ARTHRITIS SOCIETY CANADA

MANITOBA 2024 PRE-BUDGET CONSULTATION SUBMISSION

Delivered to:
The Honourable Adrian Scala
Minister of Finance

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INTRODUCTION

On behalf of Arthritis Society Canada, we appreciate the opportunity to contribute to the Ministry of Finance 2024 pre-Budget consultation.

Arthritis Society Canada is the country's national health charity dedicated to extinguishing arthritis. We represent the six million Canadians living with arthritis, including the 200,000 Manitobans living with arthritis today. As the country's most common chronic condition, arthritis is misunderstood and often considered a disease of the elderly. The reality is that half the people with arthritis are under the age of 65, one-third of Canadians living with osteoarthritis were diagnosed before the age of 45 and there are thousands of children with arthritis. Arthritis is a leading cause of workplace disability and one of the major health challenges facing our health care system today.

Our recently released <u>State of Arthritis in Canada Report Card</u> looks at arthritis in each province and territory based on three categories: Access to Care, Wellness, and Research and Innovation. **Manitoba received a grade of D**, emphasizing the need for action and innovation in arthritis care, specifically better arthritis data, increased funding of arthritis research, better access to arthritis care and greater public awareness.

As you begin your budget consultations, we are pleased to provide the following detailed recommendations:

- 1) Reduce wait times for joint replacement surgeries
- 2) Improve access to arthritis care and treatment options
- 3) Invest in research and innovative solutions to extinguish the fire of arthritis

1. 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 people with arthritis expected to balloon by 2035, 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 <u>CIHI data</u> shows that **67%** of Manitobans waiting for hip and knee replacements **did not** have their surgeries completed within the recommended time. This is a **13% increase** from 2021-2022.





This prolonged wait is leading to unnecessary pain and suffering for many Manitobans who are prevented from contributing to their families, communities, and workplaces. There are potential downstream health impacts that increased wait times have for people with arthritis waiting for joint replacement surgery, such as the increased use of opioids for pain relief.

We were glad to see the establishment of a new centralized waitlist system and plans for future updates to the system. As the government continues its work to eliminate surgical backlogs, we urge the government to prioritize the thousands of Manitobans waiting for joint replacements. We encourage the government to consider the innovative and concrete recommendations in Arthritis Society Canada's report The Wait: Addressing Canada's Critical Backlog of Hip and Knee Replacement Surgeries.

One key recommendation in the report is to provide access to community-based joint management programs, such as GLA:D, that can help people with osteoarthritis manage their condition. These programs have been shown to help delay or reduce the need for joint replacement surgery. Effective person-centred care is essential, and we would welcome the opportunity to share further details on this program and other recommendations and to have an active role in helping to solve this crisis.

2. Improve access to arthritis care and treatment options

Access to Care

Too many people are not receiving the right treatment at the right time. Timely access to primary care and specialists, as well as programs and services in communities across Manitoba to manage arthritis symptoms and pain, are urgently needed. This is especially important in rural and remote areas and underserved populations.

The Report Card highlights the need for more rheumatologists today and with the number of Manitobans with arthritis expected to rise to 300,000 by 2035, it is critical that Manitoba explore different models of care. One approach is team-based care involving Advance Clinician Practitioner in Arthritis Care (ACPAC) that can help diagnosis and treatment of arthritis. ACPACtrained extended role practitioners (ERP) working with primary care and specialists can reduce wait times and ensure people are directed to appropriate care. For inflammatory arthritis it is especially critical that treatment begin early to avoid permanent joint damage.

Access to screening for eye toxicity

A specific concern is that the screening for eye toxicity for arthritis patients on the medication hydroxychloroquine is not publicly funded in Manitoba. The drug is well tolerated and effective for patients but there are rare instances of toxicity to the eyes with prolonged use.





To monitor this, optometrists and ophthalmologists can screen for eye-toxicity using a machine called OCT (optical coherence tomography). It can detect early changes allowing time to stop the drug before the patient develops symptoms/visual loss. Manitoba health covers the referral to eye specialists for monitoring but does not cover the cost of that test. People who don't have private or group benefits or are unable to pay out of pocket for the screening will lose access to that drug. Other provinces cover the cost of the test. We ask that Manitoba consider funding the test and work with clinicians to develop eligibility criteria for the testing.

Access to Treatment and Biosimilar Policy

As there is no cure for arthritis, access to medications is critical for people living with arthritis. To manage their condition, people living with arthritis need access to their prescribed medications without financial or administrative barriers or risk of shortages. The right treatment plan can significantly improve quality of life and allow people to lead near normal lives. In the case of inflammatory arthritis, for example, treatments are still very much trial and error: what works for one person may not for another, and it's about finding the right treatment at the right time. A range of choices and solutions is therefore critical.

Arthritis Society Canada supports the use of biosimilars in the care and management of inflammatory arthritis. Biosimilars provide additional choices for those living with inflammatory arthritis and can lower health care costs and increase access to treatment. Manitoba is currently the only province that has a tiered biologics policy. Biosimilar policies in other provinces have shown to be successful cost-effective options for treatment. We encourage the government to collaborate with the arthritis community to develop an updated biosimilar policy for Manitoba.

3. Invest in research and innovative solutions to extinguish the fire of arthritis

Funding for arthritis research has flatlined or declined over the last 14 years. Musculoskeletal disease has the highest cost due to illness and arthritis is a major contributor. Advances in research, as demonstrated through development of life-changing biologics, are essential to improving prevention, early detection, health outcomes, and quality of life for all people in Canada living with arthritis.

Arthritis Society Canada has increased its research investment and launched an Innovation Strategy. Building up investment in arthritis research and innovative technologies should be a priority and included in Manitoba's life sciences strategy.

CONCLUSION

In closing, we urge the Government of Manitoba to implement our key 2024 pre-Budget recommendations that will add cost-effective sustainability to the healthcare system and support a healthy population of Manitobans.





About Arthritis Society Canada

Arthritis Society Canada is dedicated to extinguishing arthritis. We represent the six million Canadians living with arthritis today, and the millions more who are impacted or at risk. Fueled by the trust and support of our donors and volunteers, Arthritis Society Canada is fighting the fire of arthritis with research, advocacy, innovation, information and support. We are Canada's largest charitable funder of cutting-edge arthritis research. We will not give up our efforts until everyone is free of the scorching pain of arthritis. Arthritis Society Canada is accredited under Imagine Canada's Standards Program.



