

Written Submission for the Pre-Budget Consultations in Advance of the Upcoming Federal Budget

**Submitted by:
Arthritis Society Canada**

August 2024

List of Recommendations:

- 1.** Invest in research and work with health charities to enhance research in Canada
- 2.** Enhance the quality of arthritis statistics and health data
- 3.** Collaborate with provinces and territories to create and implement pan-Canadian wait times strategies that sets targets and tracks outcomes to reduce wait times for joint replacement surgeries
- 4.** Ensure equitable and comprehensive access through national pharmacare and other federal pharmaceutical policy initiatives
- 5.** Eliminate the taxation of medical cannabis and expand access by enabling pharmacy distribution
- 6.** Implement Canada Disability Benefit inclusive of episodic disabilities

Arthritis Society Canada is a national health charity dedicated to extinguishing arthritis. We represent the six million Canadians living with arthritis today, and the millions more who are impacted or at risk.

Arthritis is the most common chronic disease in Canada that affects six million individuals, or 1 in 5 people. Arthritis is often misunderstood as a disease of the elderly, yet the reality is it affects people of all ages. Around half of those living with arthritis are under the age of 65, one-third of Canadians living with osteoarthritis were diagnosed before the age of 45, and thousands of children live with arthritis. The debilitating pain and impacted mobility caused by arthritis affects people's quality of life and robs them of the ability to contribute to their families, communities and workforce. Arthritis is a leading cause of long-term disability and working-aged Canadians with arthritis are twice as likely to report that they are not participating in the workforce compared to their peers without arthritis.

Arthritis Society Canada's [State of Arthritis in Canada Report Card](#) looks at arthritis across the country based on three categories: Access to Care, Wellness, and Research and Innovation. The first of its kind, the report was developed through collaboration within the arthritis community across Canada. No province or territory scored higher than C, and the key findings across all jurisdictions are that arthritis data is insufficient, arthritis research is underfunded and access to arthritis care is a challenge. The Report highlights the need for collective action to improve the state of arthritis in Canada.

6 million people in Canada live with arthritis.



Steps must be taken to address the challenges facing Canadians with arthritis so they can participate more fully in the workforce and contribute to the Canadian economy. As a member of the Health Charities Coalition of Canada, Arthritis Society Canada supports their pre-budget submission, and our submission aligns with their recommendations.

1. Invest in research and work with health charities to enhance research in Canada

As the country's largest charitable funder of arthritis research, Arthritis Society Canada is dedicated to creating research breakthroughs and forging a path towards a future where individuals can live pain-free. Advances in research are essential to improving prevention, early detection, diagnosis, health outcomes and quality of life for all people living with arthritis in Canada.

According to a 2021 report on the status of arthritis research funding across Canada from 2005 to 2019, arthritis research funding has been consistently underfunded compared to research on other diseases or arthritis research in other countries. For example, arthritis research is funded at a rate of \$4 per capita in comparison to a \$12 per capita investment for diabetes, a chronic disease with many comparable features to arthritis. Federal funding for arthritis research through the U.S. National Institutes of Health (NIH) is about 1.7 times greater per patient compared to arthritis research funding from CIHR.

We were pleased Budget 2024 included an increase in core research grant funding and look forward to continued consultations on the creation of the new capstone research funding organization. With the number of people in Canada living with arthritis expected to grow to over 9 million by 2040, **it is imperative that increased funding be allocated towards arthritis research.**

To enhance the ability of health charities to invest in research, the government should also **consider actions that will support donations to charities, such as removing the capital gains tax** on donations of shares from private corporations or real estate to charities and implementing tax measures to encourage Canadians to make charitable donations.

2. Enhance quality of arthritis statistics and health data

The findings of our [Report Card](#) clearly show the need for better and more accessible data for researchers and the public. It is critical that together we determine the appropriate data to collect and establish standardized collection methods to ensure comparability. Data is key to supporting innovation and improving efficiencies within the health system. Most importantly if we optimize how we collect, use and report on health data it can better inform health care decisions leading to better health outcomes and quality of life for people living in Canada. **We encourage the government to move forward on the recommendations set out in the pan-Canadian Health Data Strategy.**

To ensure progress, it is critical the government continue to work and collaborate with provincial/territorial governments, research institutes, health system leaders, industry and patient groups to create a shared path focused on providing timely, accurate and standard data. **We strongly support development of the pan-Canadian Health Data Strategy and recognize the importance of engaging the patient community in discussions and strategy implementation.**

3. Collaborate with provinces and territories to create and implement pan-Canadian wait times strategies that sets targets and tracks outcomes to reduce wait times for joint replacement surgeries

Arthritis is the leading cause of joint replacement, including over 99% of knee replacements and more than 70% of hip replacements. With the number of Canadians with arthritis expected to balloon to 9 million by 2040, even more people will need joint replacements.

According to the Canadian Institute for Health Information (CIHI), the benchmark wait time for hip and knee replacements is 182 days. The most recent [CIHI data](#) shows that the wait for hip replacements in Canada is over one year and the wait for knee replacements is over 14 months. These wait times can be even longer depending on which province or region one lives in. Despite increased surgeries and dedicated funding, task forces and strategies, wait times are longer now than before the pandemic.

We encourage the government to work in collaboration with provincial and territorial governments and health system stakeholders **to create and implement pan-Canadian wait times strategies** that include setting and tracking targets, optimizing resources, implementing innovative models of care, preventing the progression of arthritis through early intervention, and improving access to care and treatment.

Arthritis Society Canada's report, [The Wait: Addressing Canada's Critical Backlog of Hip and Knee Replacement Surgeries](#) provides more details on these innovative solutions that can help inform the strategies. We are proactively working with partners across the country to implement these solutions to reduce wait times for surgeries, and we welcome any dialogue with you on how these can be adopted within pan-Canadian and bilateral action plans that require public reporting on how the system is improving for the benefit of Canadians.

4. Ensure comprehensive and equitable access to treatment through national pharmacare and other pharmaceutical policy initiatives

Arthritis symptoms can range from mild to severe. Most people with arthritis experience chronic pain, fatigue, restricted mobility, lowered mood and other symptoms that can combine to erode their quality of life. Left untreated, inflammation can lead to significant and often irreparable damage to the affected areas, resulting in loss of function and disability. As there is currently no cure for arthritis, access to medications play a crucial role in managing symptoms and slowing disease progression. The right treatment plan can significantly improve quality of life and allow people to lead near normal lives. Unfortunately, many people with arthritis face significant challenges accessing and affording the medicines they need due to gaps and inconsistencies in coverage. Bill C-64, *An Act Respecting Pharmacare*, presents an important opportunity to establish a national pharmacare program that addresses these issues.

Many Canadians do not have access to extended workplace health benefits or have limited coverage. All Canadians deserve equitable access to the medications they need. In the case of inflammatory arthritis, it is critical that there be a range of treatment options, as it is still very much a matter of trial and error to find the right treatment. What works for one patient may not for another. It is essential that the patient voice be considered whenever healthcare-related decisions are being made.

As well, we encourage the government to **accelerate its work on the *National Strategy for Drugs for Rare Diseases***. People living with rare disorders, including some forms of arthritis, often live with chronic, debilitating pain, that can be life-threatening, severely limit their ability to do daily activities of living and can take months or years to diagnosis. We encourage the government to strike bilateral agreements with all provinces and territories as soon as possible.

5. Eliminate the taxation of medical cannabis and expand access by enabling pharmacy distribution

For many people living with the fire of arthritis, medical cannabis is an important pain management option. About 1 in 4 Canadian adults using medical cannabis use it to manage arthritis, specifically. While cannabis for medical purposes requires a medical authorization by a healthcare professional, it is subject to sales and excise taxes, which is inconsistent with the taxation of prescription drugs and medical necessities under the *Excise Tax Act*.

The costs associated with the use of cannabis for medical purposes (sometimes upwards of \$500/month) can put an enormous financial strain on many patients. In combination with limited insurance coverage, the taxation of cannabis for medical purposes presents additional access barriers to this effective form of treatment.

To further support patients, pharmacists should have the authority to prescribe and dispense medical cannabis. This will create a clear distinction between medical cannabis and cannabis for recreational/ non-medical use and help ensure that patients receive reliable education on the safe and effective use of medical cannabis from trained health care professionals. Pharmacy access can also help facilitate reimbursement by health insurance plans.

We were pleased to see the inclusion of the above recommendations included in the final report of the Expert Panel on the legislative review of the *Cannabis Act*. **We encourage the government to take these recommendations into consideration and continue to engage with patients on the regulations.**

6. Implement Canada Disability Benefit inclusive of episodic disabilities

People with arthritis can face barriers to financial security. While some manage well at work with little to no additional support, others need to leave (or may not even be able to enter) the workforce to address their symptoms. In fact, working-aged Canadians with arthritis are twice as likely to report that they are not participating in the workforce compared to their peers without arthritis. Assistive devices, medication, and therapy are added expenses that may threaten someone's financial well-being.

We were pleased to see funding for the Canada Disability Benefit included in Budget 2024. **As the government develops regulations for the *Canada Disability Benefit Act*, we strongly encourage government to meaningfully engage with the disability community, including organizations like ours, to ensure the patient voice is at the centre and the benefit truly helps those who need it.**

Conclusion

Arthritis Society Canada greatly appreciate this opportunity to provide input on the 2025 federal budget. We strongly encourage you to consider these recommendations which align with many of the federal government's priorities and welcome any opportunity to elaborate on our recommendations. Implementing these recommendations would have a profound and immediate impact on the millions of Canadians who suffer from and live with Arthritis.

About Arthritis Society Canada

Arthritis Society Canada is the country's national charity dedicated to fighting the fire of arthritis with the fire of research, advocacy and information and support. With the support of our donors and volunteers, we are all in to end arthritis, so people with arthritis can live their best life free from arthritis. Arthritis Society Canada is accredited under Imagine Canada's Standards Program.