February 3, 2017

Re: SB 32—Urging Support for the Measure: "An Act relating to biological products; relating to the practice of pharmacy; relating to the Board of Pharmacy; and providing for an effective date."

Senator Mia Costello
Chair, Senate Labor & Commerce Committee

Senator David Wilson
Chair, Senate Health & Social Services Committee

Dear Chair Costello and Chair Wilson,

All over the country, state legislatures are considering legislation, and many have already passed bills, to ensure that their residents have access to interchangeable biological products and biosimilars. We are at the beginning of a new age of biological therapies, and laws and regulations must reflect this new reality.

SB 32 is an excellent example of legislation that does just that.

ICAN, the International Cancer Advocacy Network, is in strong support of SB 32 because of its patient safety protections when dispensing biosimilars and interchangeable biological products. ICAN, a five-star rated 501(c)(3) charitable cancer patient advocacy organization, helps late-stage cancer patients in Alaska and throughout the country. We deal daily with biologic therapies for our U.S. patients, and for our patients in 54 countries. Biologic therapies, and thus interchangeable biological products, will become a growing area for metastatic cancer patients.

This is a particularly timely issue given the first approval of a biosimilar in the United States in 2015, and the expected approval of many more in the future. SB 32 ensures that when an FDA-approved, lower-cost, interchangeable biological product is substituted by a pharmacist for a brand-name biologic, records will be kept, and the pharmacist will communicate to the patient and prescribing physician the precise drug that was dispensed—thus ensuring patient safety.

Communication to the patient and physician is essential because, unlike generic drugs that are an exact copy, the interchangeable biological product can be slightly different due to manufacture, transportation, or handling. If a patient experiences any adverse reactions, a physician needs to know all possible causes, including and especially, that the patient received an interchangeable biological product. Failing to communicate to the patient and physician when a substitution is made is an unnecessary risk to patient safety.

While we acknowledge (and welcome) the economic impact on healthcare of interchangeable biological products, patient safety can easily be protected by requiring communication to the patient and physician. Because of their complexity, size, and sensitivity, all biologics—whether reference, biosimilar, or interchangeable biological products—have potential for unintended induction of potent, immunologic reactions. Each and every patient may respond differently to any biologic, depending on their individual genetics and immunologic status.

Your support for SB 32 throughout the legislative process is a powerful voice for the safety of ICAN's Alaska patients, and for all Alaska patients. It is also supporting well-crafted legislation that can serve as a model for other states.

We are honored that Susan Knight of Anchorage is joining this letter as a co-signee, on behalf of the Jim Fling Pancreatic Cancer Patient Advocacy Program at ICAN.

Please do not hesitate to contact me at marcia@askican.org, or at (602) 618-0183 if you need any additional information.

Thank you for your consideration, and for your support.

Respectfully submitted,

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Susan Knight

Susan Knight, on behalf of the
Jim Fling Pancreatic Cancer Patient Advocacy Program at ICAN.
Anchorage, Alaska

cc: Members, Senate Health & Social Services Committee