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10/10/2018 Brussels

DRUG PRICING — TARGETING CANCER INEQUALITIES: A sweeping [white paper](#) out today from the European Cancer Leagues opens with a startling stat: more than a quarter of Eastern Europeans with metastatic melanoma do not have access to the innovative first-line treatment because of cost. Prices, combined with parallel trade and industry decisions not to introduce drugs around the Continent, the ECL's Access to Medicines Task Force argues, is driving shortages of cancer drugs, especially in Central and Eastern Europe.

Kicking parallel trade: We're seeing signs that both access NGOs and drugmakers are lining up against parallel trade, where drugs get bought by parallel traders at a lower price for sale in higher-income EU countries. The European Cancer Leagues do note that parallel trade can help ease temporary medicine shortages. On balance, however, they say it tends to exacerbate access issues in lower-income countries. ECL urges lawmakers to "impose trade restrictions on parallel trade in the European single market where access to medicines for local population is at stake."

Access wish list: That may be the last major point of common ground with pharma. The ECL recommend requiring centrally authorized medicines to be introduced simultaneously in all member countries, encouraging biosimilar uptake, defining a "fair price" based on transparent R&D costs and continuing to study ways to "improve the inefficiencies in the IP system."

Clinical trials: Outside of the traditional drug pricing battle lines, ECL also looks ahead to the changes in clinical trials likely to come with the increased study of personalized medicine. "Newer and more flexible clinical study designs based on consensus between academia, pharmaceutical industry and regulatory authorities are necessary," ECL argues. They urge more patient involvement throughout the trials process and say patients need to be informed about relevant trials no matter where they are. "Cross-border regulatory, practical and financial obstacles for patients shall be removed."

Political state of play: ECL is presenting the paper [in Parliament this morning](#), with Portuguese MEP José Inácio Faria of the European People's Party hosting the discussion. He noted the Commission and Parliament's work on health technology assessment, "but more still remains to be done, especially regarding affordability, which needs to be seen in a bigger picture. Health care systems might be more willing to pay for game-changing medicines, provided they are saving up in other already existing health technologies."