



PATIENTS DENIED ACCESS TO NOVEL MEDICINES BY SOUTH KOREA

Discriminatory Metrics and Lack of Patient Engagement Lead to Access Challenges



In South Korea, once a drug is approved for safety and efficacy, it must be assessed by the Health Insurance Review and Assessment Service (HIRA) to determine if it will be covered by the National Health Insurance Service (NHIS). In order to be listed on the NHIS, the drug must show economic “value” based on a traditional cost-effectiveness assessment relying on the Quality-Adjusted Life Year (QALY). The QALY is known to discriminate against older patients, those with chronic illnesses and people with disabilities. There is very limited patient engagement throughout South Korea’s process, increasing the likelihood that government decisions are unrepresentative of patient needs and preference.

Cancer Patients in South Korea Lack Access to Needed Treatments

Bile duct cancer is a deadly cancer, and Korea has the **highest mortality rate** from the cancer worldwide. Despite this reality, the NHIS still will not allow patients to access immunotherapy for bile duct cancer. Immunotherapy has proven clinical benefit, more than doubling overall survival rate at three years. Immunotherapy has been approved for use for almost three years, but no immunotherapy drugs have been added to the NHIS.

Policymakers must reject pricing schemes modeled after foreign countries that would devalue and ration care for Americans.

More Info
www.pipccpatients.org

Korean Epilepsy Patients Face Delays in Accessing Treatments

Korean doctors are voicing concern about the extreme delay in introduction of new epilepsy medications to Korea. The Korean Epilepsy Society President, Seo Dae-won, has said that the delay in introducing new drugs for epilepsy is a problem that threatens the “right to survival” for patients with drug-resistant epilepsy. He pointed to Korea’s HTA system as the problem and said, “if we go for a low pricing policy and block the introduction of new drugs like this, we will inevitably fall behind in diagnosing and treating epilepsy.”

Breast Cancer Patients Face Delays in South Korea

It took over two years for Trodelvy to be added to the NHIS for metastatic triple-negative breast cancer in Korea. **For many patients, this came too late.** It still remains inaccessible as a first-line treatment, and many doctors are making clear that two years was unacceptable for a drug that delivers clear survival benefits. Park Ji-yeon, a patient advocate and three-time cancer survivor called the delay “a slow death sentence for many.”