

Network of Rare Blood Disorder **NRBDO** Organizations **RAVTSR** Réseau des Associations Vouées aux Troubles Sanguins Rares

August 16, 2022

Minister Jean-Yves Duclos, Canada Minister Jason Copping, Alberta Minister Adrian Dix, British Columbia Minister Audrey Gordon, Manitoba Minister Bruce Fitch, New Brunswick Minister Tom Osborne, Newfoundland Minister Julie Green, Northwest Territories Minister Michelle Thompson, Nova Scotia Minister John Main, Nunavut Minister Sylvia Jones, Ontario Minister Ernie Hudson, Prince Edward Island Minister Paul Merriman, Saskatchewan Minister Tracy-Anne McPhee, Yukon

Honourable Ministers,

We are aware of the letter sent to you by Bloodwatch Executive Director Kat Lanteigne, as shared through the Bloodwatch Twitter account on August 12, 2022. We feel obliged to reaffirm our full support for CBS pursuing a public-private partnership to increase domestic collection of plasma to meet the needs of Canadian patients.

The NRBDO is Canada's unified patient voice on matters of blood supply and safety. We represent thousands of Canadians whose lives depend on blood and plasma-derived medicinal products. As such, we have had a vested interest in the safety and adequacy of Canada's blood and plasma product supply since forming in 2004.

The patient community has great respect for Justice Krever's recommendations; however, we also recognize that improved regulation and manufacturing advances since the mid-90s have led to a perfect safety record of plasma-derived medicinal products for the last 25 years. With safety concerns mitigated completely, our concern is now the security of the supply of plasma required for Canadian patients to have access to life-saving plasma-derived medicinal products when needed.

The NRBDO agrees that donation of fresh blood, collected by CBS and Héma-Québec (H-Q), must remain voluntary, non-compensated, and in the public domain. This is not up for debate, here or anywhere. To suggest otherwise is disingenuous.

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However, *plasma products*, as you know, are manufactured by for-profit multi-national corporations with plasma largely sourced from outside of Canada, and sold to the provinces and territories like any other drug. Though CBS and H-Q distribute them as part of their formularies, the manufacture and sale of plasma products is almost entirely a private, for-profit operation, with plasma being the key ingredient. Donation of that plasma is compensated.

The NRBDO has been encouraging the leadership of CBS to form public-private partnerships for the collection of plasma for several years. As noted in the Expert Panel on Immune Globulin (IG) Supply in Canada's Final Report: "The cost of collecting large volumes of source plasma utilizing volunteer donors is 2-4 times more expensive than the commercial plasma collection model and thus it remains more economical for jurisdictions to purchase IG and plasma-derived medicinal products from the commercial market, all of which are made from plasma from paid donors."

Over 85% of the plasma needed to manufacture IG for Canadian patients is collected by for-profit companies in the United States. It is hypocritical to suggest that partnering with a plasma company to collect plasma in Canada is harmful—particularly when global supply cannot keep up with increasing global demand.

Bloodwatch is attempting to frame the confidential negotiations between CBS and industry partners as secret, back-room deals done without consultation with stakeholders. In fact, Bloodwatch was given the same opportunities to participate in stakeholder consultation as patient groups. In those consultations, CBS leadership and representatives from several provincial governments heard our support for their increased non-compensated plasma collection efforts. They also heard our concern that these efforts will not be enough, and the clear, unanimous request from patient groups and physicians to explore other ways to scale up collection quickly to meet demand, including public-private partnerships for plasma collection. Unlike Ms. Lanteigne, we do not view this as a "shocking policy position reversal" but a thoughtful response to the consistent calls from patient groups and physicians to increase domestic supply of these life-saving plasma-based therapies and reduce the risk of an interruption in supply. We also heard from physicians who were understandably frustrated by Bloodwatch's unsubstantiated accusations that they are prescribing IG products improperly.

The NRBDO is committed to ensuring the patient voice is heard and working with governments, CBS, and H-Q to protect the safety and availability of blood and plasma products in Canada. We hope the provinces and territories will see the discussions that may be taking place to increase domestic plasma collection as the best way to safeguard supply for Canadian patients.

Sincerely,

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