

August 31, 2021

Patented Medicine Prices Review Board
333 Laurier Avenue West, Suite 1400
Ottawa, Ontario K1P 1C1

Input to PMPRB regarding proposed Guideline revisions related to GAP medicines, comparatory countries and International price tests

Since 1904, the British Columbia Lung Association (BCLA) has been dedicated to its mission of promoting and improving lung health for all British Columbians. A non-profit and volunteer based health charity, the BCLA depends on donations from the public to support lung health research, education, prevention and advocacy initiatives.

The Lung Association movement was started to control the spread of Tuberculosis and provide better services for TB patients. Today the Lung Association focuses on all issues that affect the ability of British Columbians to breathe.

The mission of the British Columbia Lung Association is to improve lung health for the 1 in 5 British Columbians who suffer from lung conditions. Our provincial organization and the nine other provincial lung associations that make up the Canadian Lung Association federation work together to help the one in five Canadians who have breathing problems.

We are writing to you today, to express our disappointment and are not able to support the proposed Guideline revisions without a full and credible impact assessment which would provide evidence that the changes will not have a negative impact on patient care, specifically the ability of patients in CANADA to access medications such as Respiratory Medications they need in the proposed PMPRB Guidelines of late. We the British Columbia Lung Association support and endorses the submissions of the Best Medicine Coalition and the Medicines Access Coalition-BC.

We encourage PMPRB to take a more comprehensive look at these proposed changes and fully assess the potential impact, both positive & negative, which can result from these changes and incorporate meaningful engagement of patients and patient organizations who can shed light on the otherwise unforeseen consequences these changes may have. Once this is done, then the information should be shared with patients and patient organizations so more thoughtful

consultation and feedback can be provided. So in short, there seems to be no reason for this new set of changes in July so late in the process and there is risk to its ill-researched implementation. We would be pleased to be involved in any engagement and consultation to improve access to medications and ensure fair pricing.

We are grateful for the opportunity to provide this submission and are open to further dialogue with PMPRB leaders & staff

Respectfully submitted:



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