

The risk of not taking risks

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Patients are the REAL risk takers

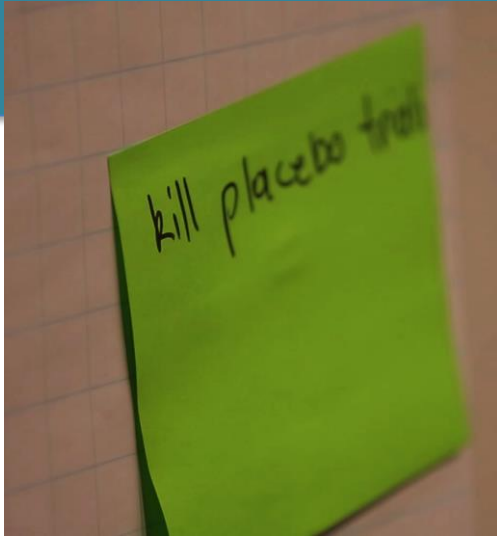
- risking their lives in clinical trials
- trial strategies inappropriate for disease- e.g. too lengthy for median survival

‘our patients die- but at least safely so’*

- prices of end result too high, preventing access

* please compare the minimal increment in knowledge between Ph II/ IIIs in Melanoma

Why should society care?



1. Helsinki

Art. 8 *'While the primary purpose of medical research is to generate new knowledge, this goal can*

never take precedence over the rights and interests of individual research subjects. *'* <http://www.wma.net/en/30publications/10policies/b3/>

2. We are not only failing the current but also future patient generations.

What we need-

A drug development concept

centered on the needs and risk profile of a specific disease

combining early access to innovative therapies with

fast and cost-effective development

and a systematic gathering of evidence.

“Would you jump out of a plane if you knew that there was a 1 in 10 chance that your parachute would not open and you would die?”

“Well, if that plane was heading towards a cliff, then yes I would”.

quote from a patient workshop, kindly provided by M. Longley, WIHSC

Thank you



Patient quote-

' this is the 21st centuries equivalent of medieval torture'

Lori M.,
Stage IV Melanoma patient, after being
randomized to the control arm with a drug
known to be inefficient in Melanoma

<http://youtu.be/wilTXvFN2NU>

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