NATIONAL MEMBER ORGANIZATIONS

American Laryngeal Papilloma Foundation American Porphyria Foundation

American Brain Turnor Association

Alagille Syndrome Alliance Alpha 1 Association

Alpha 1 Foundation

National Organization for Rare Disorders, Inc.®

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September 18, 2003



out of the darkness.

Mark B. McClellan, M.D., Ph.D. Commissioner Food and Drug Administration Bldg. PKLN, RM 1471, Mail Stop HF-1 5600 Fishers Lane Rockville, MD 20857

Dear Commissioner McClellan:

Re: June 11, 2003 Citizen Petition of the Abigail Alliance and Washington Legal Foundation

We are writing to urge you to reject the relief sought in the June 11, 2003 citizen petition from the Abigail Alliance and Washington Legal Foundation. The citizen petition proposes a new "Tier 1" drug approval program that would make experimental drugs in Phase I clinical trials available to terminally ill patients outside of clinical trials.

As you know, the National Organization for Rare Disorders (NORD) is a non-profit voluntary health organization dedicated to the identification, treatment and cure of rare "orphan" diseases. We have always been concerned about access to investigational treatments for people who do not qualify for clinical trials, and those who live too far away from clinical sites. Therefore, the *Orphan Drug Act of 1983* contains provisions for pre-approval access to promote availability of experimental therapeutics. A few years later, at the height of the AIDS epidemic, FDA Commissioner Frank Young issued "Treatment IND" regulations that formalized the pre-approval access process for all serious and life-threatening diseases without satisfactory therapeutic alternatives. Thus experimental treatments in Phase III trials are allowed to be given to desperately ill patients.

More recently FDA has allowed distribution of experimental drugs and biologics through a variety of other expanded access programs, even though the agency has not published regulations to structure the process. NORD has been privileged to administer the computerized random selection component of several of these programs so we are sensitive to the intense emotional issues that these families are dealing with. Ordinarily there will be a limited supply of the investigational drug with an unlimited number of patients who want it. The computerized random selection process (known commonly as a "lottery") is a structured incorruptible system to ensure that names will be selected fairly and all applicants will have an equal chance of being selected.

American Syringomyella Alliance Project Aplastic Anemia & MDS International Foundation, Inc. Association for Glycogen Storage Disease Association of Gastroinlestinal Mobility Disorders, Inc. (AGMD) Batteri Diseaso Bupport & Hesearch Association Benign Essential Blepharospash) Research Foundation Charcot-Marie Tooth Association Chromosome 16 Registry Research Society Clish Falate Foundation Cornella De Lange Syndrome Foundation Cystinosis Foundation, Inc. DEBRA of America Dysautonomia Foundation, Inc. Dystonia Medical Research Foundation Ehlers Qanlos National Foundation Epilepsy Foundation Families of Spinal Muscular Atrophy Foundation for Ichihyosis and Related Skin Types Guillain Barre Syndrome Foundation International Hemochromatosis l'uundation Haredilary Colon Carlour Automation Hereditary Disease Foundation HHT Foundation International, Inc. Histocylosis Association of America Huntington's Disease Society of America International FOP Association, Inc. International Joseph Diseases Foundation, Inc. International Rett Syndrome Association Interstitial Cystilis Association Lowe Syndrome Association. Inc. Mastocytosis Society, Inc. Mucolipidosis Type IV Foundation, Inc. Myasihenia Gravis Foundation of America, Inc. Myeloprolitorative Disease Research Center Myositis Association of America, Inc. Narcolepsy Network, Inc. National Adrenal Disease Foundation National Alopecia Areats Foundation National Alaxia Foundation National Foundation for Ectodermal Ovaplasias National Hemophilia Foundation National Marian Foundation National MPS Society, Inc. National Multiple Sclerosts Godlety National Neurolibromatoxis Foundation National PKU News National Spasmodic Torticollis Association National Tay Sachs & Allied Diseases Association National Urea Cycle Disorders Foundation Neurolibromalosis, Inc. Ostgogenesis Imperfecta Foundation Parkinson's Disease Foundation, Inc. Platelet Disorder Support Association Prader Willi Syndmine Association, USA Fulminary Hyperiension Association PXE International, Inc. Reflex Sympathotic Dystrophy Syndrome

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Stevens Johnson Syndrome Foundation Sturge-Weber Foundation

The Englishmetalpia Association
The Oxalesis and Hyperexaluda Foundation

Tourette Syndrome Association Trigensinal Neuralgla Association

Williams Syndrome Association Wilson's Disease Association

United Leukodyetrophy Foundation
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Mark B. McClellan, M.D., Ph.D. Commissioner September 18, 2003 Page Two

We believe the proposed Tier 1 system from the Abigail Alliance is bad medicine. It proposes to give people with life threatening conditions access to experimental drugs that have no evidence of safety or efficacy. Phase I trials are aimed at toxicity, not efficacy, and their results do not prove that they have a clinical effect. It is estimated that 90 percent of treatments in Phase I clinical trials do not go on to further development because they are either unsafe or clearly ineffective. Thus every patient entering a "Tier I" program would have only a 10 percent chance of either not being harmed, or possibly benefiting. Moreover, it would greatly diminish the chances of fully enrolling Phase II or III trials because patients would likely opt for the chance of receiving active drug under Tier 1, over possible placebo in Phase II or III.

Additionally, we are gravely concerned that concepts such as "Tier 1" are adding to the problem of "therapeutic misconception." Some patients feel that experimental therapies are their "last chance", whereas there is actually no realistic evidence that most Phase I experimental drugs represent a reasonable treatment. History shows that virtually every major amendment to the Food, Drug & Cosmetic Act was precipitated by a major public health catastrophe that killed or maimed innocent people. If FDA adopts the proposed Tier 1 concept, it will virtually wipe out the Kefauver Hamis Amendments that were precipitated by the Thalidomide tragedy. Pharmaceutical companies would be allowed to profit from sales of drugs that have not been proven safe or effective, thus reverting public health protections to the level of the 19th century.

We are concerned that some people feel they have a "right" to medical care of their choice, and this includes access to unapproved and unregulated therapies. However, in the United States health care is not a right, it is a privilege, and access to treatments that are unsafe or ineffective represents a clear threat to public health. This is why the FDA was created, and why Congress periodically strengthens the agency's regulatory powers.

We feel strongly that expanded access to investigational Phase III drugs (only after Phase II studies have shown convincing evidence of safety and efficacy) for patients with life-threatening and serious diseases that have no adequate alternatives should be conducted in a structured and equitable manner. Unapproved experimental drugs should not be sold, primarily because it would remove the incentive for manufacturers to seek FDA marketing approval. Additionally, only the richest patients would have access because insurance will not pay for experimental therapies. It would create a two-class system of medicine that would tear at the fabric of society, and it is morally unacceptable. We urge you to reject the Tier 1 concept and pledge to uphold the regulations that have made FDA's gold standard the marvel of modern medicine.

Very truly yours, Mayer

Abbey S. Meyers

President

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cc: Diane E. Dorman, NORD Vice President for Public Policy