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21 April 2011

Ms Elyssa Wong Clerk to Panel Panel on Health Services Legislative Council 8 Jackson Road Central

Dear Ms Wong,

Update on the Drug Formulary of the Hospital Authority

At the meeting of the Panel on Health Services held on 14 February 2011, Members remarked on the Drug Formulary (the Formulary) of the Hospital Authority (HA) and requested HA to enhance the transparency of the Formulary. The Administration's response set out below has taken into account HA's views and operational considerations.

HA has put in place an established mechanism for the review of the Formulary on a regular basis. From time to time, new drugs are brought into the pharmaceutical market. The HA Drug Advisory Committee (DAC) systematically appraises new drugs every three months for inclusion into the scope of the Formulary. DAC is supported by expert panels which provide professional advice on the selection of drugs for individual specialties. At the cluster/hospital level, the Formulary is overseen and managed by the Drug and Therapeutics Committees (DTC) of individual clusters/hospitals. Under the prevailing mechanism, DTCs may submit applications to DAC for evaluation of new drugs for incorporation into the Formulary.

Having taken into consideration the comments and views of Members, HA proposes to introduce the following measures to enhance the transparency of the Formulary and to improve the accessibility of information and communications with relevant stakeholders on the Formulary, particularly in relation to the introduction of new drugs.

Composition of drug committees

At present, DAC comprises doctors, clinical pharmacologists and pharmacists, and has external members from the two local universities. It makes decisions according to both professional views and objective scientific data. Members also declare their conflict of interests, if any, before the meeting.

To enhance communication with stakeholders, HA proposes to upload to its internet website the professional composition of DAC and the various expert panels for individual specialties website for public information. However, to minimize unwarranted pressure on committee members and to ensure the impartiality of expert opinions in the discussion process, HA will not disclose the names of individual members serving on DAC and the relevant expert panels.

Applications for new drug evaluation

As mentioned above, DTCs of clusters or hospitals may regularly submit to DAC applications for evaluation of new drugs for inclusion into the Formulary. Under the prevailing arrangements, the full drug list for review and applications on individual drugs will be made available to members of DAC. The concerned drug companies will also be informed about the applications and their submitted information about the drugs will be considered by the committee. To enhance transparency and access of information by the public, HA proposes to upload regularly to its internet website the list of new drugs to be reviewed by DAC. As part of the efforts to strengthen internal communication, HA will also upload the drug list to its intranet website for staff's information.

Communications of decisions and reviewed information

At present, after an application for new drug evaluation is considered by DAC, the applicant will be issued a reply which sets out the recommendations of the committee and a list of references that have been considered in the process. The decision of the committee will also be disseminated to the chairmen of the DTC and the pharmacy managers of all hospitals in HA. To enhance transparency of the decision-making process and strengthen the communication with both internal and external stakeholders, HA proposes to upload to its intranet and internet websites the decisions of DAC on individual applications, together with a list of references that have been taken into account in the process of consideration of the applications.

Engagement with patient groups

Since the implementation of the Formulary, HA has regularly informed patients of the latest developments of the Formulary through meetings with patient groups. Any updates on the Formulary will also be published in HA's newsletter "CarePlus" for patients' information. As part of the continuous efforts to enhance transparency and partnership with the community, HA established in 2009 a formal consultation meetings will be convened

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to inform patient groups of the latest developments of the Formulary, gather their major concerns and solicit their feedback. Patient groups will be invited to submit their views and propose any changes to the Formulary after the meeting. Their views and suggestions will then be presented to the relevant drug committees for consideration.

To further enhance the engagement with patients in the development of services, HA has since early 2011 established a platform for the Chief Executive of HA to regularly meet with patient representatives to gauge their views on various areas of patient services. This new platform will serve as an additional liaison channel with patients on matters relating to the Formulary.

Accessibility of website information

Since the implementation of the Formulary in 2005, the most up-to-date version of the Formulary has all along been uploaded to HA's internet website for public access. HA proposes to develop a search engine for its internet website on the Formulary to improve accessibility to information on individual drugs. HA will also add a hyperlink to its "Smart Patient" website, which is a one-stop platform providing comprehensive patient-related and disease-based information, to make its internet website on the Formulary more accessible to patients.

HA plans to implement the above measures in phases, starting from the second quarter of 2011. HA will continue to maintain close liaisons and communications with patient groups and listen to patients' views and suggestions regarding the Formulary through various channels.

Yours sincerely,

(Miss Gloria Lo) for Secretary for Food and Health

c.c. Hospital Authority (Attn.: Dr W L CHEUNG)