

POLICY BRIEF

PHARMACARE



AT ISSUE

Canada is currently the only high-income country with a universal public health insurance system that excludes drug coverage. As a result, even before the devastating impacts of the pandemic, **1 in 10 Canadians could not afford to take their prescription medications** and almost 1 million Canadians had reduced spending on food or heat in order to afford their prescriptions.

This is an issue for all Canadians, but children and youth face additional barriers to accessing affordable and effective medications. Policies governing the development, approval and reimbursement of medicines are largely designed for adults, neglecting the unique characteristics of the paediatric population.

Establishing paediatric-sensitive pharmacare will help correct this injustice and improve the health and wellness of Canada's youth. Children and youth should be prioritized within any pharmacare plan, recognizing that they:

1. Are a vulnerable population warranting special attention;
2. Have unique prescription drug needs that differ from adults; and
3. Have experienced significant regulatory neglect, leading to poor availability of paediatric drugs
4. Are disproportionately impacted by rare diseases and associated high-cost drugs

PRIORITY ASKS

1. Ensure that all children and youth have equitable access to safe, effective and affordable prescription drugs.
2. Fund a national, evidence-based and paediatric-sensitive formulary and compounding registry to inform public drug funding and support safe and effective prescribing for all children and youth.
3. Modernize Canada's regulatory system to proactively require paediatric-specific data when paediatric use of a drug can be expected or anticipated.
4. Ensure that Canada's National Strategy for High Cost Drugs for Rare Disease is child-centered, with an investment proportional to the rare disease burden experienced by the paediatric population

RAISING THE BAR FOR CHILDREN & YOUTH

A child's postal code or their parent's bank account should not determine if they have access to necessary medications.

The current patchwork system has led to significant disparities in healthcare and coverage on the basis of geography, illness, jurisdiction or socio-economic status. A national pharmacare system must ensure comprehensive drug coverage and reflect the unique healthcare needs of children and youth.

Children and youth are put at unnecessary risk when they do not have access to paediatric medications or child-friendly dosage forms.

Children are not just small adults. They have unique prescription needs that must be prioritized within a national drug formulary, or list of prescription medications covered by a provider. Existing formularies do not adequately cover many essential paediatric medications or recognize the need for dosage forms that are appropriate for children.

When a child-friendly formulation is not available, approved adult drugs are manipulated to achieve the desired dose or to administer the medication in a safe and tolerable form, a process known as compounding. Up to 75% of all paediatric prescriptions undergo pharmacy compounding or modification by caregivers. This erodes quality control standards and significantly increases the risk for dosing errors in a way that would never be accepted in the adult population.

Canada's regulatory system needs to be modernized to proactively require paediatric data. This would significantly reduce the need for off-label prescribing and better protect the health of children and youth.

Current Health Canada policies do not require drug manufacturers to submit paediatric data unless a specific paediatric indication is pursued, even when use among children and youth can be anticipated or when paediatric data exists and has been submitted to other international regulators. As a result, up to 80% of all medications currently prescribed in Canadian paediatric hospitals are administered off-label, meaning that the use deviates from the dose, administration, patient age and/or medical indication in the Health Canada-approved product monograph.

Rare diseases and associated high-cost drugs disproportionately impact the paediatric population.

Rare disease is not rare in children. Over 70% of all rare diseases manifest in childhood and 1 in 4 paediatric hospital beds is occupied by someone with a rare disease. Therefore, children and youth must be at the centre of any rare disease strategy.

TAKE ACTION

Lead the Call to Action for Child-Friendly #Pharmacare!

- Use your influence to help make paediatric-sensitive pharmacare a platform issue for your political party
- Be a voice for kids in your riding by speaking, writing or tweeting about the need to ensure all children and youth have equitable access to safe, effective and affordable prescription drugs
- Learn more at by visiting the [CPS website](#) and following us on Facebook and Twitter [@CanPaedSociety](#)