Transparency in the Evaluation & Funding Process
How far can we go?

2013 CADTH Symposium
St. John’s, NL
May 6, 2013

David Shum, PharmD, MBA
Director, Reimbursement & Health Economics
Roche Pharmaceuticals
Increasing focus on transparency issues

Ref: Google ngram viewer
WikiLeaks

...could become as important a journalistic tool as the Freedom of Information Act.

— Time Magazine

Submit documents
“committed to transparency”

- US delegation (NYT, March 2013)
“supersecretive in one part about our products...but there are other areas where we will be completely transparent”
Healthcare: Big pharma, big data

By Andrew Jack

Patient groups are hailing a new era of transparency, but drug companies fear its effects

Source: FT, April 2013
Bad Pharma
Ben Goldacre
Bestselling author of Bad Science

How drug companies mislead doctors and harm patients

364 pages
GSK backs campaign for disclosure of trial data

Zosia Kmietowicz

The UK based pharmaceutical giant GliaxoSmithKline has become the first drug company to sign up to a campaign for all clinical trials to be registered and their full results disclosed.

The AllTrials initiative (alltrials.net) was set up in January by the charity Sense About Science, the BMJ, and other supporters of transparency in research. It is calling for registration of all clinical trials and for full study results and full clinical study reports (CSRs) to be made publicly available.

The campaign wants the number of clinical trials than published to be doubled by 2018, and the number of CSRs that are available online to rise from under 1% to 25% of all clinical trials. "The number of clinical trials that are available online is abysmally low," according to the campaign.

Ben Goldacre, author of the book Bad Pharma and a backer of the AllTrials campaign, welcomed GSK’s announcement. In a blog he said, “I couldn’t be any happier. This is huge, and internationally huge. GSK have made a commitment to post CSRs online. Because they have discussed these technical details—while I will always wait for the proof in the pudding—I do not believe this is mere lip service.”

Ana Nicholls, a healthcare analyst at the Economist Intelligence Unit, welcomed GSK’s stand on data disclosure but said that there was “still distrust about whether it is keeping information back.” That distrust has deepened, she said, since 2011, when the company agreed to pay $3bn (£2bn; €2.2bn) in fines and settlements in the United States after pleading guilty to misbranding Zoloft and Prozac, and while continuing to sell rosiglitazone to the Food and Drug
Transparency Index across HTA countries

Ref: Roche data
**PROS**

Fair & open process
Principles: priority setting
Patient / stakeholders

**CONS**

CCI
Patient data
Resources
Canada "losing out on secret drug price deals"

WORLD NEWS | APRIL 10, 2013

LYNNE TAYLOR

Health systems around the world are increasingly negotiating secret price rebates from pharmaceutical companies, and Canada risks losing out on these deals, new research warns.

For the study, which is published in the April issue of the journal Health Affairs, researchers interviewed policymakers from nine developed countries and analysed practices for securing confidential rebates from pharmaceutical manufacturers.

They report that almost all of the countries are now routinely negotiating rebates with companies as a condition of coverage under their health care systems, but they are promoting these rebates because the associated tools struck in one country do not set a
ORDER PO-3032


Ministry of Health and Long-Term Care

January 6, 2012

Summary: The appellant requested payment summaries setting out, by drug manufacturer, the amounts of discount payments made by individual drug manufacturers under the Ontario Drug Benefits Plan, the dates of the ministry’s invoices, and the dates when payments were received. The request was submitted to the Ministry of Health and Long-term Care, which
Information should be exempt from the general rule of public access

Disclosure of information would prejudice their economic interest

“any prejudice to the Ministry’s economic interest in this regard has a repercussive, concomitant negative impact on the government’s financial interest...”
Industry

Information should be exempt from the general
rule of public access

Commercial information - confidential business
tactics, strategies, and plans

INFORMATION AND PRIVACY COMMISSIONER OF ONTARIO
(Master Appeal File PA10-311)
(Ministry File A-2010-00048)

AFFIDAVIT OF DAVID SHUM

I, David Shum, of the City of Toronto, MAKE OATH AND SAY:

1. I have been employed at Hoffmann-La Roche Limited ("Roche") for 7 years and currently hold the position of Director, Reimbursement and Health Economics. I am responsible for reimbursement, health economics, pricing and private healthcare for all Roche products in Canada. As such, I have knowledge of the matters stated herein.

Confidentiality of Information Supplied by Roche

2. Roche has always treated, and continues to treat, all information regarding payments to the Ministry as well as the terms and conditions of its Product Listing Agreements ("PLA's") as confidential.
Towards increasing transparency

• Positive steps to increasing transparency in trial data and HTA

• Tradeoffs between total transparency and opacity
We Innovate Healthcare