

The Canadian Association of Pharmacy in Oncology

Association Canadienne de Pharmacie en Oncologie



A word from the President

Greetings to all CAPHO members.

It was a pleasure seeing all of you in Montreal at an excellent NOPS weekend last month. The various sessions were first-rate in quality, and the opportunity to network with many of you was invaluable. NOPS is growing and so is CAPHO. I would like to thank the NOPS organizing committee once again for putting on a fabulous educational event. I am already looking forward to next year's NOPS in Halifax - not that I want to put any pressure on the organizing committee . . .

Just prior to the NOPS weekend, your CAPHO Executive Committee was busy in our bi-annual retreat redefining what we do and planning our association's direction for the upcoming years. Here are some of the things happening with CAPHO.

Over the last couple of years, the Executive Committee has taken a new structure - new Standing Committees, new responsibilities, and CAPHO has a different agenda than it did 10 years ago. As discussed at the AGM in Montreal, the by-laws need to be updated to better reflect what we do and who we are. During the upcoming year, we will be sending all members a revised version of the by-laws and would like your input. The final version of the by-laws will then be presented for membership approval at the 2007 AGM in Halifax.

The first CAPHO-Merck HOPE on-line module for CINV is now available at www.capho.org and is an accredited program. I urge you to try it out and give me your feedback. We are also working on another exciting module on the Molecular biology of cancer which we hope to have on-line by NOPS 2007.

For the first time, CAPHO will also be sponsoring a satellite symposium at CSHP's

PPC in Toronto this January. The Executive Committee decided that it was time to increase the awareness of oncology pharmacy practice and the visibility of CAPHO. More information will follow regarding topic, speaker, time and location. CAPHO members, of course, can expect to be invited.

During 2006, the Executive Committee mandated a Membership Subcommittee to look at issues of recruitment and retention of members, as well as increasing the visibility of the association. The recommendations of this subcommittee were presented to the Executive and can now be found on the CAPHO website. As a result of the recommendations, a Standing Membership Committee is being implemented to pursue the recommendations on an ongoing basis.

The suggestion put forward at this year's AGM that we publish the CAPHO Standards of Practice for Oncology Pharmacy in Canada has also been put into motion. We will let you know how this develops.

I would like to encourage all CAPHO members to get actively involved in their association. The CAPHO Executive Committee needs your ideas, comments and feedback in order to move forward. Let us know what you want!

Gabriel Gazzé, CAPHO President
MUHC – Royal Victoria Hospital
Oncology Pharmacy A2.01
687 Ave Des Pins Ouest
Montreal, Québec
H3A 1A1
Tel : 514-934-1934 ext 34121
Fax : 514-843-1724
gabriel.gazze@muhc.mcgill.ca

NCIC Report

Submitted by Ing Collins, NCIC Representative

A number of significant things came out of the Fall NCIC Meeting. To begin with, any pharmacists or pharmacy technicians are welcome to attend the NCIC Spring meeting, even though they are not a member of the committee. However, it would be up to their institution to decide about funding. They just will not be funded for their travel/hotel expenses. The Spring meeting is an excellent way to be informed about NCIC clinical trials: results, assessments and future directions. In addition, there is an educational day for new clinical research associates (CRAs) that pharmacists and pharmacy technicians can attend - space permitting. Although new CRAs have first priority, recently pharmacy staff have also been able to participate.

Currently, work is in process to put a workload/Oncology survey on the member section of the Pharmacists Network page. This survey is intended to gather information about the Pharmacy workload towards oncology clinical trials from various sites across Canada. Analysis of this data will be performed by Central Office of the National Cancer Institute of Canada Clinical Trial Group.

NOPS 2006

Submitted by Victoria Kyritsis, NOPS 2006 Co-chair

CAPhO held the National Oncology Pharmacy Symposium (NOPS) 2006 in Montreal on October 13-15 with the theme "The Dollars and Sense of Quality Cancer Care."

The conference started off with a blast and maintained its tone with an excellent array of speakers who addressed the issues of coping with the costs of new cancer therapies and dealing with the ethical and social perspectives of oncology drug use. With the prevalence of different cancers and the soaring costs of new drug treatments, balancing quality of care and treatment accessibility continues to be a challenge for all oncology pharmacy practitioners. Plenty of discussions were

generated and attendees had the opportunity to network with colleagues from across the nation during our social and educational functions.

For more information on the topics presented and pictures from this year's symposium, check under NOPS 2006 on the website. We look forward to seeing everyone next year in Halifax for NOPS 2007!

Report from the PMPRB Stakeholder Consultations on Excessive Price Guideline Review

Submitted by John T. Wiernikowski, Treasurer

It was a distinct pleasure to be able to represent CAPhO and the constituency of Paediatric Oncology at the recent Stakeholder consultations on Guideline Review held by the Patent Medicines Price Review Board in Montreal on November 8, 2006. The meeting was well attended with broad representation from various stakeholders. In addition to CAPhO, there was representation from the Pharmaceutical Industry, the Quebec Hospital Association, the Heart & Stroke Foundation, The Alberta Cancer Board (represented by Carole Chambers), several hospital pharmacy directors, and a senior citizens lobby group. The day was well organized with participants split into three breakout groups that had multifaceted representation. The goal for the day was to get input into these three main areas that the PMPRB is re-evaluating as part of its mandate.

The first session centred on "Guiding Principles" vis a vis: what principles are relevant (or not) to the PMPRB's regulatory mandate and the formation of price guidelines based on factors and parameters set out in the *Patent Act*. Discussions focused largely on having the lowest reasonable price for a new agent coming on the Canadian Market, as well as an assessment of value for dollars spent - something that the PMPRB currently does not do since parameters in the *Patent Act* place this activity beyond the Board's mandate.

The second breakout session focused on the current classification of drugs by the Board. Category 1 consists of drug products that represent a new strength or new dosage form of an existing medicine. Category 2 are those drug products that provide a breakthrough or substantial improvement over existing medicines/treatments. Category 3 drug products offer moderate, little or no therapeutic advantage over comparable medicines (i.e. "me too" drugs). There was generally agreement that aside from category 1, there was too much "gray area" or overlap between categories 2 and 3 to make them useable (at least in their current form) and that they should probably be done away with.

The second session also included discussions on price review in sub-markets within Canada. Currently, the PMPRB only looks at the average transaction price (ATP) for any agent sold across the country, which is not to exceed the established maximum price set by PMPRB. However, this means that there can be substantial variation in the price of a drug across the country - a point that was thought to be unreasonable by many participants, as it flew against the issue of equitable access. Various recommendations were made, but the simplest seemed to be that the PMPRB would 'publish' the maximum price for any patented agent, and then purchasers/buying groups/Provincial Ministries of Health could complain to the PMPRB if they were charged a price in excess of the maximum. This would save the PMPRB an inordinate amount of work to review every drug.

The final breakout focused on re-benching or re-setting the maximum price, and considered whether an introductory maximum price should ever be re-benched, and if so, when and what evidence should be required for re-benching. This session, provided the most lively discussion of the day, with strong opinions for or against re-benching. I'm sure you can all guess who was opposed. However, one of the more germane arguments put forward in favour of re-benching was the example of Imitanib (Gleevec) in the setting of GIST.

The day concluded with a summary of all of the discussions. The PMPRB board will be looking

at all the input from across the country. I will be getting a preliminary report early in the New Year, and will be pleased to inform CAPHO members of the directions that the PMPRB will be taking. If interested, you can find general information about the Patent Medicines Price Review Board at www.pmprb-cepmb.gc.ca

Website Update

Submitted by Tim van Helvert,
Communications Officer

Check out the [links page](#) on the CAPHO Website which is in the process of being updated to provide more resources for members. It would also be great to have a section with online learning links, news and reference texts that others have found useful in their practice. If you have suggestions of resources you have found helpful and would like to share them with other members, please send them to tvanelvert@niagarahealth.on.ca so that they can be added to the links page.

Phorum is now working again after some 'glitches' in past weeks. Be sure to check out the postings found on the members page for any pertinent practice discussions that you may have missed while the automated e-mail system wasn't working. If, at any time, you want to be removed from the Phorum discussion, you can send an e-mail to: majordomo@capho.org with "unsubscribe phorum" in the subject **and** the body of the e-mail. If you want to be removed from other or all future mailing lists, you need to send an e-mail to the web master requesting this at: info@capho.org