CMA Recommendations on Vaccine Equity and Intellectual Property
https://policybase.cma.ca/link/policy14476

POLICY TYPE
Parliamentary submission

DATE
2022-05-13

TOPICS
Ethics and medical professionalism
Pharmaceuticals, prescribing, cannabis, drugs
Population health, health equity, public health

Documents

CMA Recommendations on Vaccine Equity and Intellectual Property
House of Commons Standing Committee on Foreign Affairs and International Development
May 11, 2022

CMA Policybase - Canadian Medical Association

https://policybase.cma.ca/link/policy14443

POLICY TYPE
Policy endorsement

DATE
2021-06-24

TOPICS
Pharmaceuticals, prescribing, cannabis, drugs
Population health, health equity, public health

Documents
Taking action on drug shortages during Covid-19 - open letter
https://policybase.cma.ca/link/policy14261

POLICY TYPE  Parliamentary submission
DATE  2020-08-13
TOPICS  Pharmaceuticals, prescribing, cannabis, drugs

Documents

[Image of open letter]

Aug 13, 2020

Dear [Recipient],

We are writing to urge taking action to address the drug shortages occurring in Canada and globally. These shortages have been exacerbated by the COVID-19 pandemic.

As health care providers, we have seen first-hand the impact of shortages on patient care. We urge policymakers to take action to address these shortages and ensure that patients receive the medications they need.

The shortage of key drugs is particularly concerning as we approach flu season. The Canadian Medical Association (CMA) has been working to ensure that hospitals have access to enough personal protective equipment (PPE) to safely treat patients.

The government must take immediate action to address the drug shortages. This includes increasing production, improving supply chains, and ensuring that patients have access to the medications they need.

We urge policymakers to work with stakeholders to develop a comprehensive plan to address drug shortages. This plan should include strategies to increase production, improve supply chains, and ensure that patients have access to the medications they need.

Sincerely,

[Signature]

Authorizing Cannabis for Medical Purposes
CMA Policybase - Canadian Medical Association
Authorizing Cannabis for Medical Purposes

POLICY TYPE Policy document
LAST REVIEWED 2020-02-29
DATE 2015-02-28
TOPICS Pharmaceuticals, prescribing, cannabis, drugs

Documents

Authorizing Cannabis for Medical Purposes

The purpose of this policy is to provide guidance to physicians on the appropriate use of cannabis for medical purposes.

The use of cannabis for medical purposes should be limited to conditions and situations where there is evidence of its effectiveness and where the benefits outweigh the risks. The use of cannabis for recreational purposes should be discouraged.

Physicians should be aware of the potential for cannabis to cause dependence and addiction, and should discuss the risks and benefits of its use with patients. They should also be aware of the potential for cannabis to interact with other medications, and should exercise caution when prescribing it.

Physicians should monitor patients who are prescribed cannabis for medical purposes, and should be prepared to adjust the dose and regimen as necessary. They should also be prepared to address any concerns or side effects that may arise.

References


Health Canada consultation on reducing youth access and appeal of vaping products
https://policybase.cma.ca/link/policy14078

**POLICY TYPE**
Response to consultation

**DATE**
2019-05-24

**TOPICS**
Pharmaceuticals, prescribing, cannabis, drugs
Population health, health equity, public health

**Documents**
Cannabis for Medical Purposes

https://policybase.cma.ca/link/policy10045

POLICY TYPE
Policy document

LAST REVIEWED
2019-03-03

DATE
2010-12-04

TOPICS
Pharmaceuticals, prescribing, cannabis, drugs

Documents

CANNABIS FOR MEDICAL PURPOSES

CMA POLICY

Limitations
This Canadian Medical Association (CMA) policy recognizes the urgent need for pain relief for a terminally ill or chronic disease for which conventional treatments have not been effective and in palliative care (see appendix B).

It is expected that the number of concerns, generally related to the lack of evidence to support cannabis use, will continue to rise. It is suggested that evidence be gathered for cannabis use, and the need for further research identified.

The 2010 guidelines for using cannabis in medical conditions have been reviewed and updated. Less information is available on non-prescription cannabis use.

Pharmaceutical and hospital cannabis use is limited to use for pain. In her comments, Dr. Robertson stated that it would be of interest to her to see that cannabis could be used for non-pain conditions. The Health and Social Services Board’s cannabis policies should be developed on a case-by-case basis, as well as the CMA’s positions on cannabis, in an effort to avoid oversight as outlined by Dr. Bonnycastle.

The CMA notes the following recommendations:

1. Increase support for the advancement of scientific knowledge about the medical use of cannabis, the CMA recommends the development of support for research on scientific aspects of cannabis use, including efficacy for therapeutic use, quality, dose-response relationships, adverse effects and the non-effect of sex, age, and other factors.

2. Apply the same regulatory oversight and enforcement approaches to non-medical cannabis use as to other controlled substances, noted in the final report of the National Drug Strategy, designed to protect the public by preventing and deterring use, particularly among the young.

3. Increase support for public education programs for medical personnel and for the public. These programs should be evidence-based, and consider the potential for public abuse of cannabis in the workplace.
**MEDICATION USE AND SENIORS**

(Update 2017)

Status: Canadian physicians are the front-line providers of health care and are well positioned to address medication use and seniors. Medication use is a complex issue with many factors affecting practice patterns and patient outcome. This policy outlines the Canadian Medical Association’s (CMA) position on medication use and seniors, providing guidance and recommendations for practitioners.

### Main Points
- **Policy Context**: Addressing medication use in seniors is crucial for optimal health outcomes.
- **Guidelines**: Recommendations for improved medication use, including the use of electronic prescribing and the importance of patient education.
- **Medication Management**: Strategies for managing polypharmacy and avoiding medication errors.

### Documents

- **Vision for e-Prescribing**: A joint statement by the Canadian Medical Association (CMA) providing guidance on electronic prescribing.
- **CMA Policybase**: Additional resources and policy statements relevant to medication use and seniors.

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**Vision for e-Prescribing**

A joint statement by the Canadian Medical Association (CMA) providing guidance on electronic prescribing for improved safety and efficiency in medication management. The statement emphasizes the role of technology in facilitating better communication between healthcare providers and patients, enhancing medication safety, and reducing medication errors.

**CMA Policybase**

Resources and policy statements relevant to medication use and seniors, including guidelines for prescribers and recommendations for patient education and medication management.

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**Policy Template**

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**Policy Document**

The Canadian Medical Association (CMA) policy on medication use and seniors highlights the need for comprehensive approaches to address medication-related issues. This includes the development of guidelines for safe and effective medication use, patient education, and the implementation of technology solutions to improve medication management. The policy emphasizes the importance of collaboration among healthcare providers to ensure optimal care for seniors.
Vision for e-Prescribing: a joint statement by the Canadian Medical Association and the Canadian Pharmacists Association

https://policybase.cma.ca/link/policy10670

POLICY TYPE  Policy document
LAST REVIEWED  2019-03-03
DATE  2012-12-08
TOPICS  Health information and e-health
Pharmaceuticals, prescribing, cannabis, drugs

Documents
Health Canada consultation on edible cannabis, extracts & topicals
https://policybase.cma.ca/link/policy14020

POLICY TYPE: Response to consultation
DATE: 2019-02-20
TOPICS: Pharmaceuticals, prescribing, cannabis, drugs
Population health, health equity, public health

Documents
Health Canada consultation on Canadian drugs and substances strategy
https://policybase.cma.ca/link/policy14017

POLICY TYPE                    Response to consultation
DATE                          2018-12-04
TOPICS                        Pharmaceuticals, prescribing, cannabis, drugs
Population health, health equity, public health

Documents
Implementation of National Pharmacare
https://policybase.cma.ca/link/policy13933

POLICY TYPE  Response to consultation
DATE          2018-10-02
TOPICS        Health care and patient safety
              Pharmaceuticals, prescribing, cannabis, drugs

Documents
Health Canada consultation on tobacco products regulations (plain and standardized appearance)
https://policybase.cma.ca/link/policy13930

POLICY TYPE: Response to consultation
DATE: 2018-09-06
TOPICS: Health care and patient safety, Pharmaceuticals, prescribing, cannabis, drugs

Documents
Support life-saving supervised consumption and overdose prevention sites: open letter to Premier Doug Ford and Health Minister Christine Elliott
https://policybase.cma.ca/link/policy13931

POLICY TYPE
Policy endorsement

DATE
2018-08-30

TOPICS
Pharmaceuticals, prescribing, cannabis, drugs

Documents

August 8, 2018

Dear Premier Ford and Minister Elliott,

We urge your government to act immediately to prevent deaths by overdose and to save lives.

The recent tragic deaths of two women and a man in the city of Toronto highlight the urgent need for action.

Supervised consumption and overdose prevention sites (SCOPS) are recognized as an evidence-based harm reduction strategy.

They provide a safe, non-judgmental space for people to consume drugs under medical supervision.

SCOPS also offer essential health and social services, such as access to naloxone, to prevent overdose.

Multiple studies, including randomized controlled trials, have shown that SCOPS lead to:

- A decrease in deaths by overdose
- A reduction in drug-related emergency department visits
- An increase in opioid addiction treatment

In light of this evidence, we call on your government to immediately establish SCOPS in Ontario.

We thank you for your attention to this critical public health issue.

Yours sincerely,

[Signature]
Health Canada consultation on regulatory amendments regarding tramadol
https://policybase.cma.ca/link/policy13927

POLICY TYPE: Response to consultation
DATE: 2018-08-14
TOPICS: Pharmaceuticals, prescribing, cannabis, drugs

Documents
Health Canada consultation on restriction of marketing and advertising of opioids
https://policybase.cma.ca/link/policy13921

POLICY TYPE  Response to consultation
DATE  2018-07-18
TOPICS  Pharmaceuticals, prescribing, cannabis, drugs

Documents
Consultation on proposed front-of-package labelling
https://policybase.cma.ca/link/policy13882

POLICY TYPE
Response to consultation

DATE
2018-04-23

TOPICS
Health care and patient safety
Pharmaceuticals, prescribing, cannabis, drugs

Documents
Bill C-45: The Cannabis Act
https://policybase.cma.ca/link/policy13861

POLICY TYPE   Parliamentary submission
DATE          2018-04-18
TOPICS        Pharmaceuticals, prescribing, cannabis, drugs

Documents

CMA Submission:
Bill C-45: The Cannabis Act

Submission to the Senate Standing Committee, Social Affairs, Science & Technology

April 18th, 2018
CMA’s Recommendations for Bill S-5 An Act to amend the Tobacco Act and the Non-smokers’ Health Act and to make consequential amendments to other Acts

https://policybase.cma.ca/link/policy13918

POLICY TYPE
Parliamentary submission

DATE
2018-02-15

TOPICS
Pharmaceuticals, prescribing, cannabis, drugs
Health care and patient safety

Documents
Proposed approach to the regulation of cannabis
https://policybase.cma.ca/link/policy13838

POLICY TYPE           Response to consultation
DATE                  2018-01-19
TOPICS                Pharmaceuticals, prescribing, cannabis, drugs

Documents
Excise duty framework for cannabis products
https://policybase.cma.ca/link/policy13799

POLICY TYPE  Response to consultation
DATE  2017-12-07
TOPICS  Pharmaceuticals, prescribing, cannabis, drugs

Documents