUR HEALTH AND SAFETY... OUR PRIORITY.

The Bigger Picture: Improving Health Outcomes in a Sustainable Healthcare System

Since resources are scarce relative to needs, the use of resources in one way prevents their use in other ways.

*"The **opportunity cost** is the amount of money that is alienated by choosing to use it for one purpose rather than another".*

GOALS:

- Spending the money wisely (Value for money)
- Maximizing health outcomes with finite resources
- Providing equity in healthcare for Canadians
- Balancing sustainability and adoption of innovation

Deprescribing guidelines as a component to help achieve the goals?

Pharmaceutical Policy World

Trends

- R&D model has changed
- Development is focused on “niche” (personalised, orphan) products
- Innovative drug prices are considerably higher than in the past
- Number of biologics in development is increasing as compared to small molecules
- Oncology drugs are dominant in the pipeline
- Patient input into market access and reimbursement process is being advocated
- Regulators are providing more expedited authorizations for “unmet” need
- Private insurers are challenged by “specialty drugs”
- Public drug plans are listing more products with “criteria”
- Specialty drugs are the biggest cost drivers in the drug plan budgets
- Trade agreements have a strong focus on intellectual property rights and regulatory harmonization

Pharmaceutical Policy World

Challenges

- How do we “universally” define “unmet need’ and how do we prioritise for health system needs?
- Evidence requirements for market authorization and listing and reimbursement are different
- Niche drugs may have less robust clinical evidence due to trial size
- Most orphan drugs are not cost effective by traditional analysis
- High prices for innovative medicines may be cost effective but unaffordable
- Biologic follow on drugs have weak market penetration compared to generics
- Increased stakeholder demand for quicker and “universal” access of innovative drugs
- Tension between supporting innovation and system sustainability
- Ageing populations, more chronic diseases
- Patchwork listing and reimbursement of drugs, inequitable access to treatments

Policy Priorities

November 2015
The Health Minister's Mandate Letter

- Work with provincial and territorial governments to make prescription drugs more ***affordable***
- Advance pan-Canadian collaboration on health innovation
- ***Improve access*** to necessary prescription medications, including:
  - joining with provincial and territorial governments to buy drugs in bulk
  - reducing the cost Canadian governments pay for these drugs
  - making them more affordable for Canadians, and
  - exploring the need for a ***national formulary***

Responding to the Mandate Letter

March 2017, federal budget announced $140.3M over 5 years, then $18.2M ongoing annually, for Health Canada, the PMPRB and CADTH

May 2017, Minister Philpott outlined planned federal actions to:

- ***Lower the cost of prescription drugs (Affordability)***
  - PMPRB regulatory modernization
  - Federal investment to enhance the FPT Pan-Canadian Pharmaceutical Alliance (pCPA)
- ***Provide timely access to new drugs and therapies that are safe, effective and of high quality to meet the needs of Canadians (Accessibility)***
  - Health Canada and CADTH are working to improve and align their respective drug review processes to provide more timely access to drugs that meet health and health system needs
- ***Support the development of tools for more appropriate prescribing (Appropriate Use)***
  - CADTH producing more efficient optimal use products and improved prescribing tools

March 2018, federal budget announced the creation of an advisory council on the implementation of National Pharmacare

We Cannot Do it Alone – A Joint Initiative

- January 2016, FPT Health Ministers agreed to improve the affordability, accessibility and appropriate use of drugs
- August 2017, the FPT Common Statement on Shared Principles reaffirmed governments' mutual interest in improving affordability, accessibility and appropriate use
- October 2017, FPT Health Ministers affirmed commitment to improving pharmaceutical systems and recognized inadequacy of current models
- March 2018, Universal Pharmacare?

Deprescribing Guidelines – Utility & Challenges

Utility

- Component of existing prescribing guidelines
- Academic detailing
- Collaboration with CADTH – Optimal use tools
- Collaboration with DSEN – Drug utilization research, evaluation of effectiveness of interventions (guidelines, education etc.)

Challenges

- Prescribing guidelines are already “voluminous”
- Evaluating clinical effectiveness (outcomes) of deprescribing
- Evaluating cost effectiveness of deprescribing
- Utility in challenging therapeutic areas; orphan drugs, oncology