

August 15, 2007

Hon. George Smitherman
Ministry of Health and Long-Term Care
Suite M1-57, Macdonald Block
900 Bay Street
Toronto, ON
M7A 1R3

**Sent via email to:
CCU@moh.gov.on.ca
Original mailed**

Dear Minister Smitherman:

In an effort to work collaboratively with government, Arthritis Consumer Experts and the Canadian Arthritis Patient Alliance are writing to bring your attention to the June 27, 2007 Common Drug Review's **Canadian Expert Drug Advisory Committee (CEDAC) recommendation that abatacept (Orencia®), in combination with a disease modifying anti-rheumatic drug (DMARD), be added to provincial drug benefit plans for people with severely active rheumatoid arthritis who have failed on an anti-tumour necrosis factor ("anti-TNF") therapy. (See attached CEDAC recommendation.)**

As noted in our letter of December 18, 2007, abatacept's mechanism of action is entirely new in comparison to other biologic response modifiers currently listed on the province's drug benefit plan. This new medication works by interfering with T-cells that promote inflammation, making them inactive and unable to cause the hallmark outcomes of rheumatoid arthritis – joint destruction and long term disability. This new medication is an important one to include on the drug benefit plan as the research is conclusive that numerous different molecules – like in HIV/AIDS and cancer – cause and promote the disease. And just like in HIV/AIDS, it is a cocktail of medication treatments that help as much as possible to restore the normal immune function of the person living with rheumatoid arthritis. No two people living with rheumatoid arthritis respond to the same cocktail of medications.

For the above reasons, and in light of the CEDAC recommendation and your support for the Common Drug Review process, we urge you, as Minister of Health, **to take the immediate necessary steps to list abatacept on the provincial drug benefit plan.** We remind you that this therapy is intended to treat Ontarians with moderate to severe rheumatoid arthritis who did not respond to an anti-TNF therapy. At present, no effective treatment options are available for these individuals. Providing a timely reimbursement listing for this medication will ensure that people in Ontario living with rheumatoid arthritis will have critical treatment options that will reduce the pain, deformity and work disability associated with delayed treatment.

We thank you in advance for considering our request, and await word from you on the Ontario Drug Benefit listing decision for abatacept.

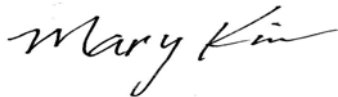
Sincerely,



On file

Cheryl Koehn
President
Person with rheumatoid arthritis

Laurie Proulx
ON Steering Committee Representative
Canadian Arthritis Patient Alliance
Person with rheumatoid arthritis



Mary Kim
ON Steering Committee Representative
Canadian Arthritis Patient Alliance
Person with rheumatoid arthritis

Encl.

C.c. Susan Paetkau, Director, Drug Programs Branch
Helen Stevenson, Executive Officer, Ontario Public Drug Programs

Note: Please address reply correspondence to Ms. Cheryl Koehn, Arthritis Consumer Experts, 910 B Richards Street, Vancouver, BC V6B 3C1