

# Speaking out for public pharmacare

by Julie White

Canada is one of the last remaining industrialized countries that does not provide publicly-funded prescription drug care for its citizens. Your union has been working with the Canadian Health Coalition to make public pharmacare a reality. And this June, when the Federal-Provincial-Territorial Task Force on Pharmaceutical Strategies makes its report, we will be watching closely. CFNU members can also make their voices heard.

## Here's what you need to know:

- Drug costs are rising by three times the rate of inflation, threatening both the public medicare system and negotiated benefit plans.
- Drug claims are 70% of the cost of our workplace extended health benefit plans and the premiums are rising by 15% a year, (i.e., doubling every five years).
- Most of the rising cost of drugs (80%) is the result of expensive "me-too" drugs that are the same as existing drugs, but with a new name and a higher price.
- To be approved, drugs need only be better than a placebo, not better than existing drugs and only 10-15% of the drugs approved are actually new drugs.
- The Health Canada drug approval agency is 58% funded by drug companies.
- Drug companies spend three times more on advertising and promoting their drugs than on research for new cures.
- Drug companies spend over \$35,000 per physician per year on sales reps, information, giveaways, trips, and conferences to promote their drugs.
- Pharmaceutical companies are among the most profitable in the world.
- Only 58% of workers have a work-based drug plan and provincial government plans vary.
- Three million Canadians are uninsured or under-insured for drugs.

## Along with the Canadian Health Coalition, CFNU has been pressuring governments to:

- Recognize drugs as an integral part of health care and have them covered like hospitals and physicians under the Canada Health Act.
- Join all other industrialized countries (except the US), which have national, public pharmacare plans.
- Control costs through a public plan with reduced administration costs, the strength to negotiate lower

## PRESCRIPTIONS



"This is one of those new miracle drugs.  
If you can afford it, it's a miracle."

prices in a single payer system and the ability to provide independent information to physicians.

- Establish an independent drug approval and monitoring process, taking into account cost effectiveness as well as medical effectiveness.
- Resist the pressure to allow more advertising and promotion of drugs and strengthen our restrictions.
- Get everyone covered for the drugs they need, regardless of where they work or live.

## Here's what you can do:

- Join with the Canadian Health Coalition (CHC) to lobby for a national pharmacare plan. The list of contacts across the country follows.
- Check out the CHC document, supported by the CFNU, other unions and social action groups: "More for Less: A National Pharmacare Strategy". You'll find it at [www.healthcoalition.ca](http://www.healthcoalition.ca) or at [www.cfnu.ca](http://www.cfnu.ca).
- Lobby your provincial minister for health about their role in the task force and make it clear that you support national, public pharmacare. Let them know that the task force, due to report in June 2006, should recommend a national public pharmacare plan. (Note: Quebec is not participating in this task force.)

(Julie White is a national representative with the CEP's research department.)

## CHC contacts

### Canadian Health Coalition

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### Health Coalition of Newfoundland & Labrador

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### Nova Scotia Citizen's Health Action Coalition

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### PEI Health Coalition

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### New Brunswick Health Coalition

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### Alberta Friends of Medicare

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### BC Health Coalition

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