



MEDIA RELEASE: Friday 3rd December 2021

Pharmac Interim Report Provides Glimmer of Hope for Meaningful Change.

Patient advocacy group, Lung Foundation New Zealand (LFNZ) says the Pharmac report is damning, and it hopes it leads to meaningful change for New Zealand patients.

Lung Foundation CEO, Mr Philip Hope, says “Access to healthcare should be a human right, not an entitlement that needs to be paid for. We must emphasise, it is NOT merely a perception that New Zealand is falling behind other comparable countries with access to medicines, it is a FACT. New Zealand is FAR behind other countries (informed by thrift policy settings) and this is causing irretrievable loss of life for our most vulnerable patients.

“Despite many advances in early detection and innovative treatments across the OECD, the Lung Foundation is witnessing unprecedented suffering and inequity in New Zealand, resulting in premature death for most patients diagnosed with lung cancer.

“Healthcare professionals too are suffering, because they cannot provide patients with the best treatments unless the patient or family can self-fund them.”

Q. WILL the government be bold enough to deliver the change that is needed to address this major societal issue?

LFNZ is a non-government organisation dedicated to increasing survival for lung cancer. LFNZ has contributed to the review process by filing submissions (these reflected valuable input from patients, carers and specialists). LFNZ also participated in the patient group meetings hosted by The Pharmac Review Committee and acknowledge the collective effort of the review committee thus far.

Ends.

What we want you to know about the burden of lung cancer in Aotearoa

- Cancer is the leading cause of death in New Zealand and lung cancer is the BIGGEST cancer killer.
- Lung cancer kills more people in NZ every year, than breast cancer, prostate cancer and melanoma cancer combined.
- Every day 5 people die of lung cancer and a further 6 people are diagnosed with lung cancer.
- More than 1800 kiwis die from lung cancer every year - this is 5 times the national road toll.
- More than 1800 patients DO NOT have an effective first line treatment for advanced lung cancer in NZ.
- 30 patients with lung cancer die prematurely every week in NZ, primarily because they cannot get access to a standard of care treatment (a targeted therapy and/or immunotherapy), unless they can self-fund.
- There is a major intersection with other determinants of health, including a quadrupled risk of suicide for lung cancer patients compared to the general population.
- ANYONE can get lung cancer!



Lung cancer causes extreme inequity for Maori

- Lung cancer registrations and mortality rates are 4 times higher in Maori women and nearly 3 times higher in Maori men.
- One Maori dies of lung cancer every day in New Zealand.
- Lung cancer is the leading and second highest cause of death in Maori females and males respectively.

Lung cancer screening

Despite, lung cancer being New Zealand's biggest cancer killer, we DO NOT yet have a national lung cancer screening programme in place...

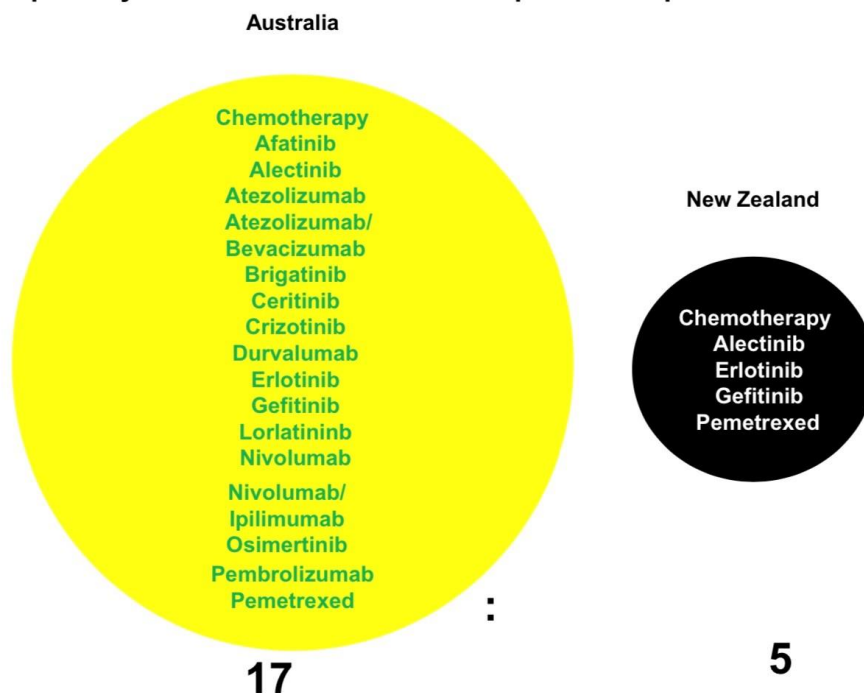
Comparing treatment of Lung Cancer in New Zealand with Australia

The infographic below compares the number of treatments for Non-Small Cell Lung Cancer (NSCLC) in New Zealand, with Australia and Europe (NSCLC = 85% of all lung cancers).

New Zealand funds just five treatments for lung cancer, in comparison to Australia which funds 17 treatments.

This huge imbalance goes some way to explain the 6% gap in three-year survival rate between NZ (2015 - 2017) and Australia (2013 - 2017). This gap is only going to grow.

New Zealand publicly-funded⁴ NSCLC treatment options compared with Australia: as at 28 April 2021





Another sad milestone - New Zealand does not fund immunotherapy for treatment of lung cancer

New Zealand has achieved another sad milestone, which suggests our thrift culture is oblivious to the inequity (and premature death) our outdated reimbursement processes cause.

Keytruda (pembrolizumab) was funded 5 years ago for melanoma, yet it remains on the waiting list for lung cancer (despite its efficacy being scientifically proven, knowing too, lung cancer mortality rates are FOUR times melanoma). Furthermore, there are 15 other indications for Keytruda (pembrolizumab) that are ALSO sitting with Pharmac.

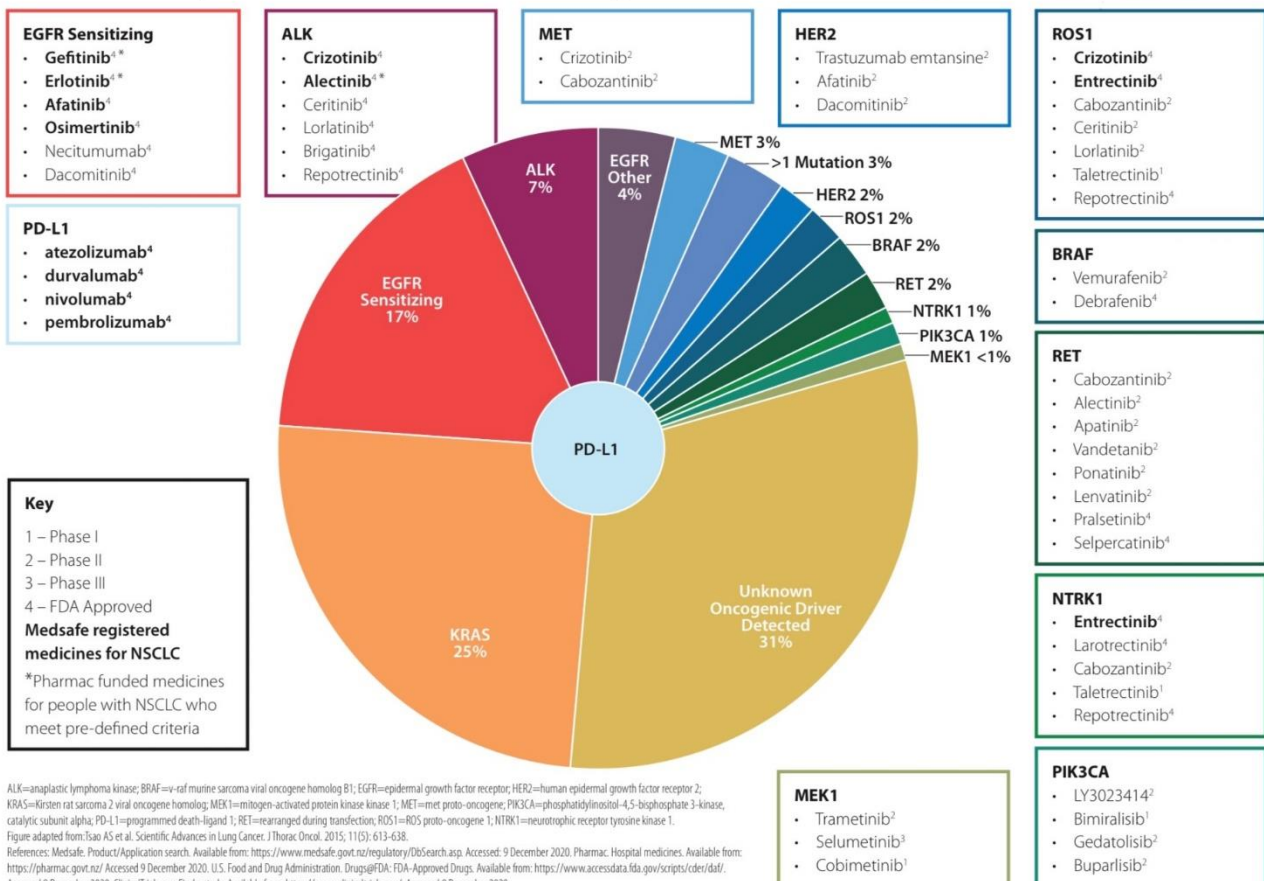
Lung Cancer Biomarkers - per the infographic below

Very few of the known lung cancer biomarkers are tested for in New Zealand, primarily because Pharmac does not fund these treatments. Patients in New Zealand should be tested for all known biomarkers at the time of diagnosis (and informed of the results irrespective of the reimbursement status of treatment options).

The infographic illustrates the many different lung cancer biomarkers for which treatments are available (and just how few are available in New Zealand).

<https://lungfoundation.org.nz/wp-content/uploads/2021/01/ROC00470-Lung-Biomarker-Graphic-7.0-1.pdf>

Biomarkers in patients with non-small cell lung cancer (NSCLC)



ALK=anaplastic lymphoma kinase; BRAF=v-raf murine sarcoma viral oncogene homolog B1; EGFR=epidermal growth factor receptor; HER2=human epidermal growth factor receptor 2; KRAS=Kirsten rat sarcoma 2 viral oncogene homolog; MEK1=mitogen-activated protein kinase kinase 1; MET=met proto-oncogene; PIK3CA=phosphatidylinositol-4,5-bisphosphate 3-kinase, catalytic subunit alpha; PD-L1=programmed death-ligand 1; RET=rearranged during transfection; ROS1=ROS proto-oncogene 1; NTRK1=neurotrophic receptor tyrosine kinase 1. Figure adapted from: Isao AS et al. Scientific Advances in Lung Cancer. J Thorac Oncol. 2015; 11(5): 613-638. References: Medsafe. Product/Application search. Available from: https://www.medsafe.govt.nz/regulatory/TDSearch.asp. Accessed: 9 December 2020. Pharmac. Hospital medicines. Available from: https://pharmac.govt.nz/ Accessed 9 December 2020. U.S. Food and Drug Administration. Drugs@FDA: FDA-Approved Drugs. Available from: https://www.accessdata.fda.gov/scripts/cder/daf/. Accessed 9 December 2020. ClinicalTrials.gov. Find a study. Available from: https://www.clinicaltrials.gov/. Accessed 9 December 2020.



Who we are -

Lung Foundation New Zealand (LFNZ) is a non-government organisation (patient advocacy group) dedicated to increasing survival for lung cancer.

The Lung Foundation provides information and support for lung cancer patients and carers and is devoted to advocating on a range of issues, including; prevention, early detection (screening), stigma, public access to more effective treatments, an increase in research funding and a commitment to Smokefree 2025.

Our Vision

New Zealanders know how to keep their lungs healthy and they investigate symptoms of lung disease earlier.

Our Mission

To increase survival for lung cancer

Our Goals

- Promote Lung Health
- Promote Early Diagnosis of Lung Disease
- Reduce Lung Cancer Deaths

Our Values

Rangatiratanga; we have integrity, we empower people, we say what we mean.

Manaakitaka, we nurture and respect people's mana.

Whanaungatanga, collaborating to improve healthcare in Aotearoa, also serves future generations.

Ehara taku toa i te toa takitahi engari he toa takimano

My strength is not that of an individual but that of the collective

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Make a gift - Support our fighting fund and help us save lives

<https://givealittle.co.nz/donate/org/lungfoundationnz>