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PEOPLE living in England facing huge medical bills because they cannot get life-saving drugs on the National Health Service, could benefit by moving to Scotland for treatment.

Patients need only to be "ordinarily resident" in a district to access full NHS care. The definition of ordinarily resident is not particularly restrictive and does not preclude people living two addresses, a leading lawyer in the field told a press conference in London today (Tuesday).

The issue arises because cancer patients in Scotland can be prescribed on the NHS one or more of 19 life-saving or life-prolonging drugs that are denied patients south of the border. In addition, two drugs that can prevent blindness in some cases are available free only in Scotland.

Nigel Giffin, QC, said: "I might ask as a resident of England, what can I do to take advantage of the favourable regime in Scotland. It all hinges not on what is under your kilt, but where you are ordinarily resident. To be ordinarily resident for the purposes of healthcare in Scotland, residency does not have to be permanent.

"You can be in two places at once. If you are called Gordon and you're in London four days a week and the rest in Scotland, are you ordinarily resident in two places at once. I would say you were."

Mr Giffin said it was not necessary to own property in Scotland – the patient could be in lodgings and need not show any great determination to remain. "The address should be a settled abode, whether of short or long duration."

He told the press conference, organised by medical insurer Western Provident Association, that the NHS rules for registering with a primary care trust anywhere in the UK were the same as being "ordinary resident." The trust, in effect the family doctor, could not discriminate against, say, an English person resident in Scotland.

Many cancer patients are put on chemotherapy courses lasting less than six weeks or less, followed by a period in which no treatment is given. This could make a trip to Scotland in some cases a worthwhile consideration for patients denied appropriate therapy in England or Wales.

Greater availability of medicines – which can cost up to £100,000 per course – is not the only benefit enjoyed in Scotland. Scots get free university education and the old get free "personal" care.

Polls carried out on behalf of WPA show widespread disapproval over the Scotland/England split on access to medicines. Nine in 10 thought it "unacceptable" that people in some parts of the United Kingdom were able to get drugs on the NHS while others were not. Similarly, nine in 10 MPs of 97 polled, representing a cross section of the Commons, also thought the anomaly was unacceptable.

Almost a third of the public – 29 per cent - thought they did not have a legal right to use their own money to top up NHS treatment by buying drugs not available on the NHS. A slight greater proportion of MPs – 31 per cent - thought likewise.

A total of 21 drugs are available on the NHS to people living in Scotland. The list includes cetuximab (brand name Erbitux) for stomach cancer at £3,685.50 a month, which was approved in Scotland in March 2005; docetaxel (Taxotere) for types of lung cancer at £1,069.50 per cycle, approved in Scotland in May 2003; capecitabine (Xeloda) for gastric cancer at £585.48 per cycle, approved in Scotland in September 2007; and dasatinib (sprycel) for leukaemia at £2,606.63 per month, approved in Scotland in May 2007.

Two of the 21 drugs are not in the cancer field. Both are for age related macular degeneration, which leads to blindness. People in Scotland are able to access on the NHS ranibizumab (Lucentis) and pegaptanib (Macugen). The first costs £1,522.40 per cycle and the latter £514 per cycle.

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Notes to Editors:

1. WPA is a leading UK health insurer with a heritage as one of the original contributory funds dating back to 1901. Headquartered in Somerset, WPA is a not for profit Provident Association.
2. Nigel Giffin QC View: http://www.wpa.org.uk/literature/attachment_a.pdf
3. Sample list of Cancer and Eye Drugs approved for use in Scotland and not in England: Attachment B
4. Populus survey results: Attachment http://www.wpa.org.uk/literature/attachment_c1.pdf & http://www.wpa.org.uk/literature/attachment_c2.pdf