

Duodopa Issue Summary

Parkinson's disease is a degenerative neurological condition which affects one in every 500 people. Here in BC approximately 13,300 British Columbians live with the disease. Symptoms include tremors, loss of balance, and difficulty with movement and fine motor skills. Parkinson is progressive, meaning the symptoms will generally worsen over time though the rate of this progression is different for each person.

Many people are able to control their symptoms for several years through oral therapies including levodopa. However some patients progress to advanced Parkinson's and have severe, disabling motor fluctuations and hyper-/dyskinesia (involuntary movements) which can no longer be controlled by combinations of available oral medicinal products for Parkinson's disease.

For some of these patients, Duodopa may help in the management of advanced Parkinson's Disease. Patients have a tube surgically implanted into their small intestine which allows a pump to control the steady release of a medicinal gel consisting of levodopa/carbidopa in exacting amounts continuously throughout the day. Patients can also increase a dose if needed to control tremors or worsened symptoms.

The therapy enables people to live independently in their own homes for many more years. For a young person, it allows them to go back to work. It enables a care giving spouse to be released from the caregiver role, improve their own health and become re-employed. For the older person, life at home continues instead of becoming so disabled that long term care or hospitalization is the only option.

There are very few patients in BC that will require this therapy. Dr. McKeown, Director of the UBC Movement Disorder Clinic estimates 10 to 12 patients per year, some of whom will have private plans that cover the cost.

Key among costs avoided are those related to a patient's aspiration and choking due to their inability to swallow properly when medication is not working. This can include ambulance rescue costs, emergency room, brain damage if resuscitated too late, hospitalization, long term care and of course, early death. It is estimated the cost of a hospital bed is \$400 to \$1000/day. A long term care bed in a complex care facility can cost approximately \$80,000 per year. For patients who would benefit from Duodopa the costs for home care, emergency services, hospitalization and/or long term care would likely be minimized or avoided.

Duodopa is not publically reimbursed in BC. BC Pharmacare has indicated previously they will not consider a submission for coverage without a recommendation from the Common Drug Review. AbbVie has indicated they will not do this as they have already secured agreements with Ontario, Manitoba and Yukon to provide access to Duodopa with reimbursement in Quebec and Alberta through special access programs. Resubmitting to CDR would put reimbursement in Quebec and Alberta at risk.

The Society requests that BC Pharmacare review the evidence like other provinces have and, on a case by case approach, review and approve Duodopa therapy reimbursement for patients in need of this life changing and/or lifesaving therapy. Duodopa is the only hope that these few patients have of avoiding the progression of their symptoms and the many costs this will impose on the BC healthcare system.