



**Patented Medicine Prices Review Board**

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July 30th, 2020

Dear Patented Medicine Prices Review Board Members,

On behalf of Canada's eczema patient community, I am writing to you to express our continued concern and frustration related to the recent proposed changes to the Patented Medicines Regulations, and the changes to how the Patented Medicine Prices Review Board (PMPRB) sets maximum (non-excessive) prices for patented drugs here in Canada.

As a Canadian patient organization representing eczema patients, we feel a responsibility to ensure the needs of our patient community are being communicated and met. Following a comprehensive information-gathering exercise which included consultation meetings, interviews, and patient surveys, we know there is a significant gap in treatments and unmet need for patients with eczema and atopic dermatitis (AD), the most common form of eczema. This gap is especially pronounced for the most severe AD patients, for whom there are very limited treatments available that effectively manage their disease. For these patients, their condition is unbearable, debilitating, and can negatively impact every facet of their lives.

We have significant concerns that the changes to the drug pricing process here in Canada will result in reduced access to innovative treatments including medications that will be restricted or may never come to Canada. I understand that we are already seeing the early effects of this; recent research from Life Sciences Ontario and IQVIA show a significant drop in new drugs launched in Canada in 2019. While those drugs may come eventually, the delay in accessing these treatments can be a significant burden to patients who have no alternatives. This is also frustrating for our patient community as there has been very little innovation in eczema treatments until now. Our community has been eagerly awaiting a number of breakthrough treatments that are in development around the world – treatments that could be life changing for some patients – and we fear Canadian patients may never have access to these innovative medicines.

These proposed changes could be tragic for the Canadians who are desperate for new medications, and could have unethical, unfair, and inequitable effects with profoundly negative impacts on patient health, daily functioning, and quality of life. We urge you to consider both access and patient need when making decisions that affect Canadians managing chronic conditions such as eczema.

Sincerely,

Amanda Cresswell-Melville, Executive Director, Eczema Society of Canada