Press Statement

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Date: **31/01/2018**

New EU plan to assess medicines' added value will benefit consumers

Today, the EU Commission has proposed to reinforce Member States' collaboration when they assess the added value of health technologies, such as medicines, medical devices or surgeries. This will lead to a better use of taxpayers' money, in turn channelling money towards more innovative treatments and research. BEUC supports the idea of joining efforts to conduct Health Technology Assessment (HTA) in Europe and highlights some requirements to make the system work for consumers.

The EU Commission proposes that Member States team up to avoid double work. At the moment, around 50 national and regional HTA authorities provide Member States with clinical data to help them decide whether their health systems will reimburse a drug and to which extent. However, this gathering of data tends to replicate work already carried out by another authority, leading to inefficiency in EU health systems and a waste of public money.

While some countries have fully-fledged systems in place, others have lower capacity[1]. Therefore, the lack of data and resources might make health systems reimburse obsolete and ineffective medicines or surgeries.

Monique Goyens, Director General of BEUC, commented:

"Too many new drugs or medical devices do not make a real difference compared to those already on the market[2]. Superfluous drugs waste taxpayers' money and eat up the budget that could otherwise be spent on innovative treatments for consumers. The Commission is right to encourage Member States to work together so that only health technologies with an added value get the go-ahead.

"It will save time and money to assess the same drug or surgery once at EU level rather than several times at national level. Also, it will put all consumers on an equal footing, as countries without such resources would benefit from EU-wide clinical assessments.

"To truly benefit consumers, the new cooperation must apply gold standards and rely on *all* the data available from clinical tests. Today, the assessments do not sufficiently take into account the negative results indicated in clinical trials. But we need the full picture to make sure consumers only pay for the treatments that make a difference."

"Assessment bodies collect data that is crucial to define drug reimbursement and prices, so they must be independent. If pharmaceutical companies started to fund their work, there would be obvious conflicts of interest. Therefore, assessments should stay away from

industry funding. It is the only way to guarantee that national budgets do not go down the drain paying for ineffective treatments."

ENDS

Notes to editors:

- BEUC response to the public consultation on Health Technology Assessment, 2017
- BEUC position on access to medicines

1. Examples include Austria, Bulgaria, Cyprus and Romania.
2. As an example, of the 68 cancer indications that the European Medicines Agency approved from 2009 to 2013, only 35 (51%) showed a significant improvement in survival or quality of life. 33 (49%) remained uncertain. Source: British Medical Journal, 2017.
   In France, 52% of drugs approved between 2000 and 2013 did not bring any new benefit to patients, according to the independent review Prescrire.