

UK news

Novartis accused of Lucentis 'campaign' against Avastin



Novartis "embarked on a campaign to undermine and divert attention" from a cheap drug for vision loss to maintain the dominance of its more expensive treatment, an investigation alleges.

The Swiss firm, which markets Lucentis (ranibizumab) in Europe, blocked researchers' efforts to conduct publicly-funded trials of Avastin (bevacizumab) and lobbied the General Medical Council against allowing the off-licence use of the drug, the BMJ says.

Systematic reviews suggest Avastin – a cancer treatment – has comparable effectiveness to Lucentis as a treatment for wet age-related macular degeneration (AMD), a leading cause of vision loss and blindness in older people in the UK.

Avastin costs around £34 per dose compared to the £742 per dose cost of Lucentis, and research suggests using Avastin as an off-licence treatment for wet AMD could save the NHS £102 million a year. NHS figures show hospitals in England spent £244 million on Lucentis in

2012-13, a 21% rise on the year before.

Previous versions of GMC guidance "contained a clause that encouraged doctors to prescribe off-label for reasons of cost" – but the BMJ claims the medical regulator performed a 'major U-turn' after being lobbied by the ABPI, the MHRA and the Royal National Institute for the Blind, who count Novartis as a regular donor.

The investigation found the charity's former policy and campaigns manager – who is now head of external affairs for oncology at Novartis – complained to the Health Research Authority challenging the ethics of a head-to-head study comparing Avastin and Lucentis.

Independent study investigators told the journal Novartis refused to supply Lucentis for use in the trials, and that company representatives "lobbied potential principal investigators against the trial, telling them that the protocol was seriously flawed".

In a statement Novartis says it is "committed to high standards of ethical business conduct". A spokesperson adds:

"We take any allegations seriously and are closely reviewing the content of the article. Novartis does not tolerate unethical behaviour by its associates in any country. We strongly believe that patients have the right to the highest standard of care and that this right should be defended to promote safety and quality as the key drivers of health policy."

The ABPI says pharma's commitment to making payments through the PPRS scheme means "NHS clinicians use the best branded medicines and innovative treatments at minimal additional budgetary cost".

The trade body's Dr Virginia Acha says: "Patient safety is paramount and regulators, like doctors, need to consider the evidence when approving a medicine for use."

"The ABPI firmly believes, and is supported by government in its view, that it is neither in the interests of patient safety nor prudent to set policy for the routine use of medicines unlicensed for treatment on the grounds of cost alone."

For more on Avastin, see p6.

Over one billion drugs dispensed in England in 2014, NHS report shows

Patients in England collected over 1.1 billion prescription items in 2014, according to NHS figures.

Latest statistics from the Health and Social Care Information Centre (HSCIC), which collates data on behalf of the NHS, show an increase of 3%, or 34 million items, on 2013.

The latest Prescription Cost Analysis reveals that in 2014 the Net Ingredient Cost (NIC, or the cost of a drug before discounts, and excluding dispensing costs or fees) was £8.9 billion. This also increased by 3% (£227 million) compared with the year before.

Simvastatin was the most commonly prescribed drug in England in 2014, with

37.8 million items dispensed at a NIC of £50.6 million. The top 20 most commonly prescribed medicines were dominated by heart drugs, painkillers, asthma inhalers, proton-pump inhibitors, antibiotics and antidepressants.

And in terms of drug costs for branded medicines, respiratory, diabetes, and cardiovascular disease drugs dominated the top 20. The NHS in England spent the most on Boehringer Ingelheim's Spiriva (tiotropium bromide), which cost nearly £150 million. GSK's Seretide (fluticasone propionate, salmeterol xinafoate) and AstraZeneca's Symbicort (budesonide, formoterol fumarate dehydrate) both had costs of more than £100 million in 2014.

In line with figures from Diabetes UK showing the number of people diagnosed with type 2 diabetes has risen from 1.4 million to around three million since 1996, the cost of dispensing the diabetes drug metformin now has the greatest individual NIC, at £96.2 million.

The top 20 drugs by cost also included three other diabetes drugs: MSD's Januvia (sitagliptin), Sanofi's Lantus (insulin glargine) and Novo Nordisk's Victoza (liraglutide).

Pfizer's Lyrica (pregabalin), which is under threat from generic alternatives available for two of its three indications, and Merck's Ezetrol (ezetimibe), were also in the top 20.

UK pharma contributes £32 billion to economy

Pharma generates over half of the UK life sciences industry's turnover, according to a government report.

Of the £56.2 billion generated in life sciences in the UK, £32.4 billion was from big pharma – by far the biggest sector. There has also been growth in the industry – although it has been slight.

Between 2012 and 2014 companies posted a "marginally positive net increase in estimated turnover of 0.2%", the report finds. The big pharma sector – defined as firms with a global turnover greater than £640 million – consists of 545 companies, and all of the top 20 global firms have a presence in the UK.

Pharma employs 70,000 people, including 53,200 in companies that are employed in discovering, developing and marketing medicines, despite the job losses that have occurred after big pharma mergers (see p1).

"The estimated employment trends indicate that the decrease across the sector was driven in large part by restructuring by the large pharmaceutical companies", the report notes.

The areas with most financial progression manufacture therapeutic proteins and vaccines, which accounts for 'significant economic activity', as do biologic drugs that now represent 20-22% of global prescription sales.

Contract manufacturing and research companies, clinical research organisations and suppliers of laboratory consumables and equipment dominate the service and supply segment.

This analysis comes shortly after a similar study commissioned by the International Federation of Pharmaceutical Manufacturers and Associations (IFPMA) found that between 2006 and 2012, the global economic value generated by pharma rose by \$129 billion, to \$437 billion – driven by emerging markets in Asia and Oceania.

Commenting on the report, George Freeman, who was UK life sciences minister, says: "Overall turnover in the UK life sciences industry remains high and the industry's contribution to UK employment strong. This is despite the restructuring that has been taking place globally in the sector, over the last few years in particular."

"This, along with the already competitive business environment within the UK, will put us in a position to continue to attract life sciences companies to set up and expand here."

For more on the state of the industry, see p18.