

Discouraging Medical Research/Development: an Unintended Consequence of Nationalized Healthcare

Healthcare costs are increasing and the price of healthcare is causing an ever more serious problem (for people who do not have insurance to access basic healthcare and companies providing a health benefit to their employees) making healthcare systems that offer “free care” seem attractive. Let us not forget this problem exists in part because of research to date that has yielded choices.

It is so frustrating that **folks like VP Joe Biden and others who should know better continue to mock the concept of death panels**. I was diagnosed with Stage 4 kidney cancer in 1995 at age 32, about 3 months after my daughter was born. **Reality is that if my longer term kidney cancer survivor friends and I were British citizens, we would not be alive.**

The FDA has approved 8 treatments for stage 4 kidney cancer across two decades between 1992 and 2012. Until 2011, only two of these treatments are available to the **British** on the **National Health Service (NHS)**. **NICE, the healthcare guidance body** (National Institute for Health and Care Excellence), considered and declined to include in “NICE guidance” the other six treatment options:

Therapy	FDA approval in Kidney Cancer	NICE recommends	Review Decision	NICE Reference #	Link to NICE guidance
Proleukin®	interleukin-2	1992	NO		
Nexavar®	sorafenib	Dec-05	NO	Aug-09, May-12	TA 178 http://guidance.nice.org.uk/TA178
Sutent®	sunitinib	Jan-06	YES 1st line / NO 2nd line	Mar-09 / Aug-09, May-12	TA 169 / TA 178 http://guidance.nice.org.uk/TA169
Torisel®	temsirolimus	May-07	NO	Aug-09, May-12	TA 178
Afinitor®	everolimus	Mar-09	NO	Ju-10, Apr-11	TA 219 http://guidance.nice.org.uk/TA219
Avastin®	Bevacizumab	Aug-09	NO	Aug-09, May-12	TA 178
Votrient®	pazopanib	Apr-12	YES	Feb-11	TA 215 http://guidance.nice.org.uk/TA215
Inlyta®	axitinib	Jan-12	NO	27-Mar-13	ID518 (under appeal)

In the UK, healthcare is free at the delivery point. Like all publically funded healthcare systems, the NHS cannot afford intervention for every patient and pay for every new medical treatment/device that comes available. NICE looks at how well a new treatment works in relation to how much they cost the NHS. If a treatment is not considered cost effective, it is banned on the NHS¹. To add it to “NICE guidance”, there may have to be alignment on a NHS budget increase or something may have to be displaced. About **2/3 of cancer treatments considered by NICE are rejected**². Check out NICE guidance...Especially, read about the stakeholders. It is very clear how a therapy available in 2005 is not a treatment option on the NHS still, 5-7+ years later. **British kidney cancer patients didn't go bankrupt from medical costs...bankruptcy was avoided by dying.** What company is going to invest 500-750\$M across a 10 year gauntlet to get FDA approval for a new treatment when the government can block its availability 5-7+ years after FDA approval?

The UK govt finally established a **three year Cancer Drugs Fund in Apr 2011 enabling 30,000 Brits access to drugs banned by NICE**. With the end of the fund looming Mar 2014, cancer charities called for confirmation that it would be continued to prevent a return to the ‘dark days’ when patients were denied life-prolonging drugs on NHS². **The Prime Minister just announced on 28 Sept 2013 extension of the Cancer Drugs Fund** to Mar 2016 to continue access to life-extending drugs not yet routinely available on the NHS³.

Healthcare systems in other countries are sometimes “free”. It does not necessarily follow that the “free” healthcare includes the advances in modern medicine from the last decade or two...which is why today America is the destination for lifesaving treatments.

People need their doctors (and not bureaucratic panels) to be able to make treatment decisions for them. People waiting for cures need new treatment development to be profitable in order that talented physicians/scientists can continue to contribute to the cause. Our nation is great in part because through American ingenuity, entrepreneurship, capitalism and generous traditional employer-provided insurance, there is an essential part of our healthcare system that has employed Americans to find new drugs, devices, surgeries, and treatment practices that ultimately have a positive influence on/benefit the world.

The Affordable Care Act law as it stands is not necessarily affordable and will dismantle healthcare as we know it hurting millions of Americans and future generations. We witness waves of people losing their healthcare plans as **insurance issuers may refuse to renew a policy** (they can withdraw it from the market by ACA law) **as long as ACA-compliant substitutes are offered**. New plans cover mandated preventative care but to control cost can include fewer options for FDA approved or off-label drug use to extend life. The 40% ‘Cadillac tax’ won’t be a govt revenue source...charging employers with it if their insurance costs more than a set amount will over time create a cap further decreasing options for leading edge treatments. **We need to expeditiously but carefully reconsider/overhaul the ACA** to find alternative ways to cost effectively make available basic healthcare without using punitive taxes that discourage research for the next generation of breakthroughs. **Teamsters President James Hoffa said that Obamacare threatens to destroy the health and well being of hardworking Americans and fundamentally change the 40-hour work week**⁴.

All my Best to ALL Americans,
Katherine S Phillion

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1 <http://www.nice.org.uk/newsroom/features/measuringeffectivenessandcosteffectivenesssthegaly.jsp> NICE website

2 <http://www.dailymail.co.uk/health/article-2352096/Cancer-patients-fear-losing-drugs-fund-lifeline-Fears-16-000-patients-year-denied-help.html> By Jenny Hope, Updated 1 Jul 2013

3 <http://www.cancerresearchuk.org/cancer-info/news/archive/cancernews/2013-09-28-Government-announces-extension-of-Cancer-Drugs-Fund> Cancer Research UK, 28 Sept 2013

4 <http://personalliberty.com/2013/07/15/teamsters-union-balks-on-obamacare/> By Ben Bullard, 15 July 2013