



Co-funded by  
the European Union

Improving biosimilar access to the benefit of patients

*Ward Rommel, Chair, ECL Access to Medicines TF, Kom op tegen Kanker*



 **31 Cancer societies**

 **26 Countries**

 **Make safe and effective medicines available to all cancer patients in Europe**

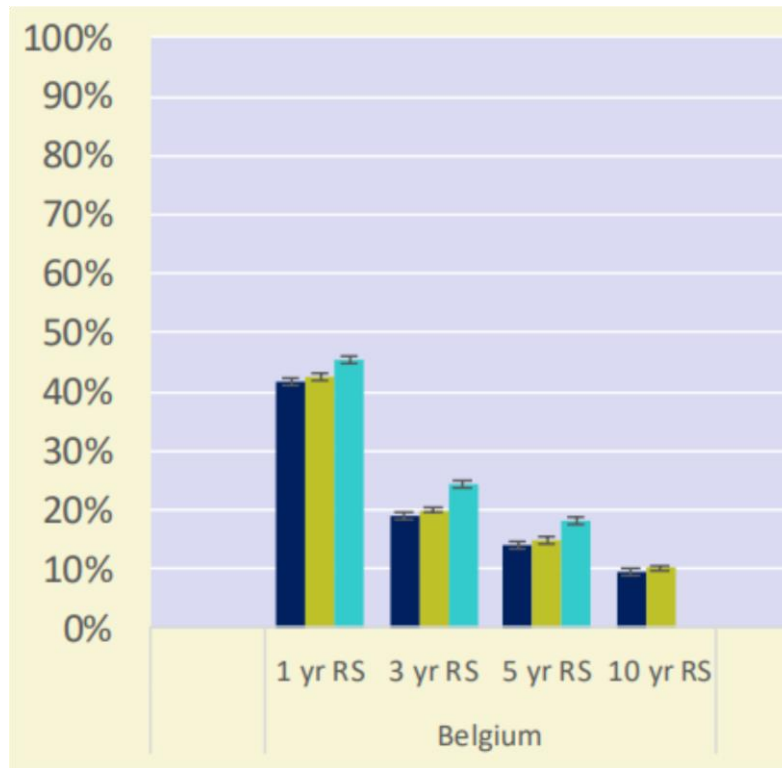




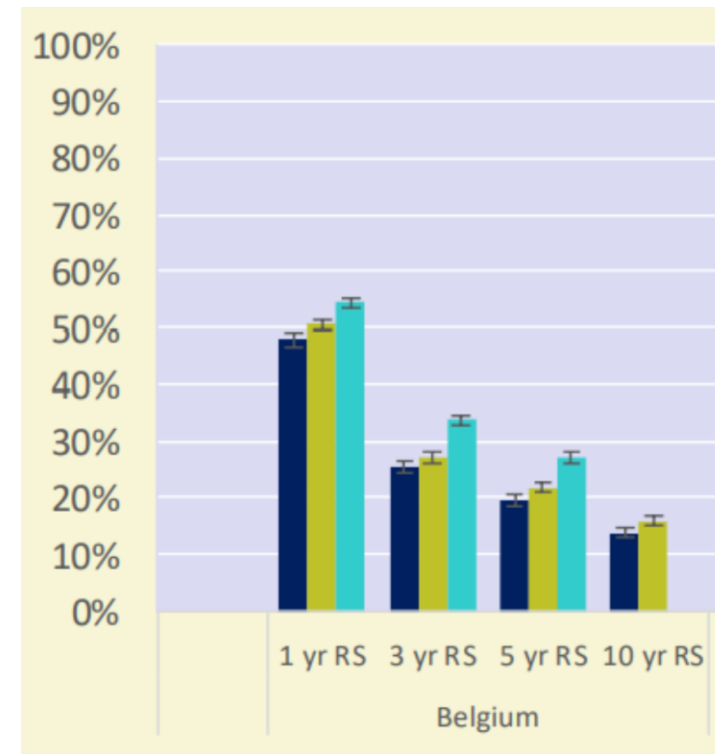
# CHALLENGE: SOME PROGRESS, BUT WE ARE NOT THERE YET


## Relative survival for lung cancer in Belgium

Males



Females



Source: Belgian Cancer Registry 

■ 2004-2007 ■ 2008-2012 ■ 2013-2017

# PIPELINE IS DELIVERING...

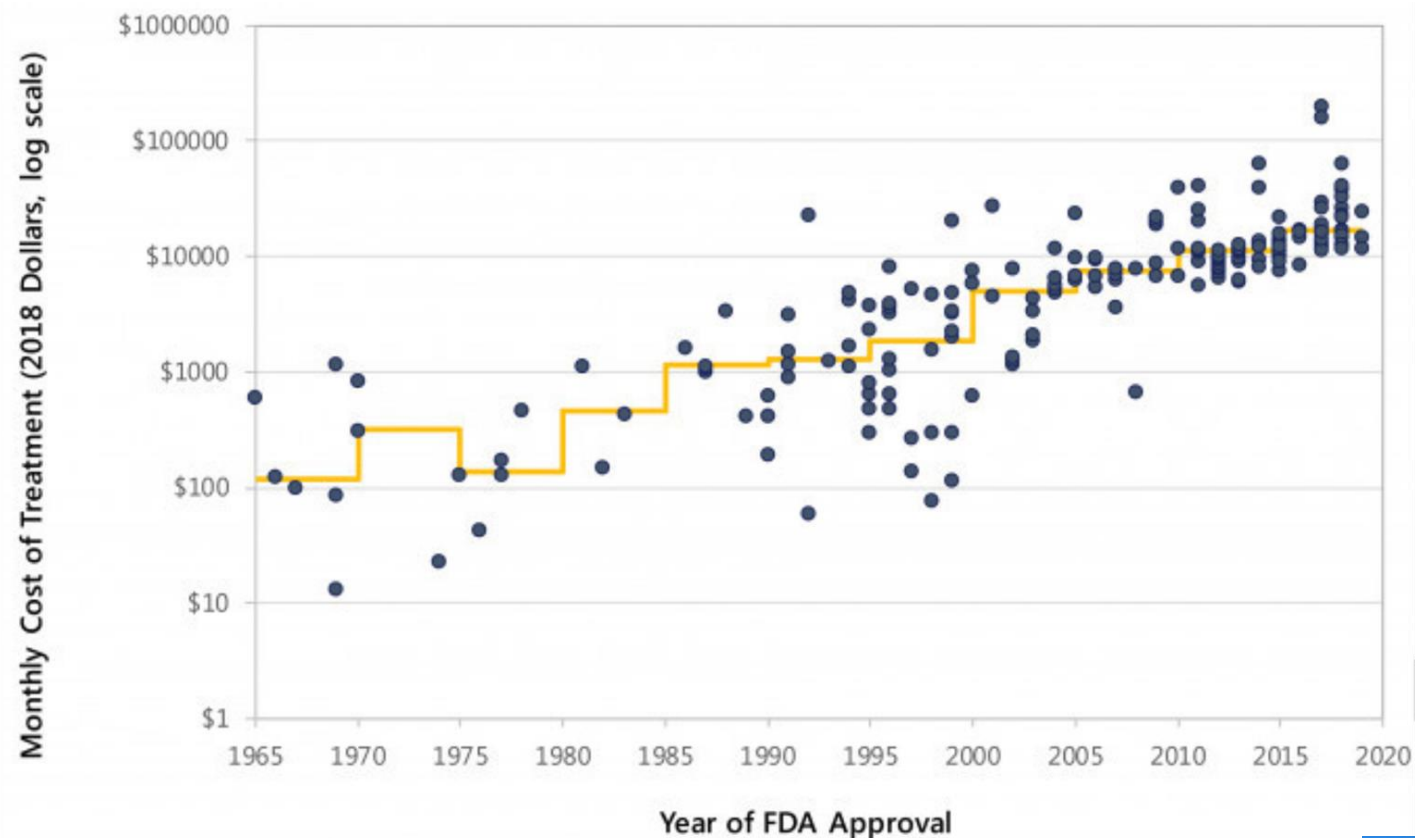
THERAPY AREA	INDICATION	MOLECULE	BRAND	ATTRIBUTES*								
				1	2	3	4	5	6	7	8	
Oncology	Acute lymphoblastic leukemia (ALL) + Lymphoblastic lymphoma (LBL)	asparaginase erwinia chrysanthemi (recombinant)	Rylaze		●	●	●			●		●
	Bone marrow suppression	trilaciclib	Cosela			●	●	●		●	●	
	Cervical cancer	tisotumab vedotin	Tivdak		●	●		●		●		
	Cholangiocarcinoma with fibroblast growth factor receptor 2 (FGFR2) mutation	infigratinib	Truseltiq	●		●	●			●		
	Chronic myelogenous leukemia	asciminib hydrochloride	Scemblix	●		●	●	●		●		
	Endometrial cancer	dostarlimab	Jemperli		●	●				●		
	HER2-positive + breast cancer	margetuximab	Margenza		●	●	●			●		
	Large b-cell lymphoma	lisocabtagene maraleucel	Breyanzi		●	●	●	●		●		
		loncastuximab tesirine	Zynlonta		●	●	●	●		●		
	Marginal zone lymphoma and follicular lymphoma	umbralisib	Ukoniq	●		●	●	●		●		
	Multiple myeloma	melphalan flufenamide	Pepaxto			●	●	●		●		
		idecabtagene vicleucel	Abecma		●	●	●	●		●	●	●
	Neuroblastoma	naxitamab	Danyelza		●	●	●			●		
	Non-small cell lung cancer (NSCLC) with EGFR exon 20 insertion mutations	amivantamab	Rybrevant		●	●		●		●		
		mobocertinib	Exkivity	●		●	●	●		●		
	Non-small cell lung cancer (NSCLC) with KRAS G12C mutations	sotorasib	Lumakras	●		●	●	●		●	●	●
	Non-small cell lung cancer (NSCLC) with MET exon 14 skipping alterations	tepotinib	Tepmetko	●		●	●			●		
	Ovarian cancer imaging	pafolacianine	Cytalux			●	●	●		●		
	Prostate cancer	relugolix	Orgovyx	●		●				●		
	Prostate cancer imaging	piflufolastat F 18	Pylarify			●				●		
Renal cell carcinoma	tivozanib	Fotivda	●		●							
Von hippel-lindau (VHL) disease with associated renal cell carcinoma (RCC), hemangioblastomas, or pancreatic neuroendocrine tumors (PNET)	belzutifan	Welireg	●		●	●	●		●			

Source: iqvia-institute-global-trends-in-randd-to-2021.pdf



# CHALLENGE: PRICE LEVEL & PRICE INCREASES

## Monthly and median costs of cancer drugs at the time of FDA approval 1965-2019



● Price of cell & gene therapy:  
new order of magnitude: €80.000-  
€700.000

● e.g. CAR-T (Kymriah, Yescarta)



● Individual Drugs    — Median Monthly Price (per 5 year period)

Source: [Dr Peter B Bach, Memorial Sloan Kettering Cancer Centre](#)



Memorial Sloan Kettering  
Cancer Center

# MAKING SAFE & EFFECTIVE DRUGS AVAILABLE

## ■ **A fair price**

- Justifiable, predictable and cost-effective within the aims and priorities of healthcare systems and available budget

## ■ **Transparency**

- End-user prices, cost of research and development, cost of goods, public health authorities' decision-making processes

## ■ **New, needs driven models for drug development**

- E.g., reinforcing role of academic medical centers in ATMPs

## ■ **Swift uptake of generics / biosimilars**

- = considerable savings



# REASONS WHY BIOSIMILARS ARE NOT USED

- Lack of knowledge by doctors and patients about safety / efficacy (switch from originator to biosimilar)
- Negotiations between hospital pharmacists and sellers of originators
- Evergreened versions of existing medicines
- Sales and marketing campaigns of originator medicines

# HOW TO INCREASE UPTAKE OF BIOSIMILARS

- Independent information and education of healthcare professionals and patients about safety, efficacy and switching
- Quota systems in hospitals and the outpatient sector
- Transparency about discounts and benefits on originators
- Generics and biosimilars should be allowed into the market right after the protection period is over
- Timely revision of therapeutic guidelines when biosimilars become available (LIC)



# GET IN TOUCH WITH US!

---

ACCESS  
TO MEDICINES  
TASK FORCE



## CONTACT ECL A2M TF

[ECL@cancer.eu](mailto:ECL@cancer.eu)

- ECL Secretariat

[Ward.Rommel@komoptegenkanker.be](mailto:Ward.Rommel@komoptegenkanker.be)

- *Chair of the A2M TF*



## WEBSITE

[www.cancer.eu](http://www.cancer.eu)

- *Access to Medicines*



## TWITTER

@CancerLeagues

#LetsTalkAccess



## FACEBOOK

@CancerLeagues

**ECL**  ACCESS  
TO MEDICINES  
TASK FORCE