# Media Backgrounder

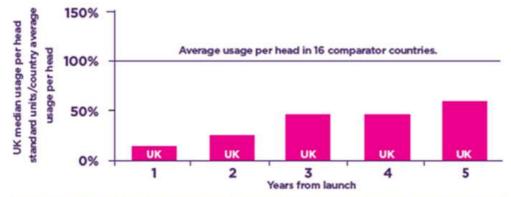


### Closing the medicines gap

Ensuring access to modern medicines, for the right patient, at the right time, presents a major challenge for the NHS. Modern medicines can play an important role in transforming patients' health and life chances, but a number of factors prevent fast and fair access to them for all patients, wherever they live.

### The patient access landscape

- Research found there can be a ten-fold difference in the usage of effective new treatments (less than five years old) across England- and in one case that difference was 29-foldi
- Patients can legally ask for any medicine once it has been recommended by NICE – but a recent survey by The Patients Association found nearly 80 per cent of patients do not know thisii
- Before the introduction of the Cancer Drugs Fund (CDF), use of new cancer medicines in the UK was 33% lower than the European average<sup>iii</sup>
- For the first 5 years after the launch of a new medicine, people in the UK are significantly less likely to have access to it than people living in other countries.iv



Office of Health Economics, based on an analysis of 61 medicines launched in the UK since 2007, using IMS volume data and ONS/OECD population data



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#### What can be done?

New thinking is needed, with industry working in partnership with policy-makers, the NHS, clinicians and patient representatives to remove the barriers patients face across the medicines landscape. This would help the NHS become a leader in making new innovative medicines rapidly and consistently available, so that the right patient gets the right medicine at the right time.

At the ABPI, we look forward to working with policy-makers, the NHS, clinicians and patient representatives to address these issues and we recommend a number of changes, including:

- Development of the NHS Innovation Scorecard to ensure clear, published measures on NHS use of modern medicines benchmarked against agreed estimates of appropriate clinical use and included in performance reports.
- An end to NHS activities solely focused on cost containment of medicines, with resources redeployed to optimise the use of medicines for patient health.
- An urgent evolution of NICE processes, methods and decisionmaking frameworks to be fit for purpose and more responsive to the new medicines that are being developed by industry.
- Allowing NICE Appraisal Committees to take a realistic, flexible and pragmatic approach in order to bring patients valuable new treatments that address unmet need.



For more information, contact





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 $<sup>^{\</sup>rm i}$  Health and Social Care Information Centre (HSCIC) 'Use of NICE appraised medicines in the NHS' 21 January 2014

<sup>&</sup>lt;sup>ii</sup> The Patients Association (2014). The NHS Constitution: Fact or Fiction? [Online]. Available here: <a href="http://www.patients-">http://www.patients-</a>

association.com/Portals/0/Public/Files/Research%20Publications/NHS%20Constitution%20Report Fact%20or%20Fiction.pdf

iii ABPI (2014). Delivering value to the UK [Online. Available here: <a href="http://www.abpi.org.uk/our-">http://www.abpi.org.uk/our-</a>

work/library/Documents/delivering values dec2014.pdf (Last accessed December 2014)

 $<sup>^{\</sup>mathrm{iv}}$  OHE analysis of 61 medicines launched in the UK since 2007 compared to 16 countries (2014)