

Securing access to optimal cancer care through innovation, integration and sustainability

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Securing access to optimal cancer care for all patients can only be achieved through integrated, sustainable translation of today's scientific advances into tomorrow's treatments, reinforced by a clear understanding of the magnitude of clinical effects and accurate identification of patients most likely to benefit.

At the opening press conference of ESMO 2018 Congress, Scientific Chair, Professor Solange Peters stressed the importance of ensuring that the innovations reported at the meeting reach the right patients at the right time.

"ESMO 2018 is first and foremost about innovation, and compelling clinical trial data will be presented about potential new treatments for breast, prostate, ovarian and other cancers. But the conference is also about integration and sustainability, and we are encouraging a more integrated approach to cancer care as well as supporting essential policyinforming discussions about affordable, sustainable models of care," she said.

Over the next few days, data will be presented from over 2000 submitted abstracts, representing nearly 116,000 patients who have taken part in clinical trials. Amongst studies focused on access to care will be important research demonstrating large variations between countries in time for <u>reimbursement decisions</u> on new cancer drugs. This shows that



some European countries take more than twice as long as others to reach health technology assessment (HTA) decisions to reimburse new cancer drugs following their approval by the European Medicines Agency (EMA). The average <u>decision</u> time is longer than one year in some countries.

"Without timely reimbursement decisions, based on appropriate evaluation of a new medicine's benefits and cost-effectiveness, patients may miss out on potentially life-changing cancer medicines," explained study co-author Dr. Kerstin Vokinger, senior research scientist at the University Hospital of Zurich, Switzerland, and affiliated researcher at Harvard Medical School, Boston, USA.

The study found that health authorities generally made decisions much more quickly for drugs ranked as being of "highest benefit" on the ESMO Magnitude of Clinical Benefit Scale (ESMO-MCBS) which uses a rational, structured and consistent approach to grade the magnitude of clinical benefit that can be expected from anti-cancer treatments. Together with the recently published ESMO Scale for Clinical Actionability of molecular Targets (ESCAT) which simplifies and standardises choices for targeted cancer treatment, ESMO-MCBS is helping to ensure that treatment decisions are based on the highest standards of evidence.

"ESMO is a driver of change affecting the entire field of oncology. ESMO-MCBS and ESCAT are grounding treatment choices in the best available evidence, helping to enhance decision making for both clinicians and healthcare providers, and making a major contribution to securing access to optimal <u>cancer</u> care for all patients, wherever they live," concluded ESMO President, Josep Taberno.

Provided by European Society for Medical Oncology



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