



Patient Interest Groups

Form for Submitting Patient Input to CDR/CEDAC and Participating Drug Plans

Section 1 – General Information	
Name of patient group submitting information: Name of the author(s):	
Contact Details Name of Primary Contact: Designation within the Organization: Contact Person's E-mail: Organization's E-mail: Mailing Address: Telephone Number(s):	
Drug and indication(s) to which submission pertains:	
Date on which patient input submission was made:	

For information about submitting patient input, please see the document *Guidance for Submitting Patient Group Input to the Common Drug Review and Participating Drug Plans*. Should you have any queries regarding the completion of this form, please contact the Common Drug Review (CDR) Directorate: **Telephone (613) 226-2553**.

This template form should be used to submit patient input. The patient input should be succinct and clear and must not exceed six typed pages, with a minimum 11-point font. When the form is completed, it may be submitted by either email or fax.

Email: patient.input@cadth.ca

Fax: (613) 226-5392
 Attention: CDR Directorate at CADTH

The patient input provided in this submission may be shared with the publicly funded drug plans that participate in the CDR to use in their decision-making.

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1.1 Submitting Organization

Please provide an overview of the organization making the submission, including the purpose or aims of the organisation and an outline of the type of membership.

1.2 Conflict of Interest Declarations

The CDR requires that all participants in the CDR process disclose any conflicts of interest in order that the objectivity and credibility of the CDR process is maintained. Patient groups must declare any potential conflicts of interest that may influence or have the appearance of influencing the information submitted.

(Examples of conflicts of interest include, but are not limited to, financial support from the pharmaceutical industry (such as educational/research grants, honoraria, gifts and salary) as well as affiliations or personal/commercial relationships with drug manufacturers or other interest groups.)

A. We have the following declaration(s) of interest in respect of corporate members and joint working/sponsorship or funding:

We have the following declaration(s) of interest in respect of those playing a significant role in compiling this submission:

Section 2 – Condition and Current Therapy Related Information

In each of the following sections, guidance for or examples of the type information that CDR, CEDAC and participating drug plans are interested in receiving to assist them in identifying the patients' perspective is provided. **The information included here should help CDR and CEDAC understand the needs and preferences of patients; however, individual or personal testimonials are to be avoided. Also, scientifically rigorous evidence that CDR and CEDAC can and do access from scientific literature should not be included here.**

2.1 Information Gathering

Please briefly identify how you obtained this information, e.g. personal experience, focus groups, one-to-one conversations with a number of patients using current therapy, etc.

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2.2 Experience that patients have with their condition

What are factors that impact the patients' day to day life and quality of life?

(Examples of the type of information you might include: (a) What aspects of this condition are more important to control than others? (b) How does this condition affect day-to-day life?)

2.3 Patients' experience with current therapy

How well are patients managing their condition currently?

(Examples of the types of information you might include: (a) What therapy are patients using for this condition? (b) How effective is the current therapy in controlling the common aspects of this condition? (c) Are there adverse effects that are more difficult to tolerate than others? (d) Are there hardships in accessing current therapy? (e) Are there sub-groups of patients who may be in greater need of an alternative to current therapy?)

2.4 Impact on caregivers

What challenges are posed for caregivers in caring for patients with this condition and ensuing adverse effects using current therapy?

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Section 3 – Related Information about the Drug being Reviewed

In each of the following sections, guidance for or examples of the type information that CDR, CEDAC and participating drug plans are interested in receiving to assist them in identifying the patients' perspective is provided. **The information included here should help CDR and CEDAC understand the needs and preferences of patients; however, individual or personal testimonials are to be avoided. Also, scientifically rigorous evidence that CDR and CEDAC can and do access from scientific literature should not be included here.**

3.1 Information Gathering

Please identify how you obtained this information, e.g. personal experience, focus groups, one-to-one conversations with a number of patients who have experience with the drug being reviewed, etc.

3.2 Advantages and Disadvantages of the Drug

Based on the experience that patients may have had with this drug as part of a clinical trial or manufacturer's compassionate supply or based on patients' expectations please provide the patients' perceptions about the drug if it were made available. Please note that the information provided in this section should be based on patients' personal experiences and not retrieved from scientific studies. Examples of the information that could be provided include:

What are the anticipated advantages and disadvantages of this drug over current therapy?
Is there a particular gap or unmet patient need in current therapy that this drug will help alleviate?

From a caregiver's perspective, how would a caregiver's level of care be impacted by this drug?

Section 4 – Additional Information

Please include any additional information you believe would be helpful to CDR and CEDAC.