

Drug prices based on success could speed up cancer patients' treatment

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Paying for cancer drugs based on how well they work in practice could help patients get new treatments faster, according to a Cancer Research UK report published today.

As well as providing value for money for the NHS, companies whose

medicines represent genuine advances would also be rewarded. This flexible way of paying for [cancer](#) medicines, known as outcome-based payment (OBP), would mean a drug's price could be adjusted based on how well it works for patients in the NHS. For example, the NHS could pay the company less for a drug that doesn't work as well as expected, but more if it does.

Many of the latest cancer drugs are complex and highly expensive, and in some cases the full extent of patient benefit may be unclear when evidence is still emerging. This can make it difficult for the NHS and the drugs' manufacturers to agree a price for them, resulting in delays.

The report was commissioned by Cancer Research UK and the Greater Manchester Health and Social Care Partnership, the body overseeing the devolution of the area's health and social care budget. Researchers consulted experts in government, NHS England, NICE, the [pharmaceutical industry](#), and people affected by cancer to develop agreement on the treatment outcomes that should form the basis of an OBP approach.

Based on feedback from patients and their families about what treatment results are most important to them, the report recommends that when any OBP scheme is introduced it should link the drug's price to its impact on survival, [disease progression](#) or relapse, long-term side effects, and return to normal life.

England's cancer data infrastructure can already capture information about what medicines patients are receiving and how they are responding. Cancer Research UK and the GMHSC Partnership will now do further work looking at the feasibility of delivering OBP in practice, including whether improvements to the data captured on patients' outcomes are needed.

Emlyn Samuel, Cancer Research UK's head of policy development, said: "Ensuring cutting-edge medicines reach patients as quickly as possible is vital if we're to achieve our ambition of three in four patients surviving their cancer by 2034.

"The NHS long-term plan committed to getting innovative technologies to patients quicker to improve outcomes. While the UK is already among the top countries in the world in making new cancer medicines available to patients, it's vital for patients and their families that we continue to lead the way.

"Outcome-based payment is a promising way to get some drugs to patients quickly where the NHS and the manufacturer are struggling to agree a fixed price. This is already happening in other disease areas like hepatitis C and multiple sclerosis. We look forward to working with government, NHS England, industry and patients to make this approach an option for new [cancer drugs](#) too."

Dr. Richard Preece, medical director and executive lead for Greater Manchester Health and Social Care Partnership, and chair of the Greater Manchester Cancer Board said: "Our aim is to make sure that the billion pounds we invest in medicines is well spent to ensure the greatest, fastest improvement to the health and wellbeing of everyone who lives in Greater Manchester.

"Partnering with Cancer Research UK is a phenomenal opportunity to continue working toward reducing the use of medicines that are not giving people the benefits they need, ensuring that [patients](#) are able to access new and innovative medicines as early as possible and delivering better value for money."

Provided by Cancer Research UK

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