



# Canadian Pharmacists Association (CPhA) Response to: Consultation on improving access to drugs and other health products in Canada

---

## Improved Communication and Transparency

- **In the past year, have you looked for information on drug or other health product shortages?**
  - As an organization we often first hear about a shortage through media requests or from requests from Health Canada regarding whether our pharmacists are reporting shortages for a particular drug. We refer to the drug shortages website to validate any shortage we're hearing from the front lines/media.
- **How do you obtain information you need related to a shortage? What are your biggest challenges in getting key information to help you deal with shortages?**
  - In most circumstances, CPhA first hears about drug shortages through the media. We use the drugshortages.ca website to validate what has been reported by manufacturers but it does not provide any information on the scale of the shortage.
  - Most of our information following that comes from tables set up by Health Canada between industry partners, and ad-hoc information received by front-line pharmacists.
  - There is no centralized pharmacy level data and CPhA does not have any sort of formal reporting mechanism to identify potential shortages at the pharmacy counter.
- **As a health care professional, what type of information could be useful for your patients when there's a shortage? How would this information be useful?**
  - Most pharmacy professionals do not have a direct line of sight into shortage situations and usually find out when their order is not filled.
  - Unless there is a significant shortage that rises to a tier 3 shortage, they get very little information about why a shortage is happening and what measures are being put in place to address them. Providing information to patients about the reason for the shortage and related information about timelines to resolve the shortage goes a long way towards supporting patients transition to alternative treatment.
  - Being able to provide timely information regarding the cause of a shortage and related information about timelines would also help reduce bulk purchasing and hoarding when it comes to over-the-counter medications.
- **As a member of the public, what information would you consider the most helpful when facing a drug or other health product shortage?**
  - Patients find out that there is a shortage from a pharmacist. Patients typically want to understand why the shortage is occurring and when it is expected to end.
- **As an industry member, a health care provider or a provincial or territorial government, what processes do you have in place for information-sharing, communication and transparency during an anticipated or actual shortage?**



- There are no formal processes to collect information from front-line pharmacy professionals.
- We have in the past worked collaboratively with Health Canada to conduct point-in-time surveys of front-line pharmacists to determine what their supply is like (e.g. children's cold and flu shortages).
- In a Tier 3 shortage situation, CPhA tries to develop information for pharmacists that we distribute through our 30K+ distribution list and our website.
- **What are the biggest challenges you face in communication and transparency related to shortages?**
  - Most of the information that is shared by manufacturers with stakeholders is considered confidential so cannot be relayed to front line health providers. This is limiting because they do not have the most up to date information to inform their ordering decisions or how to communicate with patients.
- **What information from the industry on a shortage would you like to know?**
  - As stated above, it would be helpful for front-line pharmacy professionals to be able to report to patients the cause of a shortage, when it began and the expected timeline until it is resolved.
- **What is the most effective way for you to receive information on a drug or other health product shortage?**
  - CPhA participates in ad hoc Health Canada tables during specific drug shortages which provides us with key information, however much of it is often confidential. While we appreciate the level of detail that is provided by each manufacturer (e.g. expected supply), that information is not sufficiently contextualized in terms of demand/need. We believe there is a role for Health Canada to provide a summary/assessment of the information prior to or following the meetings.
- **What type of information are you missing to respond to a shortage or shortage risk in a timely manner?**
  - One of the biggest challenges is being able to identify or predict shortages before they happen, which would allow us to put in place measures to mitigate shortages (e.g. put in purchasing limits, move products behind counters, order more alternative medications, dispense smaller amounts, etc.).
- **What type of support is needed to improve information sharing?**
  - CPhA recommends federal, provincial and territorial governments work with stakeholders throughout the supply chain to explore mechanisms to increase data collection.
  - Real-time data can assist in better understanding where there is supply at any given time, determine if there are sudden increases in demand for a product, and understand potential trends that could impact supply.
  - CPhA can continue to provide insights to Health Canada on significant shortages but support is needed to do this in a more formalized and consistent way. Over the past several months, and during previous Tier 3 shortages, CPhA staff can spend as much as 70% of their time managing a shortage (e.g. communicating with pharmacists, developing alternative drug tables, responding to media requests, providing input into Health Canada, etc.).



## Agile Regulatory Toolbox

- **What information or tools would better prepare you to prevent or mitigate the impacts of drug shortages? Why?**
  - While the drug shortages website provides some information about potential shortages, it does not provide any specific information about what shortages may be likely vs potential. The large number of submissions to the website makes it difficult to prioritize action on specific shortages.
  - One of the biggest challenges is being able to identify or predict shortages before they happen, which would allow us to put in place measures to mitigate shortages (e.g. put in purchasing limits, move products behind counters, order more alternative medications, dispense smaller amounts, etc.).
- **What do you believe are the most frequent causes of shortages? What actions are you taking to prevent these causes from leading to a shortage?**
  - Shortages happen for a variety of reasons, but we are most vulnerable when we only have 1-2 options on the market.
  - Price compressions in recent years have disincentivized manufacturers from entering or remaining on the Canadian market which means that when a shortage occurs there are few options to draw from to fill the gaps.
  - Recent demand driving shortages have exacerbated an already significant problem.
  - US importation is a trend that should also be monitored.
- **Do you have requirements to hold reserves or safety stocks for certain health products? If so, for which and in what quantity? What is the nature of these requirements (for example, regulatory, administrative good practices, contracting requirements)?**
  - Reserves may be appropriate in some circumstances but such requirements for all drugs may not be feasible.
  - Where stockpiles or additional production is required, we believe that federal funding is required to provide a stop gap for unused stock and for manufacturers who offer to increase supply.
- **What are the advantages and challenges to developing a list of drugs vulnerable to shortages?**
  - CPhA believes the federal government should create and maintain a list of medications that would have the highest clinical risk for Canadians should a shortage occur.
  - Such a list would assist federal, provincial and territorial governments prioritize drugs at highest risk and establish contingency plans (e.g. building stockpiles and redundancies in the supply chain).
  - These types of lists have been successfully used by governments globally and are recommended by the World Health Organization.
    - In Australia for example, the federal government and drug manufacturing industry agreed to the Medicines Supply Guarantee which, in exchange for government investment into medicines most at-risk of shortages, requires manufacturers to hold four to six months of stock of those medicines in Australia.
- **What other processes could you or your organization put in place to better prevent, detect and address the risks of a shortage for your products?**



- CPhA represents Canadian pharmacists from across the country and our network of pharmacy groups represent the vast majority of pharmacies in the country.
- CPhA regularly surveys its members and partners to better understand pharmacy level supply and experiences.
- CPhA often also develops alternative drug tables to assist clinicians switch patients in the context of a shortage.
- These alternative drug tables are extremely valuable to pharmacists and other health providers, however they require significant capacity to produce. With support from Health Canada to produce these tables, we would better be able to help pharmacists across Canada identify alternative therapies for patients in a timely way.
- **What are the challenges to advancing these new processes?**
  - With the increased frequency of shortages, CPhA has invested considerable internal capacity to support the ongoing efforts of Health Canada to manage high profile shortages.
  - While CPhA believes that this is an important contribution that we can make to addressing this issue, we lack the capacity to dedicate the needed resources to fully engage on this file.
- **What kind of support would you need to advance such new processes?**
  - CPhA is proposing that the federal government support its efforts in the next federal budget by investing in several initiatives:
    - \$150,000 in CPhA over the next three years to further enhance our monitoring capacity at the pharmacy level.
    - \$200,000 in CPhA over the next three years to support the development of alternative drug tables to assist prescribers and pharmacists with drug substitutions and communicate and distribute these tables to the frontlines.
    - \$500,000 to develop a critical drug list that would allow for better monitoring of Canada's drug supply across all therapeutic areas and identify mitigation strategies to prevent future shortages.
- **What are your views on how a vulnerable drug list should be developed? Who should participate in that process? How should the list be used?**
  - The list should be developed by individuals with drug expertise, together with experts in supply management.
  - Both community and hospital pharmacists must be included to better understand the real-world impact of shortages and availability of alternatives in Canada.
  - The list should be used by decision makers to identify potential prevention and mitigation strategies. There is no one size fits all approach. In some cases, building reserve stock may be appropriate, whereas in other cases, we may need to prioritize expanded procurement strategies.

## Greater Supply Chain Visibility

- **What are your biggest challenges when it comes to supply chain or inventory visibility?**
  - There is no centralized pharmacy level data available, and shortages can impact pharmacies differently (regionally, type of pharmacy such as chain vs independent,



- etc.). To obtain this information, we must solicit information from individual pharmacy groups, or individual pharmacists.
- While the drug shortages website provides some information about potential shortages, it does not provide any specific information about what shortages may be likely vs potential. The large number of submissions to the website makes it difficult to prioritize action on specific shortages.
  - The biggest challenge is that we are largely being reactive instead of proactive which would allow us to put in place measures to mitigate shortages (e.g. put in purchasing limits, move products behind counters, order more alternative medications, dispense smaller amounts, etc.).
- **What information can you or are you collecting on a regular basis about demand and anticipated changes to demand?**
    - As a national association, we have sought out, on several occasions, information about supply at the pharmacy level. This information is fed into the Health Canada tables.
    - Given the frequency and scope of shortages, pharmacists do not have the time/capacity to fill out regular surveys.
    - We are currently working on establishing a small group of front-line community pharmacists who can provide a rapid response to validate the scale of a shortage. If we get a consistent response, we can then conduct a more expansive survey of the broader profession.
    -
  - **What information do you collect as a health care professional or as part of your organization that could help other stakeholders address a health product shortage?**
    - As stated above, we have worked collaboratively with Health Canada to conduct point-in-time surveys of front-line pharmacists to determine what their supply is like.
    - This information can help determine whether recent increases in supply for example are helping ease shortages, and can help determine where shortages are most pronounced (e.g. urban vs. rural, province vs. province, hospital vs. community, etc.)
  - **What solutions would support improvements in your industry with respect to supply chain visibility?**
    - A formal government reporting system that allows pharmacists to report shortages at their counters to a government system could be helpful.
    - This should be optional, as not all pharmacists have the time to do this, and like many other health professions are facing burnout and staffing challenges.
  - **What concerns do you or your organization have when it comes to sharing information that would increase supply chain visibility with Health Canada or other supply chain partners?**
    - As stated above, while an optional reporting system could be helpful for government and industry, pharmacists continue to face labour shortages and burnout. For this reason, increasing the administrative burden on pharmacists must be avoided.
    - However, with over 44,000 pharmacists across Canada, providing the optional ability to report shortages observed at pharmacy shelves, could allow the government to identify shortages well-before the media first identifies them.



- While this system should be managed by the federal government, a table should be established with industry partners, including the Canadian Pharmacists Association (CPhA) to monitor and allow prompt responses from the industry to mitigate potential shortages.
- **What initiatives in your profession/sector are under development to improve supply chain or inventory visibility?**
- **What solutions would support improvements for your profession/sector in this area?**
  - Health Canada's mandate in the area of drug shortages is limited, and many of the strategies developed stem from voluntary collaboration between stakeholders at the request of Health Canada.
  - CPhA views this as a weakness in supply chain visibility and the need and potential to share information with Health Canada.
  - For this reason, CPhA recommends conducting a review of Health Canada's mandate and authorities. A renewed mandate could include overseeing equitable distribution of medicines and identifying and implementing strategies to minimize drug waste.
- **What challenges does your organization face in implementing strategies or technologies that could help increase visibility into your product supply chains?**
  - Capacity remains one of our biggest challenges. From collecting information to creating pharmacy specific tools and resources, to reporting back to Health Canada, we dedicate a considerable amount of time on this file.
  - In order to provide relevant and timely relevant to pharmacists, we encourage the federal government to provide funding to CPhA and other organizations to continue this ongoing work. An ongoing challenge is the dissemination of real-time information on supply and we would welcome additional strategies to inform the pharmacy community.
- **What kind of support would you need to advance such strategies or implement technologies to support greater visibility?**

## Enhanced Response to Supply and Demand

- **What do you currently do to prepare for changes in supply and demand of drugs or other health products?**
- **What barriers do you face in your efforts to be prepared for changes in supply and demand?**

### **Therapeutic substitution**

- The management of any given shortage requires considerable effort by all health care providers, including pharmacists.
- Pharmacists spend on average 20% of their time managing drug shortages.
- By empowering pharmacists to independently substitute drug therapies, we would lessen the burden on all health care providers, improve patient experience and reduce their frustrations, while reducing the time and resources required by pharmacists and prescribers to coordinate drug switching.



- The federal government should strongly encourage and support all provinces and territories in expanding pharmacists' scope of practice to include therapeutic substitution where it is not currently permitted.

## Compounding

- While not all drugs can be compounded, during the recent pediatric analgesic shortage, we witnessed the importance of compounding at pharmacies.
- While all pharmacists are trained to compound drugs, recent regulatory changes by the Colleges have dramatically reduced the number of pharmacies that can compound.
- CPhA recommends the federal government work with provincial regulatory authorities to ensure that compounding remains accessible to patients, while ensuring high safety standards.
- 
- **When is it most useful to have safety stocks or extra supply in the supply chain?**
- **What factors determine how much safety stock is needed or which drugs should be buffered?**
- **What solutions would you propose to improve your ability to prepare for changes in supply and demand?**
  - CPhA is proposing that the federal government support its efforts in the next federal budget by investing in several initiatives:
    - \$150,000 in CPhA over the next three years to further enhance our monitoring capacity at the pharmacy level.
    - \$200,000 in CPhA over the next three years to support the development of alternative drug tables to assist prescribers and pharmacists with drug substitutions and communicate and distribute these tables to the frontlines.
    - \$500,000 to develop a critical drug list that would allow for better monitoring of Canada's drug supply across all therapeutic areas and identify mitigation strategies to prevent future shortages.
  - Most pharmacists don't find out that there is a shortage of a drug until their order is not filled. Increased communication as a shortage develops is essential to supporting pharmacists manage their inventory, while at the same time communicating with their patients.
  - During a shortage, patients may be required to switch to higher-cost alternative drugs or higher-cost compounded medicines, which could lead to higher out-of-pocket costs for the patient.
    - When these products are not covered by a patient's insurance, patients are at greater risk of non-adherence to their prescribed drug plan.
    - CPhA believes that further coordination between governments and private insurers could alleviate the financial burden on patients when switching is required.
    - Further, all efforts should be made during a shortage to ensure that imported products resulting from a shortage are added to formularies in a timely way.



- **What kind of support do you need to be better prepared to react to a rapid change in demand?**
  - While the drug shortages website provides some information about potential shortages, it does not provide any specific information about what shortages may be likely vs potential. The large number of submissions to the website makes it difficult to prioritize action on specific shortages.
  - The recent shortages of pediatric analgesics and amoxicillin as well as the spike in demand for Ozempic shows that we have limited visibility into demand in most provinces. Early signals from all stakeholders can make an important difference in mitigating a demand driving shortage.
- **What is the impact of the market environment on product diversity?**
  - Shortages happen for a variety of reasons, but we are most vulnerable when we only have 1-2 options on the market.
  - Price compressions in recent years have disincentivized manufactures from entering or remaining on the Canadian market which means that when a shortage occurs there are few options to draw from to fill the gaps. Canada must also continue to monitor and prevent any drug importation plans by other countries.
- **What type of regulatory alignment would you see as beneficial to improve access to health products for people in Canada?**
  - **for example, with other international regulators, among provinces and territories across Canada**
- **How can we incentivize market diversity?**
  - Canadians are most vulnerable when there are few or no alternative drugs in any particular drug class.
    - If one manufacturer experiences a production delay that leads to a shortage, there may be a few alternatives available to fill that gap.
    - CPhA recommends that the federal government work with sector partners to assess the current environment and identify opportunities to develop Canada's market to be responsive to patient needs and to encourage a strong pharmaceutical presence in Canada.
    - This can include but is not limited to a drug shortage framework in all national/pan-Canadian drug strategies such as pharmacare, pCPA/PMPRB, removing barriers for foreign importation, federal investments into domestic drug manufacturing, including research and production of Active Pharmaceutical Ingredients (APIs) and pharmaceutical technologies.
  - During specific drug shortages, we recognize the importance of bringing in new products to the Canadian market or increasing manufacturing among existing market access holders.
    - In these situations, concerns have been raised about the significant potential for unused stock and risks borne by manufacturers if they overproduce products with short shelf lives.
    - Canada should make efforts to limit these risks and create a favourable market for alternative manufacturers during situations of drug shortages.
    - As an example, Canada should consider creating a federal funding backstop program to help guarantee return for manufacturers who increase production during a shortage.



## About CPhA

The Canadian Pharmacists Association (CPhA) is the unifying national voice of pharmacy and the pharmacist profession in Canada. As pharmacists undertake an enhanced role in the delivery of health-care services, CPhA ensures that the profession is recognized as a national leader in health care, influencing the policies, programs, budgets and initiatives affecting the profession and the health of Canadians. More information is available at [www.pharmacists.ca](http://www.pharmacists.ca).

For more information, contact:

Adam Wilson  
Director, Government Relations  
Canadian Pharmacists Association  
[awilson@pharmacists.ca](mailto:awilson@pharmacists.ca)