

How can we make life easier

for New Zealand
NET cancer patients?



Unicorn
Foundation
*Seeking the cure for
Neuroendocrine Cancers*

Somatostatin analogues are an effective treatment.

A common issue affecting NET (neuroendocrine tumour) cancer patients is an over-production of hormones that can cause carcinoid syndrome. Somatostatin analogues are a type of drug that can stem the excess production of hormones, thus treating the carcinoid syndrome and the associated symptoms, including diarrhoea and flushing of the skin.

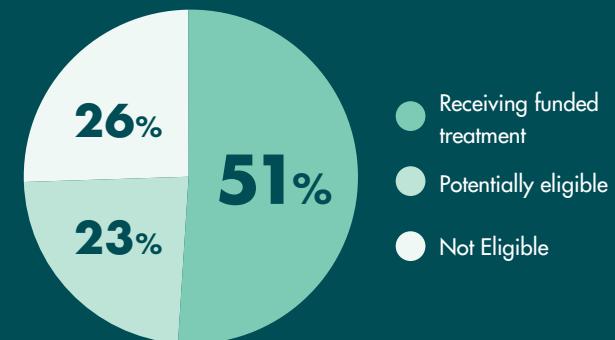
The most common somatostatin analogue drugs are octreotide (Novartis, funded in NZ) and lanreotide (Ipsen, not currently funded in NZ).

HOW WIDELY ARE THEY USED?

In May 2020, we surveyed our Unicorn Foundation New Zealand patient database to find out about their experiences. This is a comprehensive and varied population, representing diversity in gender, ethnicity, age, and geography (see below for a more detailed breakdown). We are confident the results are representative of the wider NET population in the country.

Over half our respondents receive funded somatostatin analogue treatment, and a further 23% of patients think they may be eligible for it.

% USING SOMATOSTATIN ANALOGUES

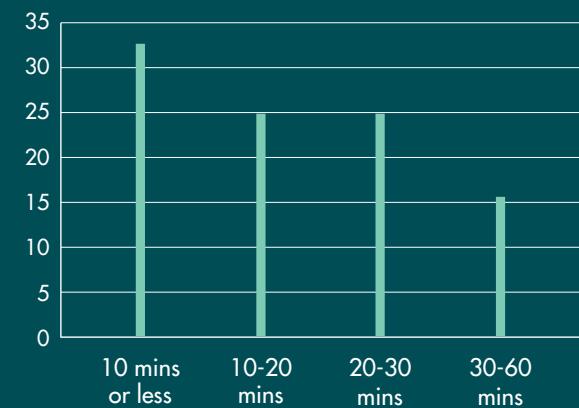


BUT THERE IS AN UNCOUNTED COST TO NET PATIENTS.

Sixteen percent of patients are travelling between one and two hours return every four weeks to receive their octreotide somatostatin analogue injections. The need for this unnecessary travel and the substantial burden it places on patients could be removed by the funding of lanrenotide (which can be self-injected).

This would also free patients from the requirement to stay in close proximity to a healthcare practitioner who can administer octreotide injections, something that currently restricts many patients from travelling around New Zealand and overseas to spend time with family.

TRAVEL BURDEN EACH WAY



THIS BURDEN REDUCES PRODUCTIVITY.

57%

of respondents reported that getting their octreotide injections created a significant impact in their lives

23%

of respondents had to take time off work (compounding the financial burden already incurred by travel costs)

19%

of respondents needed someone else to take them to their appointments

UNSEEN COSTS TO THE HEALTHCARE SYSTEM.

For some patients, the increased financial burden is not only borne by them, but by the taxpayer also, overloading an already stretched healthcare system.

"The district nurse comes to my home so I don't have to travel at all."

"I book a time at my GP and pay for it privately."

THE SOLUTION IS SIMPLE.

Many New Zealand NET patients are doing very well on octreotide and this important and effective treatment should continue to be funded.

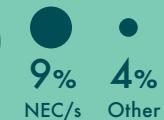
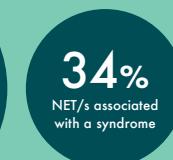
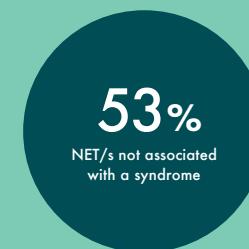
However, Unicorn Foundation NZ is calling for both octreotide and lanreotide to be fully funded by Pharmac. Australian data shows these treatments have approximate equal market share, which indicates that there is a need for both treatments.

Fully funding both treatments in New Zealand will be:

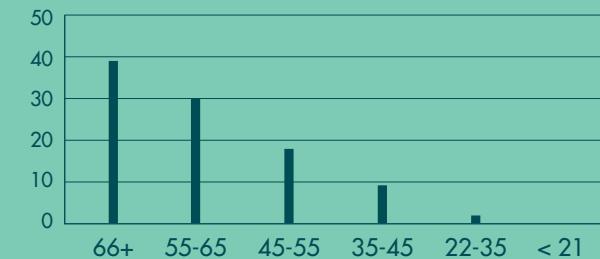
Cost neutral to Pharmac,
better for patients,
cheaper for primary care,
and equally effective with a similar safety profile

ABOUT OUR PATIENTS.

Over half our respondents have NET/s not associated with a syndrome, and a further one-third have NET/s that is associated with a syndrome.



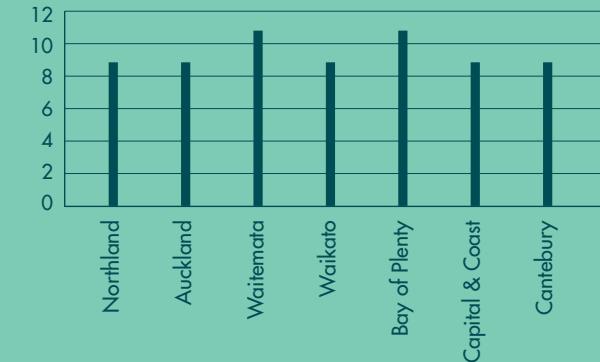
Across a broad range of ages.



An even split of male and female respondents.



And a broad range of DHBs.



Get in touch

Unicorn Foundation New Zealand

Michelle Sullivan, Chief Executive

michelle@unicornfoundation.org.nz

027 434 0926

unicornfoundation.org.nz



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