

Prime Minister Justin Trudeau
Office of the Prime Minister
80 Wellington Street Ottawa, ON
K1A 0A2
pm@pm.gc.ca

Aug 13, 2020

Dear Prime Minister,

We are writing to you today to ask you to bring attention and resources to Canada's drug supply challenges. These shortages have existed for the past decade but have been greatly exacerbated due to the COVID-19 pandemic.

As frontline pharmacists and physicians, we have seen and heard of serious shortages of essential, critical medications. These drugs are often used simultaneously in ORs, ERs and palliative care wards, as well as ICUs. And while our ICUs are thankfully seeing fewer COVID-19 patients, the pandemic has been placing a heavy burden on their drug supply, where patients often require weeks' worth of treatment on ventilators.

The shortages of these drugs imperil the lives of patients seeking care all over the country. Currently, the vast majority (24/32) of the drugs on Health Canada's own [Tier 3 list](#), which represents drugs for which there are no suitable alternatives, are essential for treating COVID-19. With the likely upcoming second wave in Canada, the potential for further exacerbation of these shortages is inevitable unless we implement rigorous preparedness measures.

At first glance, the federal government may conclude that this is a provincial and territorial area of jurisdiction. We can assure you, that there is a considerable role for the federal government to play on this issue of national concern if you so choose to take action. We believe you should.

Many of these critical care drugs should be part of the [National Strategic Emergency Stockpile](#). However, it is clear that Canada simply did not invest enough into its stockpiles to meet the demand during the COVID-19 pandemic. In order for the stockpiling strategy to be effective, it is vital that the federal, provincial, and territorial governments work closely with hospitals, long-term care facilities, hospices and primary care facilities nationwide to establish a

comprehensive list of critical medicines and develop a plan to procure medicines in a coordinated manner to prevent unintended competition for resources.

The 2019 budget had earmarked funds for a new Canada Drug Agency which would have oversight over a national formulary. This proposed agency could similarly identify essential medicines to aid in an efficient stockpiling response, whether through stimulating domestic production or through importation and coordination of purchasing strategies to ensure that jurisdictions that have a greater need for medications gain access to them. We know that COVID-19's impact on the health system across provinces and territories and within each and every jurisdiction was not equal or consistent.

We appreciate the active efforts of Health Canada to resolve current or projected shortages of critical drugs through its Tier Assignment Committees. Furthermore, Ontario has a Critical Care COVID-19 Command Centre and has created a Critical Care Drug Shortage Task Team. Certainly, the short-term deficit will need to be resolved through this mechanism and importing from all available suppliers. However, to support the system at large, provincial and territorial governments will need national support, resources and (where welcomed by provinces) a certain level of national coordination.

Regardless of well-established Federal-Provincial-Territorial dynamics, without concrete preventative action, Canada will perpetually face drug shortages. This is why we recommend that your government commit to working on a long-term solution involving a three-pronged strategy:

1. Stockpiling of a Critical Medications List which the government commits to ensuring are always in stock for long enough to meet the needs in an emergency (likely through the Canada Drug Agency).
 - a. A Critical Medications List would allow the parties involved in addressing the drug shortages to have a clear picture of what drugs to monitor closely, and provides a more comprehensive approach to the problem.
2. A publicly owned generic, critical drugs manufacturer, or at the bare minimum, public support for spare capacity by Canadian-based and controlled drug manufacturers to be used for critical drugs.
 - a. This manufacturer or manufacturers would specialize in manufacturing the critical drugs on the Critical Medications List, and would be primarily involved in satisfying significant portions of our national demands.
3. Greater transparency and communications to and from governments and the health sector around the essential drug supply. This would include efforts to

better track the supply of drugs in hospitals across the country and push notifications on shortages through the appropriate channels to frontline workers.

We encourage your government to give this urgent issue attention and efforts now, so that Canadians can have the confidence that their healthcare system will be there when they most need it.

Sincerely,

Abdul Basith, MD CCFP, Emergency Physician at Markham Stouffville Hospital,
Founder, Critical Drugs Coalition
Alecs Chochinov, MD, FRCPC, President, Canadian Association of Emergency
Physicians

Amit Arya, MD, CCFP (PC), FCFP, Assistant Clinical Professor, Division of Palliative
Care, Faculty of Health Sciences, McMaster University

Andrew Gloster, MD, PhD, Chief of Staff, Red Lake Margaret Memorial
Cochonour Hospital Carter Thorne, MD FRCPC FACP MACR, Assistant Professor
of Medicine, University of Toronto Chris Simpson, BSc, MD, FRCPC, FACC, FHRS,
FCCS, FCAHS, Professor, Queens University School of Medicine

Danielle Martin, MD CCFP, MPP, Associate Professor, University
of Toronto Danyaal Raza, MD CCFP, Chair, Canadian Doctors
for Medicare

Jacalyn Duffin, MD, PhD, Professor Emerita, Queens University

Joel Lexchin, MD, CCFP(EM) FCFP, Professor Emeritus, York
University Joshua Tepper, MD FCFP, MPH, MBA, Professor,
University of Toronto

Kashif Pirzada, MD CCFP(EM), Emergency Physician at William Osler
Health System and Sunnybrook Health Sciences Centre, Founder Critical
Drugs Coalition

Melanie Bechard, MD, FRCPC, Pediatric Emergency Medicine, Children's Hospital
of Eastern
Ontario (CHEO)

Naheed Dosani, MSC, MD, CCFP(PC), Assistant Clinical Professor, McMaster
University

Nav Persaud, MD, MSc, CCFP, Canada Research Chair in Health Justice,
Associate Professor, University of Toronto Department of Family and
Community Medicine

Philip Baer, MDCM, FRCPC, FACR, President, Ontario Rheumatology
Association (ORA) Philip Berger, MD, Associate Professor University of
Toronto Faculty of Medicine

Rameeka Khan, R.Ph, Clinical Pharmacist at Markham-Stouffville Hospital,

Member, Critical Drugs Coalition
Saad Ahmed, MD CCFP, Lecturer, University of Toronto, Department of Family & Community Medicine, Founder, Critical Drugs Coalition
Sandy Buchman, MD CCFP (PC) FCFP, President, Canadian Medical Association
Sara Van Der Loo, MD, FCFP, FRRMS, Chief of Staff, Atikokan General Hospital
Sarah Newbery, MD FCFP, Chief of Staff, North of Superior Health Care Group
Sean Moore, MD, FRCPC, Assistant Professor, Northern Ontario School of Medicine, Board of Directors, Canadian Association of Emergency Physicians
Sohail Gandhi, MD, CCFP, Immediate Past President of the OMA
Stephen B Singh, MD, CCFP(PC), Family Physician and Palliative Care Specialist

Canadian Association of Emergency
Providers
Canadian Doctors for
Medicare
Canadian Federation of Medical
Students
Critical Drugs Coalition
Ontario Medical
Association
Ontario
Pharmacists Association
Society of Rural Physicians of

Canada Cc:

The Honourable Bill Morneau
The Honourable Carla
Qualtrough
The Honourable
Jean-Yves Duclos
The
Honourable Kirsty Duncan
The Honourable Mary Ng
The Honourable Navdeep Bains