

## CANCER DRUGS FUND DELISTING: BREAKTHROUGH BREAST CANCER RESPONDS

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We are relieved to learn that three of the six breast cancer drugs – Kadcyla, Perjeta and Avastin – that were considered for delisting will remain available to new patients. However, three of the breast cancer drugs previously offered on the Cancer Drugs Fund – Afinitor, Tyverb and Halaven – have been removed which will be very disappointing for those who could have benefited from them in the future.

Today marks the line in the sand beyond which we absolutely must see commitment from this and the next government to overhaul drug appraisal processes and pricing. That's why we have called on all political parties, the pharmaceutical industry, NICE, NHS leaders and the devolved administrations to come together with a shared determination to bring about change and develop a clear roadmap to reform. We reiterate that call in the strongest possible terms today.

What we've learned today is that pharmaceutical companies can negotiate on price. However, it is disappointing that it has taken a drastic measure like the threat of drugs being removed from the Cancer Drugs Fund to make companies offer their products at prices that the NHS can afford. What we need now more than ever is a commitment to a better, universal solution to the problem of drug pricing and evaluation.

Today's news is just one symptom of a much bigger issue; that we're continuing to rely on the Cancer Drugs Fund as a catch-all for expensive cancer treatments, and we're not alone in asking – how has it come to this?

The Cancer Drugs Fund was introduced in England as a temporary measure to allow patients access to the very expensive but effective drugs that the National Institute for Health and Care Excellence (NICE) is not able to approve. It was never supposed to be 'sustainable' – it was a short-term fix for the long-term problem of rocketing drug prices in the context of constrained NHS budgets. Now that the Cancer Drugs Fund is taking cost into consideration, it appears that the stop-gap measures are no longer sufficient, and it's cancer patients who suffer.

Breakthrough Breast Cancer stand ready to play our part in the development of a long-term solution, alongside a number of cancer charities, that have been brought together as a working group by NHS England to develop a better process through which cancer patients can access the drugs that they need, now and in the future.

Secondary breast cancer isn't party political, it's personal and there is no time to lose in the search for a new, sustainable drug evaluation system that serves the whole UK.

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