Congress of the United States
Washington, DC 20515

February 15, 2012

The Honorable Margaret A. Hamburg
Commissioner
Food and Drug Administration
White Oak Building
10903 New Hampshire Avenue
Silver Spring, MD 20993

Dear Commissioner Hamburg:

As the co-chairs of the Congressional Childhood Cancer Caucus, we are writing to express our deep concern about the increasing number of drug shortages in the United States and its impact on children with cancer. We are seeking your feedback on how we can better support your efforts to mitigate this nationwide crisis.

According to a recent *New York Times* report, the drug shortage crisis has left some hospitals dangerously close to depleting their supplies of preservative free methotrexate, a drug that is central to the cure of patients with acute lymphoblastic leukemia (ALL). Nearly 3,500 children and adolescents are diagnosed with ALL in the United States each year, with over 80% of children successfully treated. The methotrexate shortage directly threatens curative therapy for these children, placing their lives at an unnecessary and unacceptable risk. Without new supplies of methotrexate, we understand that an increasing number of institutions that care for children with cancer will experience shortfalls of this critically important drug. Furthermore, rationing of remaining supplies already appears to be occurring.

We also have learned that drug shortages have forced doctors to delay treatments or make untested changes to established treatment regimens. At a recent Senate Health, Education, Labor and Pensions Committee hearing, Dr. John Maris from The Children's Hospital of Philadelphia testified that for a period of time his hospital was unable to obtain daunorubicin, a drug that is essential to the treatment of the two most common forms of childhood leukemia. Dr. Maris explained that clinicians turned to an alternative drug that may have lead to increased side effects, and unfortunately, may compromise, to an unknown degree, the chance of cure.

The progress made in curing children with cancer over the past 50 years has truly been inspiring to all, but the research that has resulted in this progress is now also threatened by drug shortages. The unavailability of certain oncology drugs has resulted in an untold number of clinical trials being halted or delayed, undermining our ability to improve the outcome for today's children with cancer, which remains the number one cause of disease related death in children. At a recent House Energy and Commerce Committee hearing, Howard Koh, Assistant Secretary of Health for the Department of Health and Human Services, stated that "The inability to obtain adequate supplies of these cancer drugs for research has resulted in promising clinical trials being suspended indefinitely; patient enrollment being abruptly halted; and trials being delayed while alternative treatment regimens are developed."

We commend the FDA for the actions the Agency has taken to date to address the ongoing situation, and have heard high praise for the work of FDA's Drug Shortage Program. Yet with this unprecedented shortage in methotrexate and the central role it has in curing children with ALL, we would like to inquire about current steps and actions being undertaken:

- Does the FDA have reasonable estimates on the supply of preservative free methotrexate that is currently available from foreign suppliers that could potentially be utilized to mitigate the current shortage?

- How are decisions reached to allow for importation of drug from foreign suppliers?

- Does the FDA have any Abbreviated New Drug Applications (ANDA) pending for methotrexate or any of the other life saving injectable cancer drugs currently awaiting review?

- Are there other actions the FDA can take to provide an emergency supply of methotrexate in the upcoming days or weeks to sites caring for children with cancer?

We understand that the shortage of methotrexate is due to a number of related factors, and that a broader solution encompassing a number of strategies will be required to achieve a sustainable supply for these at-risk drugs. However, we also recognize that the implementation of such strategies will take time. To that end, for the relatively small number of oncology drugs required for cure of children with cancer, we would like your input on the following:

- From the FDA perspective, describe any key regulatory hurdles to the development of a national reserve of select, life saving anti-cancer drugs to be deployed in the event that current approaches fail.

Thank you for your ongoing efforts. We encourage the FDA to continue using all available methods to ensure the viability of these drug supplies and offer our support to assist in any method deemed possible.

Should you have questions, please do not hesitate to contact Erika Appel of Congressman Van Hollen's staff at (202) 225-5341 or Andy Taylor of Congressman McCaul's staff at (202) 225-2401. Thank you for your time and attention to this very important matter.

Sincerely,

Chris Van Hollen
Member of Congress

Michael T. McCaul
Member of Congress