Hon. Ginette Petitpas Taylor  
Minister of Health  
MP, Moncton-Riverview-Dieppe  
Valour Building 700  
House of Commons  
Ottawa, ON K1A 0A6

Dear Minister;

RE. Support for Pharmacy Dispensing of Medical Cannabis and Dual System of Medical and Recreational Cannabis Access

On behalf of the Neighbourhood Pharmacy Association of Canada (Neighbourhood Pharmacies), please accept our congratulations on your recent appointment as Canada’s Minister of Health.

Neighbourhood Pharmacies represents the business of pharmacy in Canada and advocates for the country’s leading pharmacy organizations who deliver accessible, quality healthcare to Canadians. Our members include chain, banner, long-term care, specialty and independent pharmacies as well as grocery chains and mass merchandisers with pharmacies. Our focus is on improving the environment for the delivery of patient-centred care while fostering the conditions for business sustainability. We believe these goals are not incompatible. By leveraging the capacity of over 10,000 points of care from coast to coast, with pharmacies located in virtually every neighbourhood, our members aim to advance accessible, optimal, and equitable healthcare.

This letter will focus on three key issues: the regulatory framework regarding cannabis for medicinal purposes; the work that Neighbourhood Pharmacies has undertaken to address Canada’s ongoing opioid crisis; and, the importance of having Canada’s pharmacy business sector at the table in the current discussions at the pan-Canadian Pharmaceutical Alliance (pCPA), proposed changes to PMPRB regulations, and the recently announced federal support for provinces and territories to explore the feasibility of a national universal pharmacare program.
Regarding cannabis, we have noted that your mandate letter from the Prime Minister calls on you to work with your colleagues to help ensure timely passage of Bills C-45 and C-46, leading to the legalization and strict regulation of cannabis, and the prevention of injuries and death from drug and alcohol-impaired driving. However, we believe it is equally important for Health Canada to turn its attention to the use of and access to cannabis for medical purposes. Last year, Neighbourhood Pharmacies made a submission to the Task Force on Cannabis Legislation and Regulation. We have consistently maintained that pharmacies are best positioned, given their expertise in medication management, and with the essential infrastructure already in place, to make medical cannabis available in a patient-centred healthcare system.

On October 31, the Government announced a new investment of $36.4 million, to a new total of $46 million, over the next five years to implement a cannabis public education and awareness campaign, which will better inform Canadians on the health and safety risks of cannabis use and drug-impaired driving. Given the need for evidence-based information, our member organizations’ pharmacists are particularly well positioned to play a supporting role in these public education and surveillance strategies.

At the same time, however, our members strongly believe that the Access to Cannabis for Medical Purposes Regulations (ACMPR), under Section 56, of the Controlled Drugs and Substances Act should be amended so that pharmacists and pharmacies can be authorized to distribute and dispense medical cannabis, consistent with the manner in which hospitals and physicians are authorized under the ACMPR. In addition, the Association has made other recommendations calling for:

- a dual system utilizing two frameworks for access, a medicinal one where there is evidence of therapeutic benefit, and a recreational one, in which access would be strictly controlled and restricted;
- prescription-based access for medical cannabis, with formulations and strengths determined by treatment requirements; and,
- the application of federal regulations to determine minimum national standards for but not limited to age restrictions, packaging, distribution and sale location, form, strength (THC), health warnings, promotion, and marketing, with strict limits on personal possession quantities to protect youth and children from any degree of commercial enticement.

The members of the Neighbourhood Pharmacy Association of Canada, who account for the vast majority of Canada’s 10,000 pharmacies, strongly and unanimously support statutory and regulatory changes that would permit pharmacies to dispense medical cannabis, and have signalled their willingness to immediately begin the important work to affirm pharmacy as the responsible and low-risk option to increase access while safely dispensing cannabis for medical purposes.
In the current environment, most Canadians are unaware that many persons receiving prescribed medical cannabis do so without any degree of clinical advice that by contrast comes with prescriptions for all other medications. This is a potentially dangerous practice that does not serve the public interest and may lead to unintended harm and consequences. Pharmacies, by contrast, have the capacity to rectify this potentially harmful situation and include patients receiving medical cannabis, amongst other treatments and supplements, in the continuum of healthcare.

Many, if not most, medical cannabis patients are likely receiving medications for other conditions and the potential side effects and patient safety of these combinations must be of paramount consideration in developing the appropriate regulatory framework. For example, the consumption of cannabis in combination with blood thinners or benzodiazepines can lead to dangerously low blood pressure, increased risk of bleeding, and disruptions in blood sugar levels. Suboptimal medication management can lead to adverse health events, and potentially compromise the integrity of provincial and territorial drug plans – further straining health and emergency response systems, which would be a concern for provincial governments from Newfoundland and Labrador to British Columbia and the Territories. Pharmacies have a highly advanced and regulated pharmacy distribution network with essential safeguards in place to ensure proper inventory management, and prevent theft and diversion.

While there is some good evidence that cannabis can be effective in treating chronic pain, chemotherapy-induced nausea and MS symptoms, clinical evidence is limited or inconclusive on its efficacy for many other conditions such as mood disorders, post-traumatic stress syndrome and inflammatory bowel disease. This lack of solid clinical evidence underscores the need for pharmacists’ oversight prior to the consumption of cannabis, and providing access to medical cannabis in pharmacies will improve the likelihood of achieving optimal therapeutic outcomes.

In summary, as noted above, the Association believes it is vital that the federal government implement rules that treat the distribution and dispensing of medical and recreational cannabis differently.

Accordingly, as governments seek solutions to the opioid crisis gripping communities across Canada, the use of medical cannabis for several conditions, is a reasonable alternative to higher risk narcotics:

- **Cannabis represents a safer alternative** to opioid therapy for pain and has been shown to reduce the consumption of opioids
- **There have been no documented deaths from cannabis overdose**
- **In comparison with the hazards of different drugs, cannabis showed lower physical dependency, psychic dependency, neural toxicity, overall toxicity and social hazards** than Opiates, Cocaine, Alcohol, Benzodiazepines and Tobacco
Minister, you recently stated: “One of my top priorities as Minister of Health is preventing the deaths caused by opioid overdoses and helping those who are struggling with opioid use disorder. Tackling this public health crisis requires us to work together, show compassion, and put in place interventions that have a strong foundation in scientific evidence.”

You have also said that your years of experience as a social worker taught you one very important lesson: that collaboration with service providers is essential to better care for patients. Neighbourhood Pharmacies strongly agrees with those comments - the growing number of overdoses, and deaths caused by opioids, is a national public health crisis and a key priority for Health Canada.

Neighbourhood Pharmacies has developed a **Patient-Centred Pharmacy** proposal to better align pharmacy practice with the healthcare needs of Canadians today and into the future through better collaboration with healthcare providers in delivering patient focused healthcare. Pharmacies have a critical role to play in helping address this growing challenge. Pharmacists’ specialized expertise in medication management enables them to help individuals addicted to opioids, and prevent others from becoming addicted in the first place. But there is more that pharmacists can do, leveraging their knowledge and strong patient relationships to ensure Canadians are using medications safely and responsibly.

As a start, we propose to collaborate with provincial and territorial governments on the following initiatives to strengthen frontline health services, expand access to care and increase system sustainability:

- Respond to the ongoing opioid crisis provincially, starting in Ontario, with a new program that harnesses existing services and pharmacists' unique expertise to help patients with acute or chronic pain better manage their medications;
- A systemic approach to pain management, with in-depth annual and follow-up consultations, could help patients avoid addiction to opioids and assist patients who are at risk;
- Expand naloxone criteria; given the current opioid crisis, pharmacies do not feel comfortable turning down any requests for kits; and,
- Include common ailment prescribing within scope of practice to improve health outcomes and deliver cost-effective care in the community, closer to home.

These proposals can be immediately implemented into current pharmacy workflow and practice. To ensure care is optimized and constrained public resources are alleviated, we have also proposed expansion of the pharmacist Scope of Practice. In order to ensure fiscal balance and meet the needs of Canadians for accessible care in their communities, provinces have increasingly taken advantage of pharmacists’ extensive training and patient relationships to deliver better care closer to home.
Pharmacists’ scope of practice now includes:

- Renewing existing prescriptions for continuity of care;
- Changing drug dosage or formulation;
- Prescribing smoking cessation medication; and,
- Injecting influenza vaccines.

Some provinces have been proactive in bringing pharmacists into the patient’s continuum of care. Scope of practice changes have increased accessibility and reduced barriers to care. Allowing patients to have minor ailments assessed, and prescriptions initiated, within their community pharmacy will significantly increase points of access to the health system, eliminate unnecessary trips to the family doctor and reduce pressures on hospital emergency departments. Pharmacist prescribing has been shown to be effective at helping patients manage some chronic illnesses, improving care and quality of life. The ability of pharmacists to adapt prescriptions to ensure appropriate dosage and duration amidst an opioid crisis makes sense for patients. Expanding the roster of vaccines available in pharmacies to optimize our Public Health Services and outcomes would lead to better care for all in communities from coast to coast. All these factors would contribute to health system efficiencies and better outcomes.

Regarding the issues of access to needed medications and generic and brand pharmaceutical pricing, it should go without saying that pharmacy is a critical partner in delivering optimal primary care services in every Canadian community. It is no exaggeration to say that the publicly funded provincial and federal drug programs depend on the pharmacy sector to deliver these very programs. Over the past several years, pricing reforms implemented under the pCPA have reduced, and will reduce, many high-volume provincial drug plan prices for generics to 10% - 15% of the original brand price. And as you know, amendments to PMPRB regulations have been proposed that will in effect redefine, at a lower price threshold, what will be regarded as excessive patented medicine prices. All these developments have had a negative impact on the sustainability of the pharmacy industry, but despite these challenges our members’ pharmacies continue to maintain the highest level of patient care.

In addition, on October 20, at the close of the Conference of Provincial-Territorial Ministers of Health, it was announced that the respective governments would jointly research how a national pharmacare program might work, including potential costs, timelines to implement, and how far a program should go to expand access to medications. And the recent report from the Office of the Parliamentary Budget Officer on the federal cost of a national pharmacare program has indicated that such a program would add more than $19 billion in new federal expenditures, yet still not cover all the medications to which Canadians currently have access.
With all these factors in play, and in the interests of maintaining pharmacy’s ability to provide the highest possible therapeutic outcomes for Canadians, it is vital that the perspectives on the value-for-money proposition represented by the pharmacy industry be heard and that Neighbourhood Pharmacies be involved as a key contributor to these pharmaceutical and pharmacy policy dialogues.

In closing, we request your support on these critical public health policy initiatives and urge you to also lend your support for amendments to the ACMPR so that pharmacies can take their rightful place in the distribution of cannabis for medicinal purposes, particularly now that provinces and territories are readying themselves for the legalization of cannabis for recreational purposes by July 2018. We would also be grateful for an opportunity to meet with you at your earliest convenience to discuss these critically important public health policy issues and the opportunity to optimize the models of care in pharmacies in communities across Canada.

Sincerely,

Justin J. Bates
Chief Executive Officer