

Patient Access to Innovative Drugs in Oncology – Bulgarian Perspective

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The number of treated cancer patients globally grew at an average of **5% over the past five years** and is expected to accelerate in the next five years as access to novel medicines further expands.

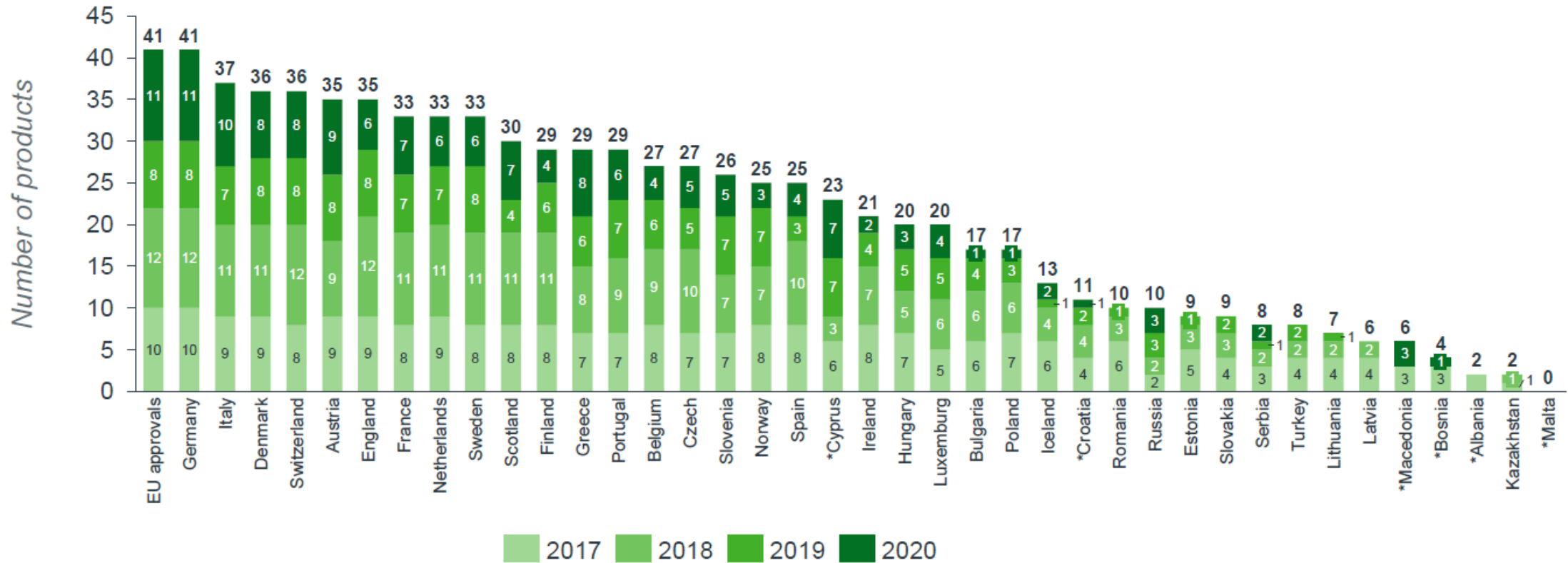
BUT

the **pace of bringing novel cancer therapies to patients** remains **uneven across countries**, with differences in:

- ✓ biomarker testing rates,
- ✓ adoption of novel therapies
- ✓ infrastructure capacity to deliver some of the most advanced therapies.

Oncology availability by approval year (2017-2020)

The **total availability by approval year** is the number of medicines available to patients in European countries as of 1st January 2022 (for most countries this is the point at which the product gains access to the reimbursement list[†]), split by the year the product received marketing authorisation in Europe.



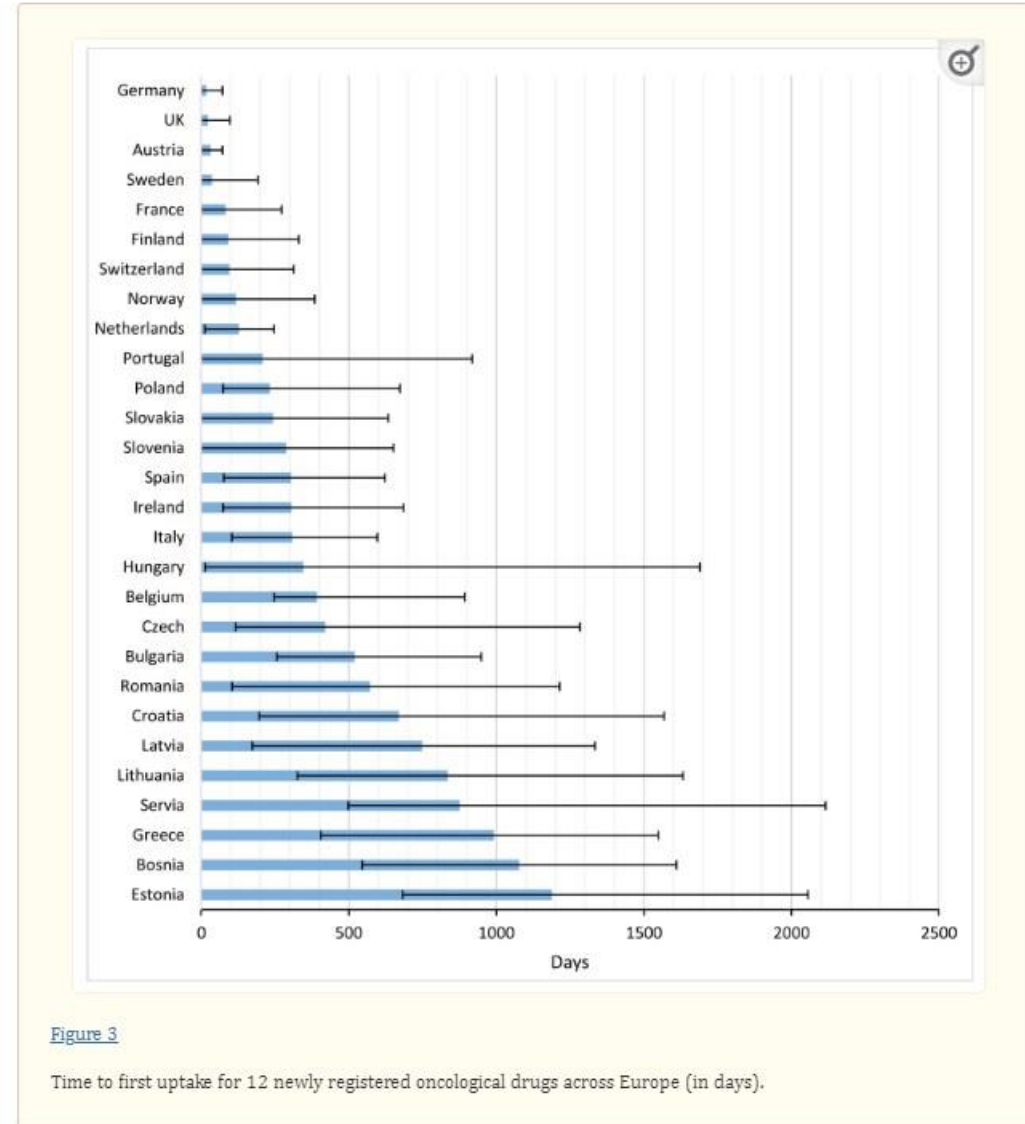
European Union average: 23 products available (55%) [†]In most countries availability equates to granting of access to the reimbursement list, except in DK, FI, NO, SE some hospital products are not covered by the general reimbursement scheme. *Countries with asterisks did not complete a full dataset and therefore availability may be unrepresentative.

Time to Market

Time to market – calculated from the date of EMA registration of the drug to the dates of first sales in each country

The average TTM in Europe amounted to 398 days (range 17–1187 days).

Bulgaria and many Eastern European countries were below the European average.



[Figure 3](#)

Time to first uptake for 12 newly registered oncological drugs across Europe (in days).

Speed of Drug Uptake

Re: the time to first uptake in Eastern EC, Poland – fastest, followed by Slovakia and Slovenia.

Bulgaria, Romania, Croatia, and Latvia ranked low in time to first access, but both Bulgaria and Czech Republic thereafter had a rapid uptake.

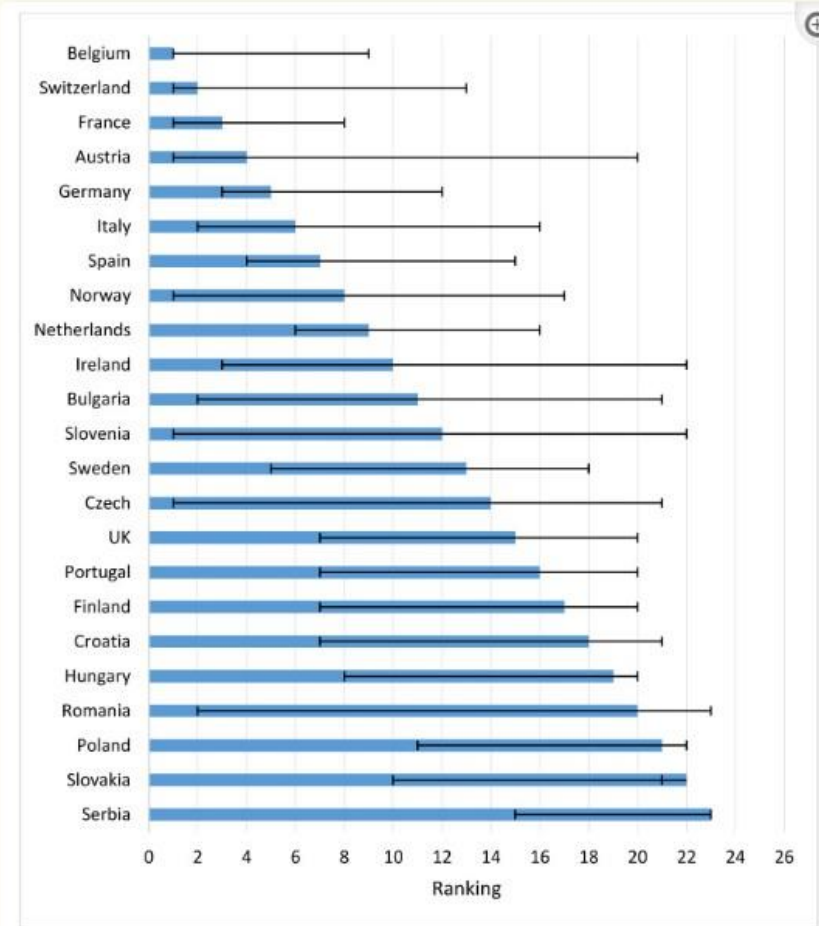


Figure 4

Speed of drug uptake for 12 newly registered oncological drugs in first two years across Europe (average rank, range) (Note: Too little access data for ranking: Lithuania, Greece, Bosnia, Estonia).

Despite the **early access** procedures for marketing authorization (MA) valid throughout the European Union, in most Member States patient access to innovative medicines depends on **cost-effectiveness**, **budget impact assessment** and negotiations for **price discount** with the public payers.

The time to market access for **most medicines still exceeds 365 days**, although it has been significantly shortened after 2013.

- ✓ Requirements for pricing and reimbursement across EU – fixed to some degree
- ✓ Medicines with MA for early access – subject to the same legal requirements as the medicines with standard centralized marketing authorization

Some **specific national legal requirements** for pricing and reimbursement decisions, **population of interest** and **manufactures intentions** to enter certain markets should also be considered.

- ✓ The analysis of the financial mechanisms for market access in Bulgaria shows that regulatory requirements for pricing and reimbursement are **harmonized across therapeutic groups** and there are **no specific criteria for individual oncology medicines**
- ✓ The **cost of the medicinal product is the same for all its indications**—there are no differentiated pricing levels depending on the therapeutic indication or the number of patients to be treated.
- ✓ A serious barrier to market access in breast cancer is also **the negotiation of rebates with the Fund** — the lack of flexibility and variety in the type of agreement indicates that only the **financial aspect of treatment** is considered when signing them but **not the outcomes for each individual patient**.
- ✓ There is a program for **compassionate use** in place regulated by the drug law but it is considered only for medicines which are in the process of obtaining a marketing authorization and there are **no other available alternatives** for patients with cancer.

11. Uyl-de Groot CA, Heine R, Krol M, Verweij J. Unequal access to newly registered cancer drugs leads to potential loss of life-years in Europe. *Cancers*. (2020) 12:2313. 10.3390/cancers12082313 [[PMC free article](#)] [[PubMed](#)] [[CrossRef](#)] [[Google Scholar](#)]

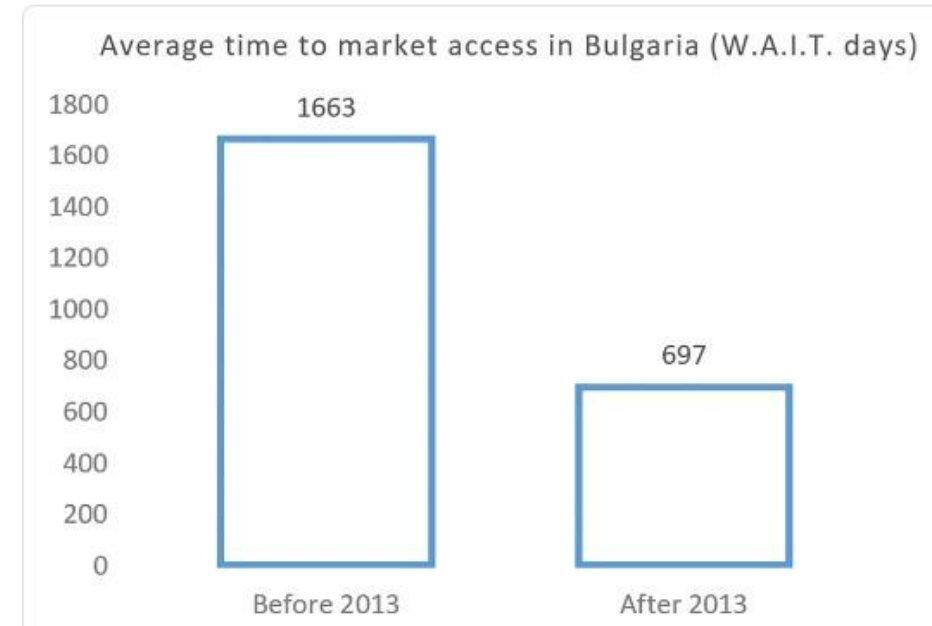
12. Ferrario A. Time to entry for new cancer medicines: From European Union–Wide Marketing authorization to patient access in Belgium, Estonia, Scotland, and Sweden. *Value Health*. (2018) 21:809–21. 10.1016/j.jval.2018.01.003 [[PubMed](#)] [[CrossRef](#)] [[Google Scholar](#)]

Access Landscape

The W.A.I.T. indicator varies from **69 days to 1,381 days**. Earlier access is more prominent for biosimilar medicines that entered the Bulgarian pharmaceutical market through the reimbursement system for < 100 days after marketing authorization.

Time to market and patient access to **advanced breast cancer** therapy in Bulgaria are provided within **1–2 years – 564 days**, on average, varying from 69 days to 1,381 days (above average for Europe).

European Federation of Pharmaceutical Industries and Associations (EFPIA) ranks Bulgaria **26th** out of a total of **34 European countries**, with an average of **611 days** to gain access to patients to **oncology medicines**.



Local special circumstances:

- ✓ Bulgaria has a relatively small market for oncology drugs (Challenge for niche oncology products)
- ✓ The Bulgarian government has implemented strict price controls on pharmaceuticals, which has limited the profitability of the market

Underlying macroeconomic factors:

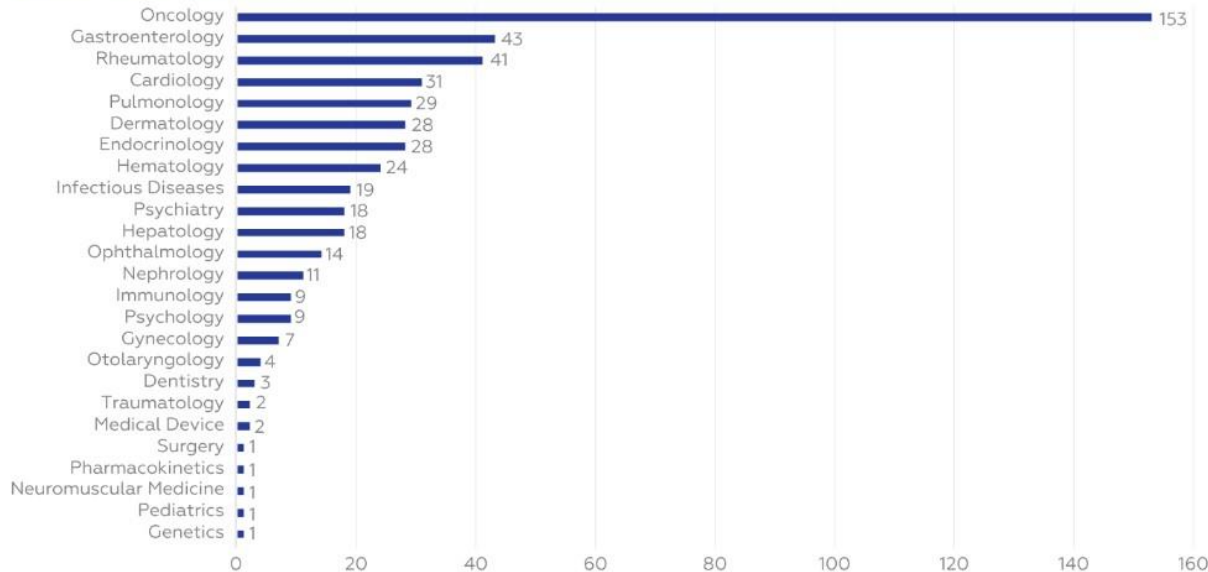
- ✓ The Bulgarian economy has been growing steadily in recent years, which has led to an increase in healthcare spending.
- ✓ The aging population in Bulgaria has led to an increase in the incidence of cancer, which has driven demand for oncology drugs.
- ✓ However, the Bulgarian healthcare system is still underfunded, which has limited the growth of the market.

1 billion BGN spent on oncology drugs in 2023

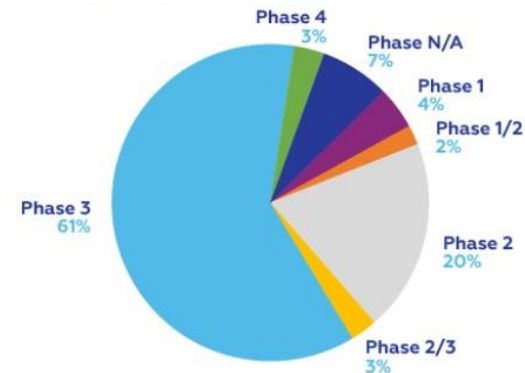
Bulgaria – one of Europe’s attractive clinical research hubs

- ✓ significant number of clinical trials conducted per capita
- ✓ around 12,000 patients enrolled annually
- ✓ 550 clinical trials being conducted in the country currently
- ✓ Bulgarian Association of Clinical Research (BACR) advocates for high standards in meeting all international requirements.

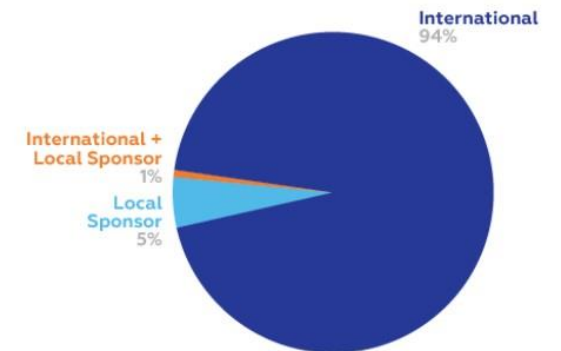
Clinical Trials by Therapeutic Area



Clinical Trials by Phase



Clinical Trials by Type



The country has a well-established healthcare system, a sizeable patient population, and a cost-effective environment in which to conduct clinical research.

- ✓ Centralized healthcare system and large specialized medical centers
- ✓ Efficient process of patient recruitment
- ✓ Competent medical staff
- ✓ High quality of collected data
- ✓ Well-equipped investigational sites
- ✓ 5 medical schools and 15 university clinics with top-quality clinical and research facilities and diagnostic capabilities
- ✓ GCP guidelines are implemented, and all investigators are trained in GCP

Regulatory approval process

Bulgaria recently implemented the centralized EMA's Clinical Trials Information System (CTIS), which reduces the review time to 60 days.

- ✓ The coming decade, the number of patients with cancer is estimated to **increase by 68%**. This makes it a legal obligation of countries to ensure timely access to acceptable and affordable healthcare of appropriate quality
- ✓ As many novel cancer drugs have entered the market and many others are upcoming, it is of utmost importance that **all patients in need get access** to the drugs with **high clinical value** as soon as possible.
- ✓ Further efforts should be placed to explore the potential role of **adaptive pathways** and joint **HTA–EMA procedures** in assuring **timely and equal patient access** to oncology medicines in the European Union.
- ✓ Further studies should be conducted to evaluate and propose possible mechanisms to bridge the gap between **marketing authorization** and **market access**, especially for medicines authorized under the procedures for early access.