## **LETTERS**

## Priority reviews: innovation and safety

In the *CMAJ* news story about the anticorruption symposium held in Toronto, Dr. Supriya Sharma, chief medical officer at Health Canada, said that the expedited 180-day priority review is justified. Her position was that, even though these drugs have more safety problems once they reach the market, it is an acceptable trade-off because they offer major benefits.¹ However, that assertion is simply not true for the most part.

First, Health Canada gave a priority review to one-quarter of all the new drugs approved between 1997 and 2012, but fewer than one in six actually offered a major new therapeutic improvement.<sup>2</sup> Second, Health Canada is not able to predict accurately which drugs should get a priority review. Out of 91 products that got such a review, only 33 were actually major therapeutic innovations.<sup>2</sup>

The bottom line is that faster drug reviews lead to more safety problems<sup>3</sup> but only occasionally to getting really useful drugs to market more quickly.

## Joel Lexchin MD

Physician, Emergency Department, University Health Network; Professor Emeritus, School of Health Policy and Management, Faculty of Health, York University, Toronto, Ont.

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Competing interests: Joel Lexchin received consultant fees for projects looking at indication-based prescribing and at which drugs should be distributed free of charge by general practitioners. He received compensation for being on a panel that discussed expanding drug insurance in Canada. He is a member of the Foundation Board of Health Action International.