

Submission to the Health Select Committee on the Medicines Amendment Bill

Introduction

This submission is made by CLL Advocates NZ, an organisation representing the interests of Chronic Lymphocytic Leukaemia (CLL) patients and their families.

In New Zealand, approximately 2,800 people are diagnosed with blood cancer each year. This number encompasses leukaemia, lymphoma and myeloma. Leukaemia accounts for around 700 cases annually — the majority of these being CLL.

Part 1. Consent to distribute medicines by verification

We welcome this Bill and believe its introduction to be long overdue.

Implementing the proposed changes will speed up the verification pathway for medicines to be approved by Medsafe for use in New Zealand — reducing the time frame from as long as 2 years to 30 days where a particular medicine has already been approved by 2 recognised jurisdictions.

This will be of immense benefit to blood cancer patients who may be able to access medicines recommended by their haematologist but which have not yet been funded by Pharmac. Regrettably, though, this access will only come about through self-funding, Give-a-Little pages or health insurance where applicable.

There are many new drugs under development as CLL is the most common blood cancer world-wide and we therefore hope that this proposal might lead to a speedier process for such drugs to be funded by Pharmac. This

will, of course, require political will along with appropriate funding for Pharmac.

As an aside, we urge the Government to give greater recognition to the fact that most of the new blood cancer drugs are self-administered at home leading to offsetting savings in the hospital system as fewer people need to be accommodated in Medical Day Wards occupying chairs and nurses' time.

Part 2. Other amendments

Here we focus only on aspects of the Bill which directly impact blood cancer patients.

Nurse Practitioners We welcome the proposed change whereby other medical professionals such as nurse practitioners will be able to prescribe approved medicines. We consider this to be of potential benefit to people living in rural areas but would caution that such approvals should only be made in consultation with a suitably trained medical specialist.

Funded Alternative Medicines We welcome the proposal to allow the prescribing of alternative drugs listed on Pharmac's pharmaceutical schedule when other funded drugs are in short supply.

Section 29 Again, we welcome the overall thrust of what is being proposed here. It is sometimes necessary to prescribe unregistered medicines for compassionate or other reasons and these amendments seem to facilitate that.

The proposed requirement for the importer or manufacturer to carry more of the burden of reporting on the prescription of unregistered drugs will also lighten the bureaucratic workload of our hospital specialists.

We are pleased that the proposed amendments do not appear to add impediments or burdensome reporting requirements to the prescription of off-label drugs. Off-label prescription is becoming increasingly important as the new generation drugs are able to target subgroup malignancies.

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