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**EMBARGOED UNTIL 5AM APRIL 28**

**Cancer Control Agency releases analysis on funding of cancer drugs in Aotearoa**

Te Aho o Te Kahu, the Cancer Control Agency, has today released *Understanding the Gap: an analysis of the availability of cancer medicines in Aotearoa*.

The report analyses what cancer medicines for solid tumours are funded in Australia compared to New Zealand – both in quantity and clinical benefit.

“When someone is diagnosed with cancer, the first thing they want to know is whether there is a treatment. Whether curative, or life prolonging, people expect to have access to cancer medicines when they need them,” chief executive of Te Aho o Te Kahu, Professor Diana Sarfati said.

“For a number of years there has been a concern Aotearoa is lagging behind other comparable countries when it comes to the funding of cancer medicines.

“We wanted to do this analysis to understand how significant the gaps are in terms of clinical benefit when compared to our Australian neighbours.”

Te Aho o Te Kahu identified twenty different gaps (18 individual medicines), across nine different cancer types, where the medicine was publicly funded in Australia and not in Aotearoa and where it was indicated that the medicine would offer substantial clinical benefit.

Three of the gaps identified were for use in the curative context. For these gaps, the medicines are used alongside surgery with the intent to cure.

The remaining seventeen gaps were in the non-curative context. This means, for these gaps the medicines are being used with the intent of either extending a person’s life and/or improving the quality of their life, but it is not expected that their cancer will be cured.

Since the time of the analysis, two of the non-curative medicines have been approved for funding by Pharmac; durvalumab for a certain type of lung cancer, and olaparib for a certain type of ovarian cancer.

Most of the drugs identified are either being assessed by Pharmac or have already been assessed.

“Any gap in funding with substantial clinical benefit is important - particularly for those living with cancer,” Professor Sarfati said.

“We hope this report provides clarity on the state of play of cancer medicines in Aotearoa and is a useful tool for Pharmac and policy makers as they balance investment across the health system.”

“We hope to extend this analysis to include medicines for blood cancer as soon as it is feasible to do so.”

**Ends**

**Definition of gap:** A gap is where a cancer medicine is funded for a specific reason or indication in Australia but not in Aotearoa, and where that medicine is likely to offer substantial clinical benefit over and above what is already funded in Aotearoa.

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