Allergy & Anaphylaxis Australia

PBAC Secretariat - MDP 952
Department of Health and Ageing
GPO Box 9848
Canberra ACT 2601

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To whom it may concern:

Please find the submission of Allergy & Anaphylaxis Australia to Pharmaceutical Benefits Advisory Committee (PBAC) on Pharmaceutical Benefits Scheme listing of **Baricitinib (Olumiant®)** for the treatment of chronic severe atopic dermatitis (AD).

Background

Allergy & Anaphylaxis Australia (A&AA) is a charitable, non-profit organisation established in 1993 to support and assist those affected by allergic disease including atopic dermatitis - AD (also known as atopic eczema). A&AA is dedicated to assisting individuals, their caregivers and all in the community in the management of allergic conditions. A&AA's aim is to enable individuals and their families to enjoy an optimal quality of life whilst minimising risk to their health and wellbeing.

A&AA strives to raise awareness of allergic disease in the community and provides evidence-based information, resources and services to support children and adults living with allergic disease and those that care for them. A&AA has members across all states and territories of Australia. We have a Medical Advisory Board that consists of several allergy specialists who are also members of Australia's peak medical body, ASCIA (the Australasian Society of Clinical Immunology and Allergy). A&AA and ASCIA have partnered to progress the National Allergy Strategy – www.nationalallergystrategy.org.au

Submission

Firstly, and importantly, A&AA implores the PBAC to consider Australians living with moderate AD as well as those with severe AD in registration and PBS listing of medications for the treatment of AD. Whilst we applaud the PBAC and sponsors of new medications for bringing a variety of medications for AD to the Australian market, we should not dismiss the needs of those for moderate AD. Why should someone with chronic moderate AD have to wait until they are in a debilitated, desperate state for a proven AD treatment to improve their QoL? Someone who is compliant with medical advice, who needs constant care and attention for chronic moderate AD should not have to wait until their AD is severe and out of control before they can access treatment. If severe AD can be prevented, people with moderate AD should

be able to access evidence based timely treatments to improve QoL. We ask that the PBAC give serious consideration to our request for treatments for moderate to severe AD which will help ease disease burden on individuals and the healthcare system including cost of PBS listed treatments such as topical steroids.

A&AA is grateful for the opportunity to forward a submission expressing the need for a range of new treatments for AD. There is an unmet need with many in the community with severe AD only recently having access to a single new treatment option, Dupilumab. This drug was recently made available on the PBS, and this has been life changing for many people living with severe AD who have met the criteria and qualified for access. Without these newer treatments, the main treatment options available are topical moisturisers and creams and medications such as immunosuppressants' with undesirable side effects that require ongoing monitoring. These medications are costly for both individuals and the government while not being particularly effective for some.

It is critical that people with severe, and chronic moderate AD, and their treating specialists have access to a range of treatments proven to be effective to improve the health and wellbeing. This is why A&AA asks the PBAC to also list Baricitinib which is a new drug for the treatment of severe AD. Unlike Dupilumab, which is injected, Baricitinib comes in tablet form and is taken orally. Baricitinib also has a different mode of action to Dupilumab.

There are some with AD for whom Dupilumab may not be suitable such as those with pre-existing allergic conjunctivitis, some who may develop side effects or others for whom the drug may be contraindicated. It is important that these people still have a choice of new treatments for AD.

Mr Trent Zimmerman MP and Minister for Health, the Hon Greg Hunt MP announced a Parliamentary Inquiry into Allergies and Anaphylaxis in September 2019. Two hundred and fifty-two submissions were made to the Inquiry and many spoke of life with multiple allergic disease states including AD. Australians spoke of the impact of allergic disease on QoL with many referring specifically to AD.

A&AA was not surprised to see submissions speaking to several allergic disease states in the one individual as well as several individuals with allergic disease within each family unit. The financial burden of life with allergic disease was a common thread. PBS listing of a medication for even one of their severe disease states (i.e. AD), would help alleviate some of the financial burden and give people with severe AD some reprieve from their pain and suffering while they continue life with allergic disease which, for the most part, is not curable. We await the Hon Minister Hunt's MP response to the standing committee report *Walking the allergy tightrope* which includes twenty-four recommendations.

The PBS listing of Baricitinib will mean that consumers and their prescribing doctor will have options to access and prescribe the treatment which is most appropriate for them.

It is our understanding that Baricitinib is already PBS listed in Australia for rheumatoid arthritis. We implore PBAC to list it for severe AD and possibly moderate AD as well if scientific evidence has proven that the medication can improve the QoL of those with both moderate and severe eczema. Life changing treatment for those with allergic disease such as Baricitinib for AD where choices are very limited, needs to be given urgent and serious consideration.

Those with AD that is moderate or severe despite optimal current treatment options will still have to do what they can to care for themselves and their allergic conditions. We are not requesting PBS listing of Baricitinib as an option to make life or management less onerous/easier for those who are not compliant, we are asking for this medication to give them a quality of life that is on par with that of those with a manageable allergic disease that does not rob them of a life as the majority of Australians know it.

We acknowledge the challenges of the Australian government and the many health conditions needing urgent attention and funding, however we cannot ignore the severe impact of debilitating AD in Australians with allergic disease.

Yours faithfully,

Maria Said
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Allergy & Anaphylaxis Australia