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June 24, 2008

Hon Li Kwok-ying, MH, JP
Chairman, Health Services Panel
Legislative Council
Legislative Council Building
8 Jackson Road
Central, Hong Kong

About LC Paper No: CB (2) 1967/07-08 (01)

Dear Mr. Li,

We just learned about the letter from Thalassemia Association of Hong Kong on “requesting for better iron removal therapy from Hospital Authority.” It is exciting for us to know that local patients are enthusiastic to fight for better healthcare treatment. However, we think there are few points in the letter which might have distorted the picture of Thalassemia care in Hong Kong by ignoring some important clinical benefits of Deferiprone (L1) as a valuable oral treatment option.

The following are some of the **distorted** facts regarding Deferiprone (L1) from the letter:

- 1) The wording of “a plethora of side effects” in describing Deferiprone is totally unjustified and unfair. The argument is biased, and not based on clinical evidences.
- 2) In the Chinese text, the letter states “Deferiprone (L1) is only approved for patients over 10 years old.” This is clearly wrong, neglecting all the clinical evidences (Please refer to the approved Packaging Insert of Deferiprone from Apopharma).
- 3) I think the letter has clearly exaggerated the side effect and impact of deferiprone on agranulocytosis while playing low-key and ignoring some serious side effects of Exjade. In fact, in May 2007 US Food and Drug Administration (FDA) has requested Novartis to inform physicians about incidences of agranulocytosis and renal failure related to use of Exjade (MedWatch 2007).

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Apart from distortion, the following clinical facts are clearly **missing** from the letter:

- 1) It is quite clear that Exjade is not free of toxicity. In fact, Exjade's toxicities include renal failure, liver toxicity and deaths, which is clearly stated in FDA MedWatch 2007. Monthly blood test for renal function of Exjade is clearly more troublesome than what both clinicians and patients expected.
- 2) Exjade lacks data on survival, which is important for patients. Comparatively speaking, Deferiprone has much longer clinical experience, published data on survival benefits (Borgna-Pignatti ET AL 2006, Telfer 2006). Exjade clearly has no such survival benefits proven so far.
- 3) No published studies showing Exjade is as efficacious as Deferiprone or DFO in reducing heart iron and improving cardiac function. In fact, several papers (Maggio 2003, Anderson 2002, Pennell 2006, Pignatti et al 2006) have clearly shown that Deferiprone is the best molecule among the three chelators mentioned in the letter.
- 4) Deferiprone has a new liquid formulation which clinically shown to have better tolerance & easy administration for young child. (El-Alfy, 2008).
- 5) Combination of DFO and Deferiprone has been shown to improve both liver iron deposition and glucose intolerance (Kalistheni, 2006).

We are not trying to stop patients obtaining better healthcare, but we think it is absolutely necessary to provide a balanced view regarding choice of oral chelators on treating Thalassemia and other iron overload diseases. We think the letter addressed to you on May 14 has misrepresented some important facts and neglected some advantages for Deferiprone, which has created an unfair situation for assessing different chelators.

The treatment cost of Deferiprone on average is only about \$3,000 per month, comparing to \$20,000 per month for Exjade. We are not denying the significance of agranulocytosis. We just want the panel to consider that physicians in Hong Kong are already familiar with the side effects of Deferiprone, while the long-term side effects of Exjade are still unknown.

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We clearly think the comments on Deferiprone is misrepresented and biased, arbitrarily distorted the clinical value of Deferiprone. We sincerely hope the panel will consider all the clinical evidences relating to the issue.

Thank you very much for your time and attention.

Sincerely,

HIND WING CO LTD



Dennis Tam Yeuk Sze

Manager, Hospital Products Division

P.S. Hind Wing Co. Ltd., is the sole distributor of Apopharma in Hong Kong. Apopharma, Canada is the manufacturer of Ferriprox Tablet and Oral Solution.

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Reference:

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