Press release

EPPOSI calls for greater co-operation between science, industry and regulators

Collaboration could lead to more balance in valuing innovation and real benefits for patients

Dublin, 24 January 2007: The co-chairs for patients, science and industry of the EPPOSI conference held in Dublin, Ireland, on Monday and Tuesday (January 22, 23, 2007) have called for much greater collaboration between patient organisations, science, industry and regulatory bodies in the development of new treatments that represent valuable innovation. EPPOSI contends that more transparency between these groups could free up significant capital for future healthcare innovation, as Ivan Baines explains:

"Because industry and regulation work in such isolation from each other – and because of the real likelihood that much of the work they do is needlessly duplicated – I believe health systems in Europe could make spectacular savings if these groups worked together to ensure that duplicated testing and analysis was kept to a minimum," he said.

Clinical development and regulatory approval costs were cited as a major cost contributor in the development of innovative treatments. Erik Tambuyzer, another co-chair of the meeting in Dublin explained how this extra cost was not translating into improved patient benefits.

"Patients want access to the most effective therapies that save or improve their lives and that means we must invest in medical innovation. But we are now faced with three phases of clinical trial before a treatment can be filed for approval. If we can

streamline these phases the cost of treatment development can be contained through improved efficacy and better research and development. We need to find ways to bring these costs down so that new treatments are not regarded as prohibitively expensive by governments and health systems," Mr. Tambuyzer said.

Poorly targeted or ineffective treatments were highlighted as another area in which health systems might look to make significant savings.

"Only three out of ten approved drugs pay for themselves," said Alastair Kent, the third EPPOSI co-chairman. "If we can encourage patients, doctors and health systems to reassess the treatments they are currently involved with then poorly used or ineffective treatments could be discontinued thus unburdening European reimbursement schemes further."

In addition to this, the need for some kind of harmonisation of reimbursement schemes at a European level was highlighted in a number of different workshops at the conference. In some instances, poorer member states from Eastern Europe were found to be paying more for certain treatments than their wealthier neighbours. Likewise this harmonisation needs to work in tandem with an EU consensus about innovation so that new treatments can be developed and adopted without incurring prohibitive costs. In light of this objective, a role was identified for patients as well.

"We need improved communication about risk," said Erik Tambuyzer. "There is an expectation that risk-free treatments can be developed, but this is not the case. There will always remain some small element of risk with treatments, but our efforts to wipe-out this small risk extremely costly. Perhaps a treatment is developed that has a 99.5% safety record. The cost of improving this record to 99.6% is enormous. Perhaps we would be wiser to educate patients about the risk involved with the 99.5%-safe and allow them to make their own decision."

Finally, the conference highlighted the need for society to place a greater value on science. The example of France was given, where huge investment in infrastructure is not mirrored by investment in human capital. A scientist with 10 to 15 years of study to their name can see themselves start on €1,200 / month when they leave academia. This, the conference noted, was less than some taxi-drivers in Paris make.

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About EPPOSI

The European Platform for Patients' Organisations, Science and Industry (EPPOSI) is a Europe-wide partnership of patients, academic science and industry which aims to advance healthcare policies for the prevention and treatment of serious diseases.
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