

Insuser

From: [redacted]@yale.edu>
Sent: [redacted] 3 AM
To:
Cc:
Subject: HB5384

To Whom It May Concern,

I am writing today as I understand there will be a hearing on HB 5384: An act concerning prescription drug costs. I am writing today on behalf of my patients, as well as myself, as I am a **Pediatric Endocrinologist at Yale University who has been living with type 1 diabetes for over 30 years.**

As someone who lives with and cares for those with type 1 diabetes, I think it is critical to understand that prior to 1921 when insulin was discovered this condition was a death sentence. Thanks to a medical miracle with the discovery of insulin, those living with type 1 diabetes are provided a life-sustaining replacement for what their body no longer makes. Indeed, when costs were initially high on insulin therapy an amazing partnership between academia and industry allowed for the mass production of this medication.

And yet, nearly a century after the discovery patients, and their families, are left wondering if they can afford this life sustaining medication. As costs for insulins skyrocket, we have seen more of the cost passed to patients. It pains me to know that families will choose regular insulin, an older insulin with less rapid onset of action, as it is cheaper. In order to delay long-term complications of diabetes, we need to achieve targeted glycemic control. By mimicking normal physiology as best possible, through the use of rapid acting insulin analogs with basal insulin coverage, we minimize the risk of high blood sugars, which have been directly linked to the development of long-term complications. Sitting in a room with young adults as they forge their own path, I cannot bear to see them choose whether their life is "worth" the ridiculous co-pay they are being charged. No young adult, or family, should have to decide whether to get a treatment that is clearly superior, based on whether or not they can pay. It is heart wrenching to do so and I encourage you to think how you would feel should your child be faced with such an ordeal.

As a physician, I am afforded health insurance that covers my insulin costs. But for those less fortunate than I, when rebates are provided by pharmaceutical companies, the savings should be passed directly to the consumer. Cost increases for these medications should be limited on an annual basis, especially if there has been no increase in the cost of manufacturing.

In the end, I hope you choose to stand on the right side of history, vote with your heart, and take into consideration the voices of myself and my patients who ask to be afforded to treat ourselves with the therapy that will ensure we have the opportunity to lead full lives not impacted by our chronic condition.

Sincerely,

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