bcac breast cancer aotearoa coalition

Together we're stronger
Tangata tū pakari tonu

BCAC response to Pharmac proposal to tender for fulvestrant

15th June 2025

Kia ora Pharmac Tender Team

We understand that Pharmac has a severely limited budget for pharmaceuticals and that brand switches to cheaper generics can free up funding that may be used to secure new medicines. However, we see some issues with a fulvestrant brand switch that could generate significant stress and harm in the affected patient population.

Fulvestrant (Faslodex®) is a mainstay of anti-oestrogen therapy in hormone receptor positive breast cancer. It is used both as a monotherapy and in combination with other treatments such as CDK4/6 inhibitors. Hormonal treatments are known to cause significant side-effects in patient populations, but according to many patients, Faslodex is well tolerated. BCAC is concerned that if there is a brand switch to a generic patients may suffer worse or intolerable side effects.

New Zealand patients with breast cancer have low trust in brand switches of hormonal therapies given their recent experience with the switch of Zoladex® to Goserelin Teva®. The new goserelin had an applicator that caused bleeding, bruising, pain and discomfort to the extent that some patients ceased their treatment. Nurses and oncologists complained that the capsule often dropped onto the bed instead of being inserted into the patient. It took around two years of complaints from patients and their representatives, oncologists and nurses before this was replaced by the original product. Patients were angry and oncologists told us they had stopped submitting complaints "because they all disappeared into a black hole". Pharmac may have delayed switching back to the better product until the Teva contract ran its course. More recently, the brand switch of oestradiol transdermal patches gained much media attention as the new patches caused unacceptable side effects in some women, again leading to stress and anger in a patient population.

The reaction to the recent proposal to switch Ibrance® to Palbociclib Pfizer® illustrated the stress and fear felt by those with advanced breast cancer when a brand switch is

PO Box 90224, Auckland Mail Centre
Auckland,1142, New Zealand
E bcac@breastcancer.org.nz
www.breastcancer.org.nz

proposed. BCAC had no notice of the change from Pfizer and only two days' notice from Pharmac before the consultation on this brand switch was announced. We urgently sought detailed information on this switch from Pfizer and discovered that the medicine would be identical, produced from exactly the same ingredients, using the same manufacturing process in the same plant. The only changes would be in the name and the box. We did our best to convey to patients that the switch would have no impact whatsoever as the medicine would remain unchanged. However, the low trust in Pharmac brand switching meant that many remained afraid the medicine would be inferior – less effective and with worse side effects. In fact, we're continuing to hear from patients treated with palbociclib who need reassurance that there will be no change to their medicine.

It is understandable that patients whose advanced breast cancer is stable and well-managed on medicines with tolerable side effects will fear any change to their medicine.

We hope Pharmac decides there is more to lose than gain from a fulvestrant tender and brand switch. However, as we noted in a recent communication to Oncology TGM Priyanka Patel and in discussion with Director, Pharmaceuticals Geraldine MacGibbon, if there is to be a change any cheaper generic that the Pharmac Tender Team chooses should be one that is widely used and well tolerated in another market. We would hope that Pharmac would reach out to breast cancer patient groups in the countries where the generic is used to discover whether any differences are experienced from the original Faslodex®. We would also welcome the opportunity to contact such patient groups ourselves to directly receive information on a potential replacement before any decision is made. When Pharmac proposed to provide a biosimilar form of trastuzumab, we were able to contact Breast Cancer Network Australia and Australian oncologists who reassured us that the five trastuzumab brands used in Australia were all effective and had no side effects beyond those of Herceptin®. A similar process for fulvestrant would enable us to have the information needed for us to be able to reassure patients that a replacement would be safe and tolerable.

Ngā mihi,

Libby Burgess MNZM

Chair

Breast Cancer Aotearoa Coalition