

December 12, 2007

Honourable Ross Wiseman
Confederation Building
4th fl, West Block
P.O. Box 8700
St. John's, NL
A1B 4J6

Sent via email to:
rosswiseman@gov.nl.ca
original mailed

Dear Minister Wiseman:

We, as members of Arthritis Consumer Experts and the Canadian Arthritis Patient Alliance, are writing to re-draw your attention to a critical issue facing over 2,500 citizens of Newfoundland and Labrador living with **ankylosing spondylitis – the lack of availability to biologic medications on the provincial drug reimbursement formulary**.

We are pleased to see that you have followed the recommendation of the Canadian Expert Drug Advisory Committee (CEDAC) and listed adalimumab (Humira®) to your provincial drug benefit plans for people with active ankylosing spondylitis who meet the criteria¹. While this represents important treatment options, it is also critical that all safe and effective options are included on the provincial formulary. As with other diseases, people living with ankylosing spondylitis respond differently to medications and therefore it is important to have a broad range of treatment options available. For this reason, we ask you to list the other two biologic response modifiers on the market available for this disease, both of which have been under review for up to two and a half years.

The inclusion of these medications is central to improving and maintaining the health of people living with ankylosing spondylitis in Newfoundland and Labrador. There is irrefutable evidence supporting the use of biologic response modifiers for the treatment and management of ankylosing spondylitis². In addition to the personal health benefits that emerge from appropriate and timely treatment, there are important social, political, and economic benefits for government.

¹ CEDAC recommendations: http://www.cadth.ca/media/cdr/complete/cdr_complete_Humira_Resubmission_June-27-2007.pdf

² Rudwaleit et al. *Arthritis and Rheumatism*, 2007; vol.56, #9 (supp): S871; van der Heijde, *Arthritis and Rheumatism*, 2007; vol.56, #9 (supp): S252; Keat et al. *Rheumatology*, 2005; 44:939-947; Boonen et al. *Arthritis Rheum* 2006; **65**:201–8.

It is important to recognize that the economic impact of not providing these medications is far greater than the cost of providing them. For example, the consequences of un-treated or under-treated ankylosing spondylitis, such as spinal rigidity, increased risk of fractures and other joint problems, are irreversible and result in higher use of health services and work disability³.

Given the strong scientific evidence, we urge you, as Minister of Health, **to take the immediate necessary steps list all medications that make up the class of biologic response modifiers on the provincial drug benefit plan for people with ankylosing spondylitis.** We remind you that providing a timely reimbursement listing for this medication will ensure that citizens of this province living with ankylosing spondylitis are able to reduce the pain and disability associated with delayed treatment, improve their quality of life and have the same care and treatment options that people have in other provinces in Canada.

We thank you in advance for considering our request, and await word from you on the listing decision for these medications.

Sincerely,



Cheryl Koehn
President, Arthritis Consumer Experts
Person with rheumatoid arthritis



Anne Dooley
President, Canadian Arthritis Patient Alliance
Person with rheumatoid arthritis

C.c. Colleen Janes, Director, Pharmaceutical Services

Note: Please address reply correspondence to Ms. Cheryl Koehn, Arthritis Consumer Experts, 910 B Richards Street, Vancouver, BC V6B 3C1, or to Anne Dooley, 206 Garrison Crescent, Saskatoon, SK., S7H 2Z8. Thank you.

³ Kobelt et al. *Rheumatology* 2004;43:1158–66.; Keat et al. *Rheumatology*, 2005; 44:939-947; Boonen et al. *Arthritis Rheum* 2006;65:201–8.