

Tēnā koe Ministers Reti, Doocey, and Costello,

Congratulations on your appointments as Minister of Health, Minister of Pacific People and Associate Ministers of Health. We look forward to meeting you at your earliest convenience, and enjoying a positive working relationship with you and your colleagues.

Breast Cancer Foundation NZ (BCFNZ) is the largest breast cancer charity in New Zealand, with a vision of zero deaths from breast cancer.

It sounds bold, but it is possible through early detection, optimal treatment, and by harnessing innovation and clinical advancements. And doing so *is necessary* – breast cancer is the leading cause of death for women under 65 in New Zealand. Every year, we have 3,500 new diagnoses, 400 metastatic recurrences, 25,000 in treatment, countless former patients and 650 deaths. Māori have the highest incidence rates in the world. They, along with Pasifika and younger women in general, are experiencing later diagnoses and lower survival rates. Given our aging population, the number of women with breast cancer will just keep growing.

Breast cancer is a women's health and societal issue, and tackling it is a priority to avoid further deaths and future social, economic, cultural, and financial costs, let alone reducing the impact on an overburdened health system.

We need you to be solutions focused and drive change

As a whole, our public health system doesn't have a cultural of innovation and solution-seeking. There is a lack of innovation infrastructure and funds, often a 'this can't be done' mindset, silos across delivery, condition, solution or body part, duplication and reinvention of efforts, and too much focus on the ambulance at the bottom of the hill.

All of this is well documented in the health strategies. What is not clear, are the steps to change it. We ask you to please:

- Invest more in upfront solutions that can prevent issues, costs and pressures downstream this includes investing in health economics to help show the value in this approach.
- Establish the infrastructure, frameworks and budget for research, trials, and innovation, and embed these into health sector KPIs.
- Direct, fund and enable more problem-solving and solution-seeking activities, sharing and collaboration this includes across/within departments and externally.
- Leverage NGO-public-private-philanthropic partnerships for innovation, research, and pilots, and not just service delivery.

These will improve health outcomes and save lives, as well as ensure NZ keeps pace internationally the more NZ lags behind, the less chance we can retain our health workforce, attract much-needed additional workforce, or address the public vs private sector divide.

Specific Actions

<u>Action:</u> Create an integrated early detection strategy and roadmap covering both the symptomatic and screening pathways

Breast cancer is detected initially via a mammogram or by spotting a symptom, which are commonly referred to as the screening and symptomatic pathways. They are interrelated and overlap, and



there are issues and gaps in each and in how they work together. Later diagnoses require more expensive and resource-intensive treatments, and ultimately lead to unnecessary deaths.

To improve health outcomes, increase capacity, gain efficiencies, reduce burden downstream, enable timely diagnoses and address the current siloed and incomplete approach to early detection, BCFNZ strongly recommends **creating an integrated early detection strategy and roadmap that includes**:

- New approaches to early detection health literacy and practice, from nationwide campaigns, leveraging private and NGO actors, integration into primary care and targeted initiatives.
- **Establishing a public-NGO-private platform** to drive more sharing, collaboration, innovation and research. This can help reduce duplication and drive partnerships, scalability and more solutions.
- Screening:
 - Raise the screening age to 74 within first 100 days and begin progressively rolling it out
 - Develop a high-risk pathway, including risk factors and thresholds, and modalities to screen them efficiently – this will also address current variations and inequities in regional practices
 - Investigate public/private partnerships to screen high-risk women
 - Fast-track the creation of a NZ AI algorithm for radiologists to use in breast screening to help address critical workforce capacity, improve accuracy and meet growing screening demand
 - Fast-track the development and piloting of a mobile screening-to-diagnostic unit and one-stop-shop for rural areas (BCFNZ has concept plan) BSA's existing mobile units are for screening only and require multiple steps.
 - **Review BreastScreen Aotearoa's capacity and availability,** and explore new approaches.
- Symptomatic:
 - Develop a nationwide risk-based approach
 - Develop a high-risk expedited pathway to diagnosis
 - Adopt new triage technologies (e.g. PinPoint blood test) to improve referral efficiencies and access (including rurally), reduce pressure on referral pathways and free up diagnostic capacity, given that 90% of lumps referred with high suspicion of breast cancer turn out to be benign.

Action: Fast track, adopt and use targets to drive improvements

Te Aho o Te Kahu, in consultation with a National Breast Cancer Working Group which includes BCFNZ, is currently developing Breast Cancer Quality Performance Indicators (QPIs) to drive timely diagnosis and treatment. It is the role of the Government to establish targets and to use them to monitor what is happening, hold the public health system to account, and drive improvements. We are encouraged by National's commitment to using targets and recommend **fast-tracking the completion of the breast cancer QPIs and introduction of National's targets**.

Action: Fund breast cancer medicines and create a new approach to medicines

Kiwis' woeful access to medicines is well documented and BCFNZ urges the government to address this as a priority. This will save and extend lives.

Key actions:



- In line with National's pre-election promise to fund cancer medicines, direct and fund Te Aho o Te Kahu to provide updated advice on all cancer treatments independently ranked as being of high clinical benefit, including for breast cancer, and fund those treatments as a matter of priority. This will enable much needed access to 14 highlyeffective breast cancer treatment regimens.
- Develop a new strategy and approach to medicines and medical devices, from MedSafe to Pharmac, that includes new assessment methodologies, adopting overseas decisions, assessing societal impacts and rapid access. This will include opportunities to make decisions to benefit high-risk populations; for example, Pacific women have a much higher rate of aggressive HER2+ breast cancer than any other ethnicities, resulting in more late diagnoses despite high screening participation.
- Create a NGO-public-private-philanthropic working group, shareable platform and fund that invests in strategies, interventions, research and pilots to tackle treatment refusal, stigma and adherence. There needs to be a consolidated and comprehensive approach to this.

Action: Enable and invest in genomics

Genomics is critical to tackling cancer, including breast. It enables precision in profiling risk, early detection and treatment, as well as improving our understanding of cancer to advance more solutions. NZ is not set up to harness this technology like other countries, which ultimately means how we approach cancer will not keep pace with our peers or medical advancements, resulting in needless deaths, interventions and costs.

Key actions:

- Develop and implement a genomics medicine strategy and roadmap for cancer
- Invest in proven genomic assays to identify those who will benefit from treatment, to improve survival, reduce unnecessary morbidity and reduce wasted spend. These are currently only accessed privately, so Kiwis that can't afford them miss out.
- Invest in a long-term genomic infrastructure for research and uptake of new and emerging biomarkers for predictive and prognostic testing and targeted treatment, outlined in the above

While genomics can help understand cancer in different demographics, BCFNZ does not believe there is any need to adapt overseas genomic methodologies before using them in NZ, particularly for Māori and Pacific Islanders. This does not align to, for example, how we approach medicines in NZ.

These are evidence-driven, critical priorities. Where there is an opportunity, we relish the opportunity to work with you and the health system on solutions.

Ngā mihi nui,

Justine Smyth CNZM Chair

Shun Ryner

Ahleen Rayner Chief Executive