



Cancer52 Position Statement on the Cancer Drugs Fund in England September 2013

Background

The Cancer Drugs Fund (CDF) in England promised 3 years of ring-fenced funding to pay for cancer medicines that either:

- were found not to be cost effective by the National Institute for Health and Care Excellence (NICE), or
- where NICE had yet to set out their recommendations on NHS use of cancer medicines.

The CDF was part of the Conservatives campaigning in the run up to the last General Election in 2010. The CDF is inherently a politically driven policy, not one that has at its heart patients.

CDF Now

The CDF is in its final year of committed funding, amounting to £200million up to April 2014. Decisions now need to be made about whether to continue the fund or phase it out.

Key features of today's CDF include:

- A centralized approach with responsibility for deciding what is funded by the CDF resting with NHS England. The Chemotherapy Clinical Reference Group (CRG) advises NHS England on which medicines to add and/or take away from the CDF
- An audit of medicines funded by the CDF

The CDF currently covers 31 products for 74 indications. Over the financial year 2013/14 so far, 4,128 patients have had their drug funded by the CDF.¹

The CDF hasn't solved the underlying problems of poor access in England

Cancer52 believes that the problems of poor access are not just about funding, but relate to more fundamental issues in the way that research and development is conducted including whether it could be made more efficient and hence result in lower prices, the tools that organisations like NICE use in coming to a decision to recommend a new medicine or not, and how patients are involved in those decisions.

¹ NHS England, [More patients benefit as specialist cancer drugs fast track list expands](#), 12th August 2013



Cancer52 believes CDF is a policy that has distracted from the underlying issue of a high rejection of new cancer medicines by NICE. This problem is getting worse and not better with the CDF in place.

More, not less uncertainty, for patients and clinicians

The fund is also just a small pot of cash and it runs the very real risk of creating even more uncertainty and unfairness amongst cancer patients, as new medicines become available which must then push out others. That means that patients and their doctors won't know whether the medicine that they are currently using will continue to be available to them, or to future patients who are just like them.

A short-term measure that has helped thousands of patients

Cancer52 recognises that the fund has provided access to thousands of patients since 2010, and changed lives. But it is a short-term measure. The CDF simply fails to get to the root causes for poor access.

Cancer52 is asking for:

- A coherent plan from Government about how to continue to provide access to current CDF drugs,
- Assurance that any new system truly negates the need for a fund.

Cancer52 does not believe that these conditions are currently in place, not least because the new approach to assessing value and pricing of new medicines (Value Based Pricing (VBP)) remains elusive. In the absence of a plan and proper assurance, the CDF must continue.

Contact

Jane Lyons

jane.lyons@cancer52.org.uk