

National Pharmacare: Task force must involve consumers

By: Linda Wilhelm

Our national system of health care is complex and even those of us who have been living the system for many years get bogged down in the details.

National pharmacare, for instance, sounds like something most Canadians would rally behind and support. I wonder though, would they still support it, knowing it will likely result in relegating physicians to prescribe the cheapest drug on the market, regardless of whether it is best for their patient? Would Canadians support it, knowing that it will further limit our access to new, breakthrough medications that could potentially save and extend lives, limit disability, and decrease the demand for costly and invasive joint replacement surgery and hospitalization?

Newest and most expensive doesn't necessarily trump older and cheaper medications but sometimes it does. Recently breakthrough drugs have hit the target with remarkable therapeutic effects for patients and their families. The physician, being charged with providing the best care for the patient, must also be able to prescribe the best and most appropriate medication. Unit cost must not be the deciding factor. Sometimes it is cheaper in the long term to give the more expensive treatment. In many instances it allows Canadians to continue their education, actively participate in family life and remain productive members of society. Fortunately, the majority of Canadians are healthy and do not realize the short falls of the system until they are sick.

In order to fix the system, governments must use the expertise of the people who have experience with the system. Currently each province and territory has a different drug formulary. Our health care system is not portable from province to province. John Smith in Eastern Canada does not have coverage for some of the prescription drugs available to Mary Jones and her family in Western Canada. Access must be uniform. The playing field must be leveled. The provincial health ministers left Ottawa's Health Care Summit mid September agreeing to create a task force to design a national pharmacare program. Consumers, stakeholders and medical professionals must be part of that task force. As complex as the design might be, it cannot be left to our elected representative alone who could be shut out anytime within the next four years.