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INTRODUCTION

Onco-exceptionalism: Cancer is perceived and treated differently from other medical conditions, often resulting in unique considerations [1] in:

Development	• Both Government and Industry [2]
Approval	• Special Regulatory Pathways [3]
Reimbursement	• Priority setting criterias [4]
Pricing	• No clear association between drug prices and benefits [5]

Equity (the absence of systematic disparities in health or in the major social determinants of health) [6] – and operationalized through considerations into CEA.

- *Fair innings*
- *Prospective Health*
- *Proportional shortfall*

METHOD

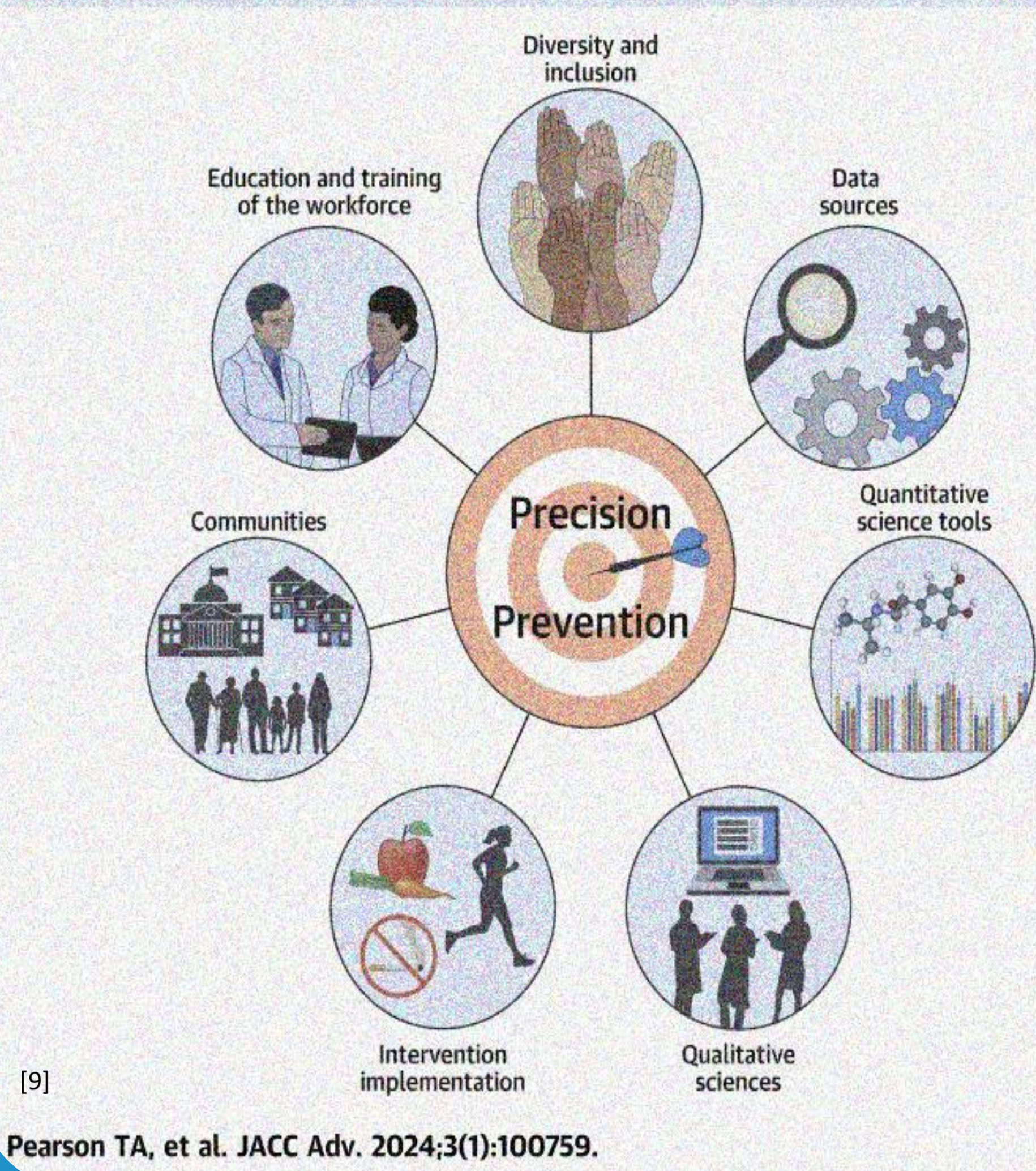
- A scoping review
- Narratvie review of Principles of 4P Medicine

OBJECTIVE

Since a relatively small proportion of cancer patients have specific markers for which targeted therapies have been proven effective, (only 5% of over 500 tested cancer patients were eligible for such treatments)

Q: *reimbursing highly costly drugs aligns with principles of equity?*

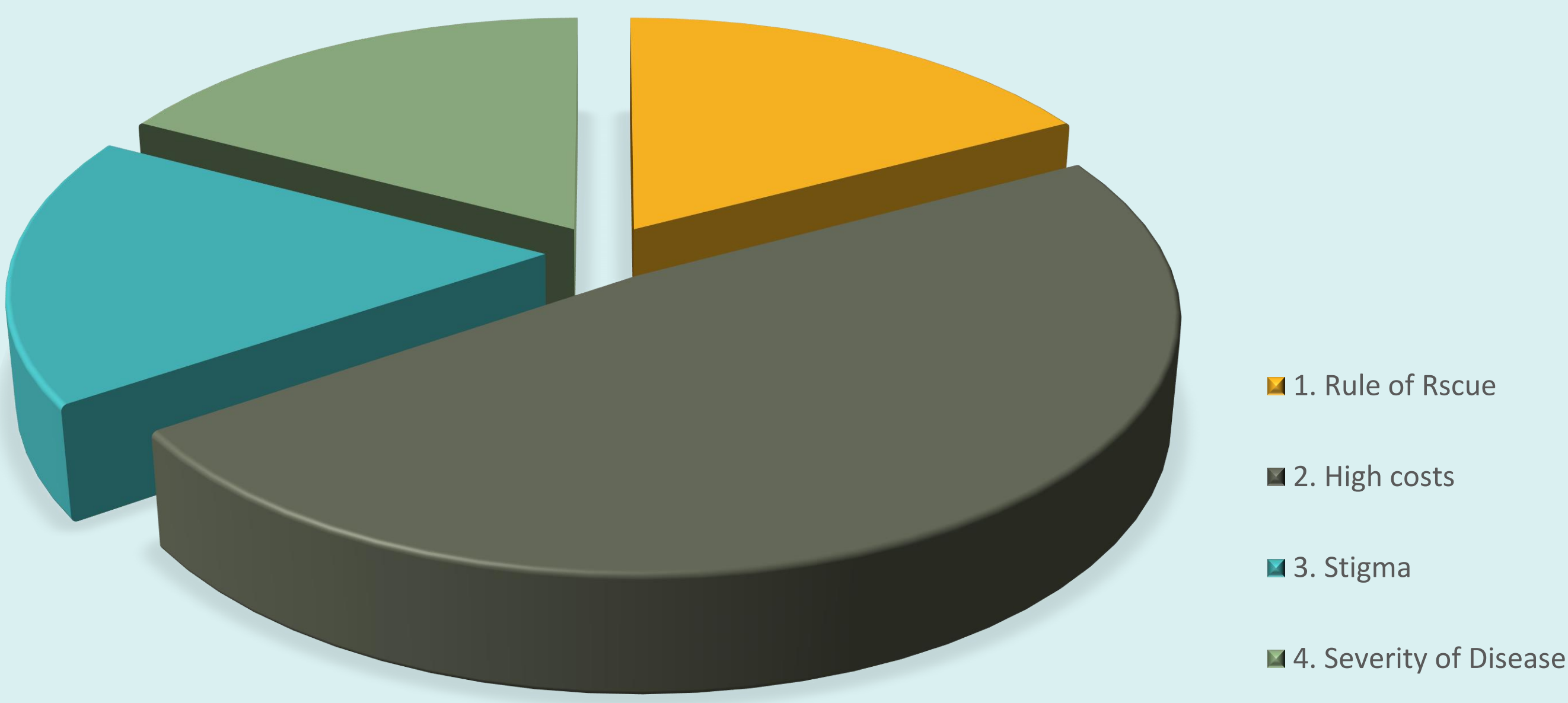
CENTRAL ILLUSTRATION: Dimensions of Precision Prevention



RESULTS

- ❖ Advancements in medical technology and precision medicine continue to unveil new biomarkers and interventions for cancer, attention must also be directed towards addressing **modifiable risk factors** such as obesity and smoking.
- ❖ Failure to do so may lead to a continued reliance on **O4-medicine** practices, which are characterized by “overtesting, overdiagnosis, overtreatment, [and] overcharging” [7].

Arguments For Onco-Exceptionalism



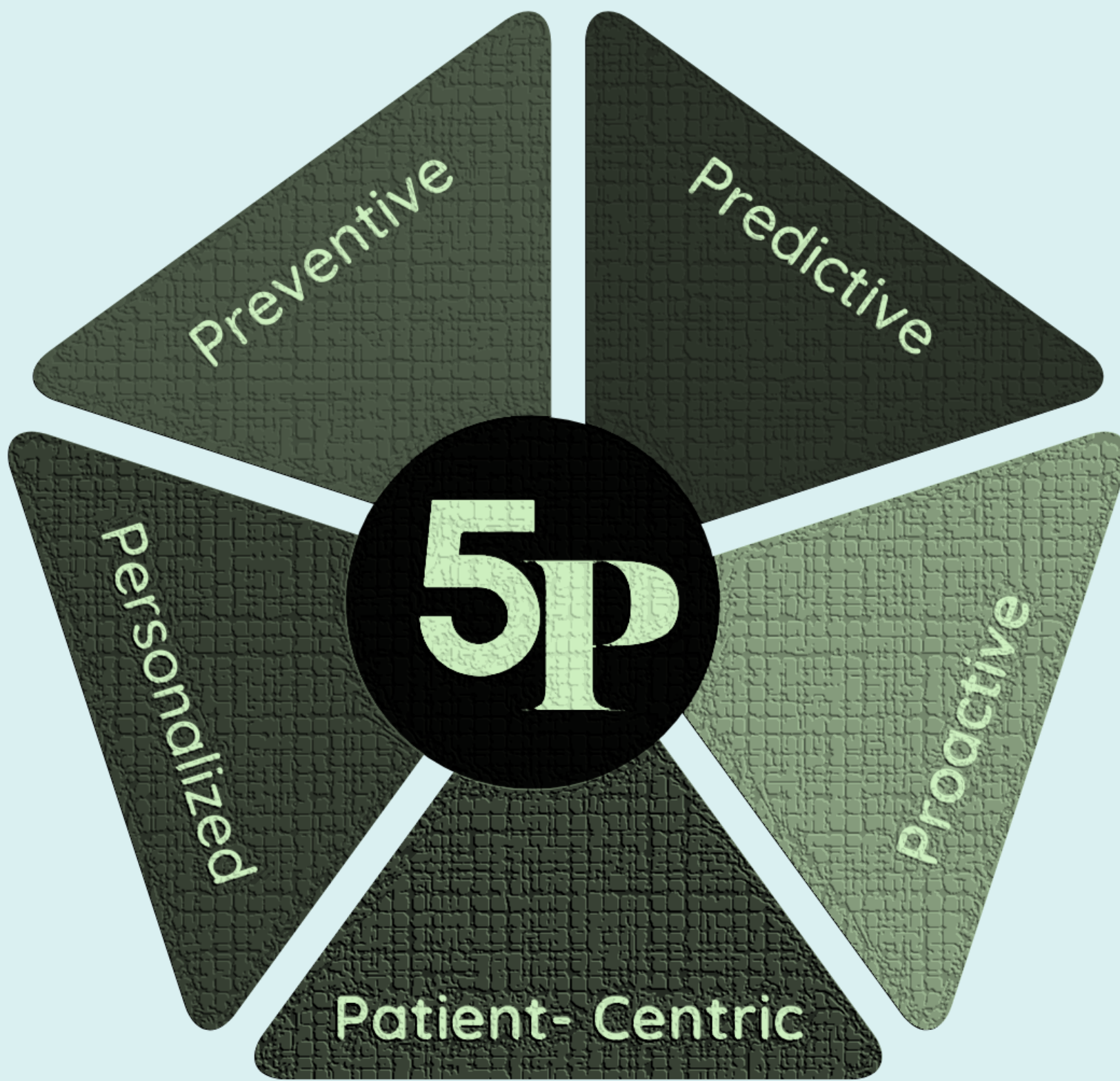
Justifications for Onco-exceptionalism (Culyer 2017)

Arguments **Against** Onco-Exceptionalism: Based on 4P Medicine

Preventive	Predictive	Participatory	Personalized
<ul style="list-style-type: none">➤ Shifting the paradigm from a ‘reactive’ to a ‘proactive’ approach➤ In non-genetic cases: life style modifications e.g., Obesity, Smoking, Alcohol, Health literacy	<ul style="list-style-type: none">➤ Leroy Hood’s concept of “actionable possibilities”➤ Epidemiological knowledge-base	<ul style="list-style-type: none">➤ An opportunity and a right for the scientific citizen-patient➤ Psychosocial factors	<ul style="list-style-type: none">➤ Prevention through participation can make prediction and precision possible

CONCLUSIONS

- (Role of citizen-patients) the responsibility of the individual against their own health- in prevention, prediction and precision.
- (Role of governing agents) demanding transparency regarding R&D costs and end product cost
- The need for a transition from merely treating illness to supporting the healthy in maintaining their well-being.
- Too strong a focus on genomics in contrast to behavioral, environmental and social determinants of health [8].



https://silverberry.health/blog/5-pillars-of-precision-health

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