



## MYTOMORROWS GOES USA

Online marketplace for 'not-yet-approved pharmaceuticals' aims to expand its business to America

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Only one year after the website was launched in April 2013, myTomorrows intends to broaden its horizon to the US. The company, established in 2012 by Dutch founders, is an Internet platform where patients with incurable diseases can be helped to obtain access to promising, but not yet marketed and approved, medicine. The Dutch market seems relatively small and progress somewhat slow. Will expanding the company's activities to the US accelerate business?

### FILM

Sjaak Vink, director and co-founder, explains: "It was our intention from the very start to expand our activities to the US. But we have now unexpectedly gained popularity in America. This was partly thanks to a film that generated renewed awareness of the issues surrounding access to investigational drugs." That film, *The Dallas Buyers Club*, a 2013 biographical drama about an AIDS patient who uses unapproved drugs and distributes them to fellow AIDS patients, was a box office success.

Ambitious Americans recently succeeded in their battle against the strict rules governing medicines. This resulted in 'Right To Try' laws in some American states. These laws allow people to use an experimental drug when the company agrees to give it, without federal approval. "The Abigail Alliance for Better Access to Developmental Drugs has

become a strong organisation since 2001 and the people behind it are strongly encouraging us to expand to America. Recently, I spoke to a staff executive of the American Society of Clinical Oncology and he is very positive about our work, too", Vink says.

Despite the enthusiasm of US organisations there is still some hesitance in the Netherlands. Pauline Evers, policy officer of the patient movement Levenmetkanker, explains why Levenmetkanker does not actively support myTomorrows. "First, we do not completely disapprove of the initia-



**Americans are dissatisfied about strict rules**

tive. myTomorrows does raise awareness for the existing problem of the very long development time required for medicines. We should indeed discuss whether all these tests are really necessary, especially in life-threatening circumstances. On the other hand, we need a minimum of data on effects and safety of drugs and we feel that myTomorrows is offering certain treatments at a too early stage."

Another issue according to Evers is pay-

ment. "Currently patients have to pay for the treatment offered by myTomorrows which results in unequal access." Vink agrees to the latter: "In the Netherlands the financial aspect is a major problem and has led to a reserved attitude towards myTomorrows. Although early access programmes are allowed, the aspect of payment is a matter that should be solved by the government. The financial burden for the patient also makes it difficult for doctors to give advice about experimental drugs." American rules and customs, in terms of health care costs, are different.

### PROSPECTS

"On the other hand", says Vink, "not all experimental drugs are extremely expensive. For example, at the moment a promising therapy for people with major depression is available which costs only a few hundred euros. Effects, or the lack of, become apparent within a few months." In the Netherlands this drug is already authorised for Parkinson's disease, but not for depression. How it is administered, however, differs.

On the contrary, Evers explains that in the Netherlands no physician had yet come across a candidate he could subscribe, even if he wanted to. Experimental cancer drugs currently don't exist according to the Dutch oncologists Evers had spoken to. According to Vink, however, myTomorrows is gradually gaining acceptance in the Netherlands, and due to the new 'Right To Try' laws, Vink is convinced that the prospects for America are good.