National Child Cancer Network NZ
Linking Care / Sharing Knowledge / Advancing Best Practice

FAQ
Pharmac review of rule 8.1b / Private Member's Bill (Dr Shane Reti)

I'm really worried that Pharmac's recent announcement to review how paediatric oncologists obtain new child cancer drugs will mean we can't rely on up to date treatment for New Zealand children.

Since 2005, New Zealand paediatric oncologists have had a special arrangement with Pharmac to access new chemotherapy drugs (rule 8.1b of the pharmaceutical schedule). This means that they didn't have to go through the usual Pharmac assessment, approval and funding process.

Why didn't the usual Pharmac approval process have to be followed?

When Pharmac took over the purchasing of chemotherapy drugs for district health boards (2005) it was thought that child cancer patients could be disadvantaged if the new approval processes were applied to them. The disadvantage could occur due to:

- the small number of child cancer patients
- the relatively large number of chemotherapy drugs
- the high participation rates of children with cancer in clinical trials
- the fact that most childhood cancers are acute and need urgent treatment

In May 2021 Pharmac announced that, following a Human Rights complaint, this special access would be reviewed. This has been interpreted as stopping child cancer patients from having access to new chemotherapy drugs. This is not the case.

Firstly, both Pharmac and the Minister of Health have guaranteed that all currently used chemotherapy drugs will still be available to future patients. These drugs will continue to be funded by Pharmac and given in public hospitals at no cost to the child's family, as before.

Secondly, Pharmac is discussing with the National Child Cancer Network how access to new chemotherapy drugs can be continued in a way that manages the costs in a reasonable way and that access is seen to be fair.

These talks are at an early stage. It is important to note that a child's paediatric oncology team will still be able to access the up to date chemotherapy drugs which they believe will achieve the best outcome for a child.

This ensures that New Zealand child cancer patients and their families can continue to expect outcomes equal to the best in the world.

I've recently seen a petition on the National Party website suggesting that families of children with cancer will have to pay $1000 a week so their children can have chemotherapy drugs which they will need to buy, given in a private clinic. The petition says this is because Pharmac has cut off

access to new drugs for children and they will have to pay for the drugs themselves if they want the best treatment. The petition says that the private members bill will allow those drugs to be given in hospital to save families having to pay the administration fees in the private clinic as well as paying for the chemotherapy drugs.

This petition contains incorrect information and assumptions.

Firstly, Pharmac has not cut off access to the most modern chemotherapy agents. Paediatric oncologists will continue to be able to prescribe chemotherapy drugs at no cost to the child's family, and give these in a public hospital along with all the other fully assessed and funded drugs approved by Pharmac. The Pharmac review is about drugs which will become available in the future.

Secondly, there has never been a cost to families for chemotherapy recommended by a paediatric oncologist in a public hospital in New Zealand. Treatments that are recommended for children are not influenced by how much money a family has or how much funding they can raise from other sources such as 'Givealittle' pages.

The petition is more relevant to adult cancer patients - especially if the patient or their family has the money to purchase effective chemotherapy drugs which are not funded by the government to treat their cancer. Currently, drugs obtained privately like this are then given in private adult oncology clinics. The private members bill aims to change the law so these patients are able to have their privately funded chemotherapy given in a public hospital. This situation does not apply for child cancer patients and their families.

The National Child Cancer Network is committed to ensuring the best evidence-based treatment for all child cancer patients in New Zealand continues, regardless of a family's financial position. This will ensure that survival for all NZ children continues to be equal to the best in the world, regardless of who they are and where they live.

National Child Cancer Network, including Child Cancer Foundation
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