A healthy population and a vibrant medical profession
Une population en santé et une profession médicale dynamique
The Canadian Medical Association (CMA) is the national voice of Canadian physicians. Founded in 1867, CMA’s mission is to serve and unite the physicians of Canada and be the national advocate, in partnership with the people of Canada, for the highest standards of health and health care.

On behalf of its more than 76,000 members and the Canadian public, CMA performs a wide variety of functions. Key functions include advocating for health promotion and disease/injury prevention policies and strategies, advocating for access to quality health care, facilitating change within the medical profession, and providing leadership and guidance to physicians to help them influence, manage and adapt to changes in health care delivery.

The CMA is a voluntary professional organization representing the majority of Canada’s physicians and comprising 12 provincial and territorial divisions and 51 national medical organizations.
Toward a Dementia Strategy for Canada

Introduction
As Canada’s population ages, concern is growing about the capacity of our health care system to respond to the increased demands that will be placed on it. Of particular concern is the capacity to deal with an expected surge in the prevalence of Alzheimer’s disease and other dementias, a major cause of disability in Canadians aged 65 and older.

The Canadian Medical Association (CMA) shares this concern. In August 2012, CMA’s General Council passed a resolution supporting the development of a national dementia strategy.

Background
About three quarters of a million Canadians currently live with Alzheimer’s disease and other forms of dementia and cognitive impairment. People with dementia may live for years with the condition, and will eventually need round-the-clock care. Our knowledge of how to prevent dementia is limited, and we do not fully understand its causes. Though treatments are available that may delay progression of the patient’s condition, there is no known cure. Dementia currently costs Canada roughly $33 billion per year, both in direct health care expenses and in indirect costs, such as lost earnings of the patient’s caregivers.

Since the number one risk factor for dementia is age, there is no question that with the aging of Canada’s population, its prevalence will increase. The Alzheimer Society of Canada predicts that by 2031, 1.4 million Canadians will have dementia, and by 2040 the annual cost to the country will reach $293 billion.

Other countries, including Australia, Norway, Netherlands, France, and the United Kingdom, have developed national strategies to address the dementia epidemic. CMA recommends strongly that Canada join this list. A national strategy could address issues of pressing concern such as

- The need for research on the prevention and treatment of dementia;
- The occupation of acute-care hospital beds by patients with dementia while awaiting placement in more appropriate long-term care settings. This both increases health-care costs and exacerbates Canada’s waiting-list problem, blocking hospital beds which could otherwise be used for other patients.
- The emotional and financial burden faced by spouses, children or other informal caregivers of patients with dementia.

A Dementia Strategy for Canadians
Given the terrible toll that dementia currently takes on Canadians and their health care, and given the certainty that this toll will grow more severe in coming decades, the CMA believes that it is vital for Canada to develop a focused strategy to address it.

The Alzheimer Society of Canada recommends that a national dementia strategy encompass the following elements:
1. Increased investment in research on key aspects of dementia, including prevention, treatment options, and improving quality of life.
2. Increased support for informal caregivers. This should take several forms.
a. Financial support. The 2011 federal budget introduced a Family Caregiver Tax Credit of up to $300 a year. However, this does not adequately reimburse the cost of a caregiver’s time, which studies have shown is often much higher.

b. Programs to relieve the stress experienced by caregivers; this can include education and skill-building, and the provision of respite care and other support services.

3. An emphasis on brain health and risk reduction, early diagnosis and intervention.

4. An integrated system of care facilitated by effective co-ordination and case management.

5. A strengthened dementia workforce, which includes both developing an adequate supply of specialists and improving the diagnosis and treatment capabilities of all frontline health professionals.

The Government of Canada has supported similar condition-specific strategies, most recently the Canadian Cancer Strategy, initially funded in 2006 and renewed for five years beyond 2012. This strategy focuses on prevention and screening, early detection, clinical care, supporting the patient’s journey, targeted research, and work with the First Nations, Inuit and Metis communities. We believe that a national strategy for dementia, bringing together partners such as the Alzheimer Society of Canada, the Canadian Institutes of Health Research (Institute of Aging), the Canadian Caregiver Coalition, and other patient and health professional groups, will enhance the ability of our health care system to respond to the coming dementia epidemic in a compassionate and cost-effective manner.

In 2012, the Canadian Institutes of Health Research (Institute of Aging) and the Alzheimer Society of Canada have invested about $30 million in research. We propose that an initial investment in a National Dementia Strategy be $25 million per year for five years: $10 million for research, $10 million for caregiver support and respite care, and $5 million for knowledge transfer, partnership development and administrative support.

Therefore the Canadian Medical Association recommends:

That the Government of Canada fund the development and implementation of a National Dementia Strategy for an initial five-year period.

The CMA is ready to work with governments, patients and their families, health professional associations and other stakeholders to make this recommendation a reality.

Sources:
Alzheimer Society of Canada. A New Way of Looking at Dementia in Canada. Based on a study conducted by RiskAnalytica. C. 2010