



December 2022

Medicines Australia Submission

Response to the draft Australian Cancer Plan

16 December 2022

Cancer Australia
Locked Bag 3
Strawberry Hills NSW 2012

To whom it may concern,

Medicines Australia welcomes the opportunity to provide comment on the draft Australian Cancer Plan (ACP). Medicines Australia notes the comprehensive work done by the committee and is pleased by the inclusion of many of the themes highlighted in previous consultation, including the prioritisation of prevention and early detection of cancers, a focus on patient-centred systems and the optimisation of data collection and utilisation.

Medicines Australia strongly supports the aim and vision outlined within the draft ACP and looks forward to further engagement on the implementation of the ACP. The innovative medicines industry makes a valuable contribution to the health of Australians living with cancer and the nation at large and looks forward to partnering with Cancer Australia to support the implementation of the ACP.

Following a review of the draft ACP and participation in the various stakeholder engagement opportunities provided, Medicines Australia wishes to highlight one important omission from the plan. The draft ACP appropriately highlights the need to improve early cancer diagnosis; however, it fails to consider the need for timely access to treatments following diagnosis. Far from being world class, Australia currently has one of the slowest times to access medicines across the OECD nations, with patients waiting an average of nearly 500 days from TGA approval to PBS listing for cancer therapies¹.

This has a significant impact on patients' lives and disproportionately affects disadvantaged groups. Data shows that a 12-month delay in access to cancer medicines can collectively cost Australians living with the disease up to 3,448 years of life². Furthermore, many cancer patients and their families may be aware of a new treatment that is not funded on the PBS and feel they must either find the money to pay for the treatment or accept that a new treatment that may benefit them is unaffordable.³ Accordingly, timely reimbursement through the PBS is the best way to ensure that all Australians have equitable access to innovative medicines when they need them. In alignment with the Guiding Principles of the ACP, a focus on reducing the time to reimbursement will ensure that priority population groups, such as those shown in Figure 5 of the draft ACP, have the best chance of achieving equity in cancer outcomes.

Significant consideration has been given to this topic in the Senate Committee report "Availability of new, innovative and specialist cancer drugs in Australia" including a range of recommendations. Further recommendations are anticipated from the Federal Government's response to the House of

¹ Medicines Australia. Medicines Matter - Australia's Access to Medicines 2015-2020. Available here: <https://www.medicinesaustralia.com.au/wp-content/uploads/sites/65/2022/11/Medicines-Matter-Australias-access-to-medicines-2015-2020.pdf>

² Medicines Australia. Measuring the Impact of Pharmaceutical Innovation in Australia 1998-2018.

³ Breast Cancer Network Australia, Submission to the National Medicines Policy Review, p. 2

Representatives report on the “approval process for new drugs and novel medical technologies in Australia”⁴. Medicines Australia believes that Objectives 3 & 4 of the ACP can only be achieved by adding specific actions to address the need for timely access to cancer treatments, including the addition of the Australian medicines industry as a key stakeholder in the plan. Medicines Australia contends that Australia should aim to achieve a ranking in the OECD top five for time to access within the period of the ACP.

In addition, there are several smaller items that Medicines Australia wishes to highlight:

Regarding Strategic Objective 1: Maximising Cancer Prevention and Early Detection

Medicines Australia agrees with the need for increased access to cancer screening services. Medicines Australia specifically notes the identified actions which refer to the cost-effectiveness of screening initiatives and the need for ongoing monitoring of the benefits and cost-effectiveness of genetic testing and cancer prevention. As highlighted in the recent Lung Cancer Screening pilot, many screening programs can struggle to meet current cost-effectiveness as defined by the Medical Services Advisory Committee (MSAC) for several reasons, including heavy discounting of health benefits that occur many years after the intervention.

Medicines Australia therefore recommends that consideration of the clinical features and societal benefits of screening programs should be more highly weighted within the decision framework and ongoing assessment of the success of the programs. In addition, we would like to see further details regarding these elements within the implementation plan. Finally, further consideration regarding the subsequent access to early cancer diagnostic services and associated treatments is warranted, as outlined previously.

Regarding Strategic Objective 4: Strong and dynamic foundations

Medicines Australia welcomes the inclusion of clinical trials to achieve this 10-year ambition and supports the goal for all Australians with cancer to have equal access to clinical trials. There remains, however, a need for the ACP to include more comprehensive actions that will support the industry in attracting clinical trials to Australia during a period of increasing international competition.

The benefits that stem from conducting clinical trials in Australia include immediate advantages to cancer patients with respect to early access to potentially life-changing therapies, as well as spill-over benefits to the broader economy through foreign investment, intellectual property development and job creation. This is particularly the case in oncology, which is one of the most frequently studied therapeutic areas in Australian clinical trials. Australia is currently an internationally competitive destination for high-quality clinical trials. However, sustaining this reputation is increasingly challenging, as international competition for the placement of clinical trials has increased.

Rather than relying on historical recognition as a reliable destination for quality clinical research, Australia needs to actively demonstrate its greater appeal against other international benchmarks in clinical trials to secure status as a preferred location for conducting trials. Improvements such as time to initiation, pace of recruitment, and diversity of inclusion are necessary. Investing in the harmonisation of the Australian clinical trial infrastructures (through the Clinical Trials National One Stop Shop) would resolve some long-standing regulatory and governance issues, enhancing trial initiation processes and help to improve Australia’s capacity to attract more clinical trials.

⁴ House of Representatives Standing Committee on Health, Aged Care and Sport. The New Frontier - Delivering better health for all Australians Inquiry into approval processes for new drugs and novel medical technologies in Australia.

Medicines Australia thanks Cancer Australia for the opportunity to provide a response to the draft ACP and looks forward to the accompanying Implementation Plan in due course. Medicines Australia stands willing and able to work in partnership with Cancer Australia and all stakeholders to successfully reach our unified vision of world-class cancer outcomes and experiences for all Australians.

To discuss these issues further, please contact Emily Skillin (Policy Analyst, Emily.skillin@medicinesaustralia.com.au).

Yours sincerely,



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