

**ARTHRITIS SOCIETY**  
**NOVA SCOTIA 2021-22 PRE-BUDGET SUBMISSION**  
**TO MINISTER OF FINANCE AND TREASURY BOARD**

December 11, 2020



PRAIRIE REGION |

Charitable Number: 10807 1671 RR0003

| [arthritis.ca](http://arthritis.ca)



## INTRODUCTION

We appreciate the opportunity to contribute to the Government of Nova Scotia 2021-22 pre-budget consultations.

The Arthritis Society is a national health charity that gives voice to the 6 million Canadians with arthritis, 1 in 5 of us, and one in two seniors, and there is no cure. In Nova Scotia, 210,000 Nova Scotians live with arthritis, 1 in 4, a higher prevalence than most other provinces. Arthritis is a collection of conditions affecting joints and other tissues, and it can cause excruciating pain, limit the ability to walk and move, interrupt sleep, and significantly diminish quality of life for patients.

Arthritis is the second most common chronic health condition in Nova Scotia and is also the leading cause of long-term disability in the country and can severely impact a person's ability to participate in the labour force.

As Canada continues to battle the COVID-19 pandemic, it is vital that we take steps to support the Nova Scotians living with arthritis, many of whom have encountered significant hardship during the crisis. In this context, the Arthritis Society respectfully provides the following recommendations for the 2021-22 Nova Scotia budget consultation:

- 1) Develop and implement a coordinated plan to address COVID-related backlog of joint replacement surgeries
- 2) Ensure access to a range of treatment options for Nova Scotians living with arthritis, and
- 3) Stop the taxation of medical cannabis and enable its distribution through pharmacies.

### **1) Develop and implement a coordinated plan to address COVID-related backlog of joint replacement surgeries**

As we continue to confront COVID-19, a new health challenge is emerging — an alarming backlog of joint replacement surgeries. Arthritis is the leading cause of joint replacement, including over 99% of knee replacements and over 80% of hip replacements. While Nova Scotia is performing better than some provinces, we are still not hitting the medically recommended target wait time of six months for joint replacement surgeries. According to the 2019 [Canadian Institute for Health Information](#) (CIHI) wait times data, in Nova Scotia only 47% knee replacements and 59% of hip replacements were completed within the medically recommended target of six months. As well, according to the [CIHI](#) data there is inconsistency across the province in meeting the targets, with some regions having a much lower percentage meeting the six-month target.

The COVID-19 pandemic has greatly exacerbated this issue through the delay or cancellation of even more surgeries. While we understand the need to do this, this will unfortunately lead to unnecessary pain and suffering for many Canadians who are prevented from contributing to their families, communities, and workplaces. There are also concerns about the downstream health impacts that increased wait times could have for arthritis patients waiting for joint replacement surgery, such as the increased use of opioids for pain relief. Surgery delays are not only devastating for individuals but can also lead to significant additional costs for the healthcare system due to the co-morbidities associated with the disease, including weight gain, diabetes, heart and circulatory issues, mental health conditions, and other compounding health challenges.

A typical knee or hip joint replacement surgery costs the health care system roughly \$11,000. With that investment, most patients can return to normal functioning, contributing to their families, communities, and workplaces. The short-term solution is to continue to invest to bring Nova Scotia up to standard through increasing volumes and supporting triage or assessment clinics that provide quicker patient assessment for joint replacement, especially in challenged regions. In the longer term, the province should seek innovative approaches to reduce the burden of surgery, and develop and/or fund alternatives to prevent damage due to arthritis and regenerate joint tissues before joint replacement becomes necessary; for example, GLA:D programs, physiotherapy, nutrition and weight management programs.

The Arthritis Society is also advocating federally, asking the Government of Canada to work with provinces and territories to address this urgent health crisis and to provide dedicated funding through an increase in the Canada Health Transfer to expand capacity for joint replacement surgeries. The Society is also putting together a pan-Canadian Working Group to develop tangible solutions and we will share our recommendations in early 2021.

## **(2) Ensure access to a range of treatment options for Nova Scotians living with arthritis**

There is no cure for arthritis. Pharmacological treatments play an important role in management of the condition, which typically persists for many years, if not a lifetime. It is vital that there be a range of treatment options available, as people with arthritis respond differently to different treatments. 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; it is about finding the right treatment at the right time. A range of choices and solutions is therefore critical.

As governments look for more cost-effective options for treatments with strong clinical evidence, Arthritis Society believes that [biosimilars](#) have a role to play in the care and management of inflammatory arthritis. Biosimilars provide additional choices for those living with inflammatory arthritis and have the potential to lower health care costs and increase access to treatment. Public and prescriber education on biosimilars is important and should be supported by the government.

It is vital that key stakeholders be engaged and involved in the development of or changes to provincial drug programs or policies. The Arthritis Society is ready to work with government to ensure arthritis patients have access to the medicines they need.

### **(3) Stop the taxation of medical cannabis and enable its distribution through pharmacies**

Many people with arthritis rely on medical cannabis for pain and symptom management; a recent Statistics Canada report showed that many of those cannabis users are seniors. Although cannabis for medical purposes is authorized by healthcare practitioners as a medicine, it is not treated as such in key aspects of policy around access and affordability.

Applying any tax to cannabis for medical purposes is inconsistent with the taxation of prescription drugs and medical necessities. We encourage you to remove the provincial sales tax for medical cannabis.

Enabling the distribution of medical cannabis through pharmacies will create a clear distinction between medical cannabis and cannabis for other uses and will help to ensure that patients receive reliable education on safe and effective use from trained healthcare professionals. This will also help facilitate reimbursement by health insurance plans.

#### **CLOSING**

In closing, we urge the Nova Scotia Government to consider our three key recommendations that can help keep Nova Scotians with arthritis moving and healthy – reducing the cost to the healthcare system today and tomorrow. We would welcome the opportunity to elaborate on these recommendations by providing oral testimony before the Legislature and/or finance committee.

Sincerely,

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#### **About the Arthritis Society**

The Arthritis Society is Canada's largest charitable source of investment in cutting-edge arthritis research, and a leader in proactive advocacy, education and support towards delivering better health outcomes for people affected by arthritis. Safety and improved care are our top priorities, with our advocacy focused on improving access to care, timeliness of care, and innovative research. The Arthritis Society is accredited under Imagine Canada's Standards Program.

