



**The Hon Roger Cook MLA
Deputy Premier
Minister for Health; Mental Health**

Our Ref: 60-27136

Ms J M Freeman MLA
Chair
Education and Health Standing Committee
Parliament House
4 Harvest Terrace
WEST PERTH WA 6000

Dear Ms ~~Freeman~~ *Janine*,

Thank you for your letter of 20 May 2020 regarding recommendations of the Senate Community Affairs References Committee report *Current barriers to patient access to medicinal cannabis in Australia*.

In response to your query about the suggestion that the current access scheme in Western Australia (WA) be expanded, I can provide the following information.

There is no existing mechanism in WA to support the supply of Government subsidised, non Pharmaceutical Benefits Scheme (PBS) medicines through primary care practitioners; however, there are established mechanisms for the supply of non PBS medicines in specialist settings, through Western Australian public hospitals.

Medicines of this nature that are supplied through public hospitals are typically complex, expensive or unregistered therapies and indicated for use in extraordinary medical circumstances. This type of supply is then commonly referred to as "compassionate access".

Supply through these mechanisms is subject to WA Health Policy Frameworks that requires expert medical assessment of evidence for efficacy, safety and cost-effectiveness for each medicine that is approved. Through this assessment, a medicine might be added to the Statewide Formulary, for a specific indication, or alternatively, authorised on a case-by-case basis under Individual Patient Approval.

Any medicine, including medicinal cannabis, is eligible to undergo this assessment process, and might be approved for use in specific circumstances. Specialist practitioners at public hospitals, who may support the use of cannabis-based medicines, where they believe it could be a valuable addition to the available therapeutic options in specific indications, are already able to follow this pathway for assessment.

It is my understanding that this was the approach used by the Perth Children's Hospital when considering the use of cannabidiol products as a therapy for intractable paediatric epilepsy syndromes.

I note that, with the exception of nabiximols, cannabis-based products are not registered medicines in Australia, and that the evidence of efficacy remains of variable quality, across many different indications. For this reason, it would seem appropriate for any public funding of these medicines to continue to be based on the recommendations of expert clinicians, after consideration of the best scientific evidence and robust assessment of medical cost-effectiveness.

I believe that, at this time, the existing mechanisms for supply of non PBS medicines in Western Australian public hospitals are suitable to deal with questions of funded access to cannabis-based products, and that any expansion of access is best driven by specialist medical practitioners.

I trust this information has been of assistance to you.

Yours sincerely

A handwritten signature in blue ink, appearing to read 'Roger Cook', written over a large blue circular scribble.

HON ROGER COOK MLA
DEPUTY PREMIER
MINISTER FOR HEALTH; MENTAL HEALTH

7 JUL 2020