



**National Council of  
Women of New Zealand**

Te Kaunihera  
Wahine O Aotearoa

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**Submission to PHARMAC on the Proposal regarding the funding of 12 months treatment with Herceptin (trastuzumab) for HER 2 positive early breast cancer**

The National Council of Women of New Zealand (NCWNZ) is an umbrella organisation representing 46 nationally organised societies. It has 26 branches throughout the country attended by representatives of those societies and some 150 other societies as well as individual members.

NCWNZ has been involved in discussing and promoting health issues for more than a century. In responding to this consultation document we attempted to gather information from our membership – including their personal experiences with either form of Herceptin (trastuzumab) – but we need a much longer timeframe to gather such information. This response is based on NCWNZ's body of resolutions and on the few responses received in the time frame, as well as some fundamental issues that fuel the debate on Herceptin.

The aggressiveness of HER 2 positive early breast cancer requires early diagnosis, intervention and treatment. The responses speak positively of the treatment undertaken, be it 9 weeks or 52 weeks, with no experience of significant side effects. One commented that the 9 week treatment could be administered locally (Tauranga) whereas if the 12 month option had been taken (unaffordable to this person) there would have been additional travel costs and expenses as the closest treatment provider was in Hamilton.

While personal experience of Herceptin treatment is an important aspect to formulating a well-founded response to this consultation, another consideration is the desire that many women have that effective treatment be available should they be stricken by breast cancer in the future. Women are concerned about the impact cancers and their treatment may have on their life, the social and economic costs and the opportunities foregone.

The introduction of new medications is one aspect of health reform. NCWNZ policy supports the need for community understanding of, and consultation into, any health reforms.

Few members are aware of the criteria used by PHARMAC to assess which medicines to fund. While the National Advisory Committee on Core Health and Disability Support Services was unable to reach a conclusion in the late 1990s, there have been – and will continue to be – major changes in health service provision through surgical or medical interventions and preventative measures. Perhaps it is time to re-engage New Zealanders in the ethical debate behind determining the health needs of all eligible people, given the needs of specific communities, the cost of addressing health needs by whatever means, the social cost of not addressing the needs, and the amount that health service users can afford. The Bioethics Council has recently shown how to approach a contentious issue using the deliberative process, which may be an effective way to begin such a debate.





Over the last couple of years several NCWNZ Branches and Nationally Organised Societies have indicated their desire for NCWNZ at a national level to establish a position on Herceptin treatment. The Council has been aware that there is a lack of definitive research and evidence, which categorically defines the best option. The lack of robust data continues to this day.

National Council of Women of New Zealand regrets that at this time it is unable to provide a definitive position on whether PHARMAC should invest in Herceptin treatment for a 12 month or 9 week period. It is our intention to undertake broader and fuller consultation of the membership on this subject over the next few months to establish what women want. This information will be made available to PHARMAC, although we acknowledge that this will fall outside the consultation period.

A handwritten signature in black ink, appearing to read 'C Low'.

Christine Low  
**National President**

A handwritten signature in black ink, appearing to read 'Beryl Anderson'.

Beryl Anderson  
**Convener, Parliamentary Watch Committee**