Non-prescription availability of low-dose codeine products

https://policybase.cma.ca/link/policy13734

POLICY TYPE  Response to consultation
DATE  2017-11-7
TOPICS  Pharmaceuticals, prescribing, cannabis, drugs

Documents

CMA Submission: Non-Prescription Availability of Low-Dose Codeine Products

Submission to the Health Canada consultation on the potential risks, benefits and impacts of changes to the regulations to the Controlled Drugs and Substances Act that would require all products containing codeine to be sold by prescription only.

November 7, 2017
CMA response to patented medicines regulations consultations
https://policybase.cma.ca/link/policy13690

POLICY TYPE  Response to consultation
DATE  2017-06-28
TOPICS  Pharmaceuticals, prescribing, cannabis, drugs

Documents

Canada's lower-risk cannabis use guidelines (LRCUG)
https://policybase.cma.ca/link/policy13726

POLICY TYPE  Policy endorsement
DATE  2017-05-26
TOPICS  Pharmaceuticals, prescribing, cannabis, drugs

Documents
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/policy13641

POLICY TYPE
Parliamentary submission

DATE
2017-04-07

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

Documents
CMA submission to the study of Bill C-37
https://policybase.cma.ca/link/policy13617

POLICY TYPE  Parliamentary submission
DATE  2017-04-06
TOPICS  Pharmaceuticals, prescribing, cannabis, drugs

Documents
Consultation on the renewal of Federal Tobacco Control Strategy

https://policybase.cma.ca/link/policy13804

POLICY TYPE  Response to consultation
DATE  2017-04-05
TOPICS  Health care and patient safety
Pharmaceuticals, prescribing, cannabis, drugs

Documents

April 5, 2017

In consultation on the renewal of Federal Tobacco Control Strategy

On behalf of the Canadian Medical Association (CMA), I am responding to your request for consultation on an overview of the Federal Tobacco Control Strategy (FTCS) and on the consultation on the renewal of the Federal Tobacco Control Strategy. We are pleased to respond to your request.

The 2013 Canadian Community Health Survey reports that 27% of the population aged 15 and older smoke at least occasionally. However, at all ages, 2.9% of smokers suffer from chronic conditions that are or may be tobacco-related. Various announcements over the past 20 years have failed to reduce the burden of tobacco on the health system.

We support the Stolberg & Sevigny treatment goal of less than 5% tobacco use by 2025. It must be acknowledged that important subgroups, such as Indigenous populations, have unique tobacco use patterns that are influenced by local factors. These subgroups also experience the dire health consequences of smoking, including premature death, lung cancer, and post-traumatic stress. We also recognize that tobacco use is correlated with poverty, socioeconomic status, and ethnicity.

Despite some progress, tobacco use has remained prevalent across the country. The lack of effective strategies to stop these trends is evident.

As the Burtman suggests, a renewed driving must go beyond the traditional approaches of increased tobacco taxes and fines in order to reduce smoking. However, offering more assistance and effort towards increasing the rate of smokers to stop smoking is crucial.

The CMA believes that improving the percentage of quitting rates, tobacco control measures, and support for those trying to quit are essential. We are committed to working with all levels of government to support tobacco control initiatives.
Position statement on prescription drug shortages in Canada
https://policybase.cma.ca/link/policy10756

POLICY TYPE
Policy document

LAST REVIEWED
2017-03-04

DATE
2013-05-25

TOPICS
Pharmaceuticals, prescribing, cannabis, drugs

Documents
Regulation of Self-Care Products in Canada

https://policybase.cma.ca/link/policy13802

POLICY TYPE  Response to consultation
DATE  2016-10-31
TOPICS  Pharmaceuticals, prescribing, cannabis, drugs

Health care and patient safety

Documents
Statement to the House of Commons Committee on Health addressing the opioid crisis in Canada
https://policybase.cma.ca/link/policy13936

POLICY TYPE  Parliamentary submission
DATE  2016-10-18
TOPICS  Pharmaceuticals, prescribing, cannabis, drugs
Population health, health equity, public health
Health care and patient safety

Opening Statement

House of Commons
Standing Committee on Health

Dr. Jeff Blackmer
Vice-President, Medical Professionals
Canadian Medical Association
Ottawa
October 18, 2016

Check against delivery
Legalization, regulation and restriction of access to marijuana

https://policybase.cma.ca/link/policy11954

POLICY TYPE
Response to consultation

DATE
2016-08-29

TOPICS
Pharmaceuticals, prescribing, cannabis, drugs

Documents

CMA Submission
Legalization, Regulation and Restriction of Access to Marijuana

Government of Canada – Task Force on Marijuana Legalization and Regulation

August 29, 2016

STATEMENT | DÉCLARATION

Chief Statement - Application d’Étiquetage

Dear Dr. Sapers - September 9, 2016 - The CMA’s submission to the Task Force on Marijuana Legalization and Regulation echoes the extensive work detailed in the recent CMA position paper regarding regulation of cannabis. While the focus of our submission is the health and safety implications for the legal market, the principles we employ extend to future regulations of other substances.

A key principle in the CMA’s position paper is that health and safety must be at the forefront of regulatory decisions. This is reflected in the CMA’s endorsement of plain and standardized packaging, which the Task Force has acknowledged. As the Task Force moves forward, we encourage consideration of the concerns outlined below.

The CMA recommends that any new legislation regarding cannabis recognize the unique challenges faced by patients. In particular, health care professionals and patients should be informed of the complete range of expected medical benefits and harms associated with cannabis use.

In summary, the proposed legislation should recognize the potential for unintended harms while also supporting the potential for medical benefit.

For more information, please see our position paper, "Recreational Cannabis Use in Canada: The Next 20 Years" (April 2016).

CMA

Canadian Medical Association

CMA Policybase - Canadian Medical Association
Health Canada’s Consultation on “Plain and Standardized Packaging”
https://policybase.cma.ca/link/policy13817

POLICY TYPE
Response to consultation

DATE
2016-08-12

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

Documents

August 12, 2016

Dear...,

The Canadian Medical Association (CMA) is pleased to submit the following response to Health Canada’s Consultation Paper “Plain and Standardized Packaging”. We support the objective of making the use of cannabis, tobacco, alcohol and other illicit substances safer and healthier through the implementation of plain and unbranded packaging of cannabis in Canada.

The Government of Canada has been reviewing the potential measures to address the need for plain and unbranded packaging in the cannabis sector. This consultation paper is a significant step towards achieving this goal. The CMA, in line with the consultations held in the provinces of Ontario, Quebec and British Columbia, supports the plain and unbranded packaging of cannabis products.

The CMA believes that a clear and unbranded packaging can help in reducing the appeal of cannabis products to youth. It is essential to prevent the use of cannabis among young people to ensure their health and well-being.

The CMA is pleased to see that the consultation paper includes the provision for the elimination of certain features from the packaging. This will contribute to the reduction of the attractiveness of cannabis products to young people.

The CMA recommends that the consultation paper includes the provision for the elimination of certain features from the packaging. This will contribute to the reduction of the attractiveness of cannabis products to young people.

The CMA supports the implementation of plain and unbranded packaging as a step towards safer and healthier use of cannabis. We believe that this measure will help in reducing the appeal of cannabis products to youth and contribute to a healthier use of cannabis.

Sincerely,

CMA President

CMA Policybase - Canadian Medical Association
Consultation on the prescription drug list: Naloxone
https://policybase.cma.ca/link/policy11847

POLICY TYPE  Response to consultation
DATE  2016-03-19
TOPICS  Pharmaceuticals, prescribing, cannabis, drugs

Documents
Regulatory framework for the mandatory reporting of adverse drug reactions and medical device incidents by provincial and territorial healthcare institutions.

https://policybase.cma.ca/link/policy11814

POLICY TYPE  Response to consultation
DATE  2016-01-20
TOPICS  Pharmaceuticals, prescribing, cannabis, drugs
Health care and patient safety

Documents
CMA’s Response to Health Canada’s Public Consultation Guide to New Authorities in reference to Bill C-17, Protecting Canadians from Unsafe Drugs Act (Vanessa’s Law)

https://policybase.cma.ca/link/policy11599

POLICY TYPE: Response to consultation
DATE: 2015-06-08
TOPICS: Pharmaceuticals, prescribing, cannabis, drugs

Documents
COMPLEMENTARY AND ALTERNATIVE MEDICINE

UPDATE 2015

The Canadian Medical Association, as part of its mandate to promote the highest standards of health care and patient safety in Canada, is committed to ensuring access to appropriate treatment options. As such, the CMA endorses the position of the Ingredient Use in Medicine Act, which recognizes and supports the use of complementary and alternative medicine (CAM) by health care providers in their practice. This position is based on the following principles:

1. CAM should be integrated into patient care.
2. CAM providers should be regulated.
3. CAM research should be evidence-based.
4. CAM education should be standardized.

The CMA encourages health care providers to be knowledgeable about CAM and to discuss its potential benefits and risks with their patients. This includes providing information on the efficacy and safety of CAM therapies, as well as the potential for interaction with conventional medicines.

The CMA also encourages researchers to conduct high-quality research on CAM to better understand its effects and to inform clinical practice.

The CMA supports the development of policies and guidelines that promote the safe and effective use of CAM.

The CMA encourages health care providers to be familiar with the principles and practices of CAM and to provide evidence-based information to their patients.

The CMA supports the development of regulations and licensing requirements for CAM providers to ensure the safety and quality of CAM services.

The CMA encourages the integration of CAM into health care systems to improve patient outcomes.

The CMA supports the development of research funding and infrastructure to support CAM research.

The CMA encourages the development of training programs for CAM providers to ensure the competence of CAM practitioners.

The CMA supports the development of guidelines for the use of CAM in specific clinical contexts.

The CMA encourages the development of a national registry of CAM providers to facilitate patient access and to promote the safe and effective use of CAM.

The CMA supports the development of policies that recognize the role of CAM in health care delivery systems.

The CMA encourages the development of research funding and infrastructure to support CAM research.

The CMA supports the development of training programs for CAM providers to ensure the competence of CAM practitioners.

The CMA encourages the development of guidelines for the use of CAM in specific clinical contexts.

The CMA supports the development of a national registry of CAM providers to facilitate patient access and to promote the safe and effective use of CAM.

The CMA encourages the development of policies that recognize the role of CAM in health care delivery systems.

The CMA supports the development of research funding and infrastructure to support CAM research.

The CMA encourages the development of training programs for CAM providers to ensure the competence of CAM practitioners.

The CMA encourages the development of guidelines for the use of CAM in specific clinical contexts.

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The CMA encourages the development of policies that recognize the role of CAM in health care delivery systems.

The CMA supports the development of research funding and infrastructure to support CAM research.

The CMA encourages the development of training programs for CAM providers to ensure the competence of CAM practitioners.

The CMA encourages the development of guidelines for the use of CAM in specific clinical contexts.

The CMA supports the development of a national registry of CAM providers to facilitate patient access and to promote the safe and effective use of CAM.
Harms associated with opioids and other psychoactive prescription drugs
https://policybase.cma.ca/link/policy11535

POLICY TYPE
Policy document

DATE
2015-05-30

TOPICS
Pharmaceuticals, prescribing, cannabis, drugs

HARM ASSOCIATED WITH OPIOIDS AND OTHER PSYCHOACTIVE PRESCRIPTION DRUGS

Introduction
The harms associated with opioids are numerous and profound. Opioids are the most commonly prescribed class of medications in the world, with millions of prescriptions written annually. However, the use and misuse of opioids has led to a significant public health crisis, with increasing rates of addiction, overdose, and death. The opioid epidemic has had a profound impact on individuals, families, and communities across Canada, and has also led to a significant economic burden.

In recent years, there has been growing concern about the role of opioids in the development of addiction and the risk of overdose. The Canadian Medical Association (CMA) has been a strong advocate for approaches to reduce the harms associated with opioids, including increasing access to treatment and support services, and developing strategies to prevent and reduce opioid misuse.

Despite these efforts, the opioid epidemic continues to evolve, and there is a need for ongoing research and innovation to address this complex public health issue.

Policy
The CMA supports the development and implementation of policies and programs to reduce the harms associated with opioids. These policies should be evidence-based and should prioritize the health and well-being of individuals and communities. The CMA recommends the following actions:

1. Increase access to treatment and support services: The government should increase funding for opioid addiction treatment and support services, including medication-assisted treatment (MAT) and other evidence-based interventions. This will help reduce the harms associated with opioids and improve outcomes for individuals and communities.

2. Develop strategies to prevent and reduce opioid misuse: The government should develop and implement evidence-based strategies to prevent and reduce opioid misuse, including education programs and targeted interventions for high-risk populations.

3. Support research: The government should support research to identify effective strategies for reducing the harms associated with opioids, and to better understand the epidemiology of opioid use and misuse.

4.Promote harm reduction strategies: The government should promote harm reduction strategies, such as the safe consumption of opioids, to reduce the harms associated with opioids.

5. Increase public awareness: The government should increase public awareness about the risks and harms associated with opioids, and promote strategies for safe and responsible use.

The CMA encourages all levels of government to work together to address the opioid epidemic and to ensure that individuals and communities have access to the care and support they need to address the harms associated with opioids.
Bill C-2 An Act to amend the Controlled Drugs and Substances Act (Respect for Communities Act)
https://policybase.cma.ca/link/policy11519

POLICY TYPE Parliamentary submission
DATE 2015-05-14
TOPICS Pharmaceuticals, prescribing, cannabis, drugs

Documents
Bill C-2 An Act to amend the Controlled Drugs and Substances Act (Respect for Communities Act)
https://policybase.cma.ca/link/policy11297

POLICY TYPE
Parliamentary submission

DATE
2014-10-28

TOPICS
Pharmaceuticals, prescribing, cannabis, drugs

Documents