

Share your plan for arthritis prevention, treatment, and care in Manitoba

Arthritis affects one in five Manitoba voters. Two-thirds are under the age of 65. It is the leading cause of disability in Manitoba and a significant economic burden related to direct health care costs and indirect costs to the economy related to lost employment, sick leave, and absenteeism.

Health care delivery and cost of living issues are the two highest named issues by Manitoba voters leading up to the October 3, 2023 provincial election. The time to address models of care in arthritis is now after years of being at the back of line of health care planning and delivery. The way people living with arthritis access and receive health care varies significantly across Manitoba. This particularly affects Manitoba voters living with inflammatory arthritis – like rheumatoid arthritis – who depend on getting a timely and accurate diagnosis, fast access to rheumatologists, and appropriate public reimbursement for needed disease-modifying medications.

The political parties running in the upcoming provincial election have diverse policies on health care. If elected, what will your government do to improve the level of arthritis prevention, treatment and care in Manitoba?

Question 1

Arthritis affects more than 240,000 Manitoba residents, yet no comprehensive model of arthritis care is available across the province. This is particularly pronounced outside of the Greater Winnipeg region. Where you live can be more important in determining treatment than how sick or disabled you are.

What will your government do to bring a high quality, accessible, standardized evidence-based model of arthritis care for all Manitoba residents?

Question 2

Many Canadians are positively adapting to virtual care. A majority of respondents in a 2021 Arthritis Consumer Experts Survey reported they believe virtual care could save costs in the healthcare system and improve access to specialists and timeliness of test results. However, respondents who identified as Black, Indigenous and People of Colour were over 3 times more likely to report difficulties using virtual care services.

What will your government do to ensure the continuation, improvement, and expansion of virtual care for all Manitoba residents – both patients and health care professionals – and ensure access is equitable to all?

Question 3

Indigenous Peoples in Canada have some of the highest rates of serious or life-threatening arthritis in the world and are at greater risk for becoming disabled by arthritis. Significant gaps in Indigenous arthritis care currently exist in Manitoba. Care models, such as an Indigenous community-based patient care facilitator¹, that address health in a culturally relevant manner and address the many barriers to care has been proven to resolve care gaps more effectively and optimize health outcomes of Indigenous Peoples with arthritis and comorbidities.

Will your government introduce culturally appropriate, patient-centered policies, such as a patient care facilitator or “arthritis liaison,” to help Indigenous Peoples navigate the healthcare system and receive coordinated care within their community to manage their arthritis?

Question 4

Some individuals with severe osteoarthritis require joint replacement surgery to achieve better quality of life, less pain and more joint function. According to the Canadian Institute for Health Information (CIHI), the guideline for knee and hip replacement is to receive surgery within 26 weeks.² In Manitoba in 2022, only 26% of knee replacement patients and 43% of hip replacement patients were treated within that guideline. This is well below the Canadian averages. This deeply impacts the lives of Manitoba residents with osteoarthritis who require these surgeries.

Will your government take steps to ensure timely, specialized care for Manitoba residents struggling with osteoarthritis, including joint replacement surgery wait times that are within medically recommended guidelines?

Question 5

The next Manitoba government must take steps to ensure the sustainability of prescription drug plans and the continued affordability of prescription medicines for Manitoba patients. Quebec, British Columbia, Alberta and six other provinces and territories are achieving hundreds of millions of dollars in annual biosimilars savings for the healthcare system. These savings are being reinvested to increase accessibility to new medicines and expand coverage for existing medicines for people living with complex chronic disease like inflammatory arthritis.

What will your government do to improve the uptake of biosimilars, and will you commit to reinvest those savings to support additional medication listings and improve patient coverage?

References

1. Umaefulam et al. (2021). Arthritis liaison: a First Nations community-based patient care facilitator. *Health promotion and chronic disease prevention in Canada: research, policy and practice*. <https://doi.org/10.24095/hpcdp.41.6.04>
2. Canadian Institute for Health Information. Wait times for priority procedures across Canada. <https://www.cihi.ca/en/explore-wait-times-for-priority-procedures-across-canada>