

February 24, 2016

Canadian Agency for Drugs and Technologies in Health
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To whom it may concern,

We were pleased to see that the Canadian Agency for Drugs and Technologies in Health (CADTH)'s *Therapeutic Review: Drugs for Chronic Hepatitis C Infection: Recommendations Report* issued as its primary recommendation that all patients with Chronic Hepatitis C (CHC) infection be considered for treatment. This recommendation is supported by clinical evidence and acknowledges the desire of Canadians to access the most effective, least toxic treatments on the market to address their health conditions.

The *Recommendations Report* outlines the benefits of DAA treatment for all patients living with CHC, recognizing that the excessive prices of these medicines may cause payers to ration their access. In cases where payers determine a need to limit access to treatment, CADTH recommends that treatment priority be given to patients with more severe disease.

The unreasonably high prices of new CHC treatments are a result of pharmaceutical industry taking advantage of international and domestic medicine pricing policies which prioritize corporate profit over the health and well-being of people. Pharmaceutical companies will continue to over-charge, seeking the highest prices possible for their medicines, until Canadian and international governments address the system that allows for such greed. Addressing faulty pricing policies is not the mandate of CADTH, nor is it within CADTH's mandate to determine what payers can and cannot pay for treatments.

Canadian Drug Expert Committee (CDEC) recommendations for Harvoni, Sovaldi, Holkira Pak and Daklinza should be updated to align with the recommendations from the Therapeutic Review. Clinical criterion in all cases should be updated to encompass all Canadians living with CHC. Sections entitled 'Conditions' should clearly indicate that inflated pricing may be a factor that limits access for each of these medicines.

CDEC recommendations should acknowledge that while these new drugs are cost-effective at high prices, the same high prices may cause payers to have difficulty covering all patients who would benefit from treatment. Payers should seek price reductions. In cases where the prices

remain too high limiting access, priority for treatment should be given to patients with more severe disease.

We appreciate the recommendations in the Therapeutic Review of Drugs for Hepatitis C as we believe they align with evidence as well as with the needs and rights of Canadians. It is our hope that these recommendations will support payers to follow the lead of some of our provinces including New Brunswick, Prince Edward Island and Quebec who have established plans that balance access and cost, ensuring treatment for people living with CHC. It is also our hope that our federal government will see the example of hepatitis C medicines as motivation to review and update regulatory frameworks involved in the establishment of pharmaceutical pricing in Canada.

Regards,



Patricia Bacon
Chair, Action Hepatitis Canada

***Action Hepatitis Canada** is a national coalition of organizations responding to hepatitis B and C. Our work engages government, policy makers, and civil society across Canada to promote hepatitis B and C **prevention**, improve access to care and **treatment**, increase knowledge and innovation, create public health **awareness**, build health-professional capacity, and **support** community-based groups and initiatives.*