

Drugs to treat cancer, other ailments, in short supply

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LAS CRUCES - A national shortage of cancer treatment drugs is taking its toll in Las Cruces and statewide, doctors said. And there are supply problems with some non-cancer medications, too.

The cancer drug shortages began about a year ago, but have intensified during the last few months, they said. Though the short supply hasn't affected all cancer medications, the shortages can create roadblocks in a patient's treatment schedule because medical staff must scramble to find alternative medications, such as a related drug, said Cheryl Willman, director and CEO of the University of New Mexico Cancer Center, which employs physicians in Las Cruces.

"It really can delay life-saving treatment," she said. "I don't think I'm exaggerating when I say this is a national crisis for our patients."

Willman, also a physician, said the cancer center is having trouble getting a handful of drugs, including andriamycin, a key drug used to treat breast cancer.

She estimated about 20 percent of the center's patients have been affected in some way by the shortage. In all, the hospital treats about 16,000 cancer patients annually.

The affected medications are mainly widely used generics, said Bishnu Rauth, cancer physician at New Hope Cancer Center on Lohman Avenue. He said his own clinic is having trouble getting taxol, used in treating lung cancer, and leukovorin, which, combined with chemotherapies, is used to treat colon cancer.

The suppliers either say they're not available or ration them out because of high demand and short supply, experts said. Rauth, who has practiced oncology in Las Cruces for 17 years, described the items in short supply as "very vital drugs."

"This is the worst I've seen," he said. "We've never seen shortages before."

And problematic, Rauth said, is that often the high-dollar alternative medications - still under patent - don't work as well.

Rauth said he believes the problem is connected to the federal government and the Medicare rates it pays for these drugs. Because they're not high enough, he said, companies are seeing less profit in producing the generics. Other drugs that are under patent are still accessible, but remain expensive.

"If the profit margin is good, we don't have shortages," he said.

Las Cruces Mike Hansen, 42, said the situation needs to be resolved.

"For them to say there's a shortage ... get back on the machine, make some more," said Hansen, who lost an aunt to cancer about a decade ago. "If the federal government can

fund a treadmill to see how fast shrimp can move, let's throw this into a coffer for medicines for elderly and people who can't afford care. Put my tax dollars to work saving lives."

Both Willman and Rauth said alleviating the shortage will take intervention on the federal level. Rauth said the federal government should boost its payment rates for the generic drugs.

"This idea we have to struggle to access life-saving medicines in our country is just horrible," Willman said.

The UNM center has contacted the state's federal delegation of lawmakers in an attempt to gain support, Willman said.

Other pharmaceuticals

The drug-supply problem isn't limited to cancer medications, said John Landrum, pharmacist at New Mexico State University's student health center. He described the supply chain as "the worst I've seen it" in his 34 years in the profession.

Out of a restocking order for 40 to 50 items, about four to five won't be available, Landrum said. Affected generic drugs include birth control and antibiotic medications.

The problem started after the economic collapse in 2008, Landrum said, and it has worsened ever since.

Some 80 percent of students pay out-of-pocket for their medications and sometimes can't afford the name-brand alternatives, according to Landrum. At least two students with psychological illness dropped off their treatment regime because they weren't able to get their prescribed medication because of the shortage, he said. That, in turn, caused academic problems.

Landrum said there should be a requirement for drug manufactures to notify officials when they plan to stop making a drug.

The situation "seems to have plateaued at 'bad" over the last three months," he said. "It hasn't gotten any better."

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