

3 East Camps Bay
Downderry
Torpoint
Cornwall
PL11 3LQ
Tele: 01503 250340
E-mail:
dougray1@btinternet.com

Department of Health
79 Whitehall
London
SW1A 2NS

21st September 2010

For the attention of the Rt Hon Andrew Lansley CBE MP, Secretary of State for Health

Re: Doctor/Patient Relationship use of the unlicensed drug Abiraterone

Dear Mr Lansley,

First, thank you for the encouraging information provided in your letter dated 11th May 2010 in response to my 12th March 2010 letter, which referred to using of the Doctor/Patient relationship to obtain the unlicensed drug Abiraterone.

Optimistic about my future treatment options I gave a copy of this information to my Oncologist and asked him if he would request Abiraterone from the manufacturer, Cougar, to treat my advanced prostate cancer when the appropriate time came.

Unfortunately, this request did not occur and eventually my Oncologist got "off the fence" and said he would not request the drug because he would be held solely responsible if something went wrong.

For other reasons, my care was transferred to another Oncologist at a different NHS Trust. My new Oncologist said that although he would not expect any serious side effects from Abiraterone, he suspected that his NHS Trust may not be happy with him requesting the drug.

From these two experiences, it seems that the Doctor/Patient relationship used for obtaining unlicensed drugs on compassionate grounds does not work in practice.

Therefore, it would be appreciated if the Department of Health (DoH) could explain the process to be used to obtain an unlicensed drug. For example, in clear understandable steps (flow diagram) from:

- The patient asks his Doctor/Oncologist to request the unlicensed drug Abiraterone from Cougar, the manufacturer.
- The patient receives the first treatment of the drug Abiraterone.

From my limited experience, I would expect some consideration will need to be given to:

- a) Who pays for the Drug?
- b) Who underwrites the Doctor/Oncologist against litigation if the treatment drug causes complications?

c) Who decides what patients at a similar treatment stage who could benefit from the drug are given the opportunity to benefit from it?

With regard to my personal case I would be willing to pay (within reason) for the drug and also willing to draw up a contract stating that I or my dependents would not seek redress and/or compensation if treatment complications were to occur.

These two personal commitments/offers I suspect would satisfy the moral dilemmas as described in c) because there would be no cost or risk to the NHS Trust or Oncologist concerned.

As my treatment options are decreasing rapidly with my first Chemotherapy session booked for 30th September, a prompt response to the requested information would be greatly appreciated, especially as I suspect that there are many hurdles to be overcome before I actually obtain the drug.

Yours sincerely

Doug Gray (Mr)

Enc.

30th April Letter to Andrew Lansley CBE MP from MHRA

11th May Letter to Mr Doug Gray from the Secretary of State for Health, Andrew Lansley CBE MP

Attachment to the 11th May Letter to Mr Doug Gray from the Secretary of State for Health, Andrew Lansley CBE MP