



National Comprehensive Cancer Network® (NCCN®) Statement on Mitigating the Impacts of Anti-cancer Drug Shortages

NCCN regularly tracks the recurrent drug shortages of multiple important anticancer agents, many of which provide significant palliation, prolongation of survival, or potentially curative therapy. Recently, there have been prolonged shortages specifically of carboplatin and cisplatin among multiple other, primarily generic, agents. Carboplatin and cisplatin are central to the optimal therapy of multiple cancers.

The NCCN Clinical Practice Guidelines in Oncology (NCCN Guidelines®) and NCCN Drugs & Biologics Compendium (NCCN Compendium®) are widely used by payers as a basis for making coverage determinations for systemic therapy in oncology management. During times of drug shortages, the NCCN and/or payer preferred agent may not be available. In these circumstances, it is important that appropriate alternative therapies be made efficiently available.

NCCN thus calls upon the Federal Government, pharmaceutical industry, providers, and payers to each do their part in preventing and mitigating the impacts of anti-cancer drug shortages.

- The Federal Government and its agencies must assure a regulatory environment that secures a steady supply of core anti-cancer drugs that are safe and effective.
- The pharmaceutical industry must accept and act upon the ethical and moral obligation to assure a steady supply of core anti-cancer drugs that are safe and effective.
- Providers must judiciously utilize available anti-cancer agents prioritized by efficacy, safety, and cost. In times of drug shortages providers must adopt strategies that intentionally prioritize the use of agents based upon pragmatic drug use and maximal societal impact.
- The payer community must put patients first and provide flexible and efficient systems of providing coverage for alternative therapies replacing anti-cancer drugs that are unavailable or in shortage. This should include the authorization of alternative therapies without burdensome prior authorization systems and the issuance of guidance clarifying the criteria for waiving authorization during the periods of drug shortages. The NCCN Guidelines® and NCCN Compendium® typically provide multiple systemic therapy options. In times of specific drug shortages, we call upon the payer community to authorize alternative therapies efficiently and quickly with NCCN Category 1, 2A, or 2B evidence and consensus recommendations in the specific patient and disease context.

The causes and solutions to the recurrent anti-cancer drug shortages that deprive oncology patients of optimal therapy are multiple and fixable.

Effective solutions require a whole of oncology effort if they are to be successful. NCCN therefore calls for expanding support from our fellow oncology community as needed to ensure quality, effective, equitable, and accessible cancer care.