Dear Minister,

Thank you for your letter of August 17 addressed to a number of professional and industry associations involved in the issue of drug shortages. We appreciate and understand your ongoing interest in this issue, and have decided to respond collectively.

As you point out, a number of key associations have been working together since April 2011 as the “Multistakeholder Working Group on Drug Shortages”, with an objective to provide pharmacists, physicians, and most importantly, Canadians, with more information on the issue of drug shortages. These organizations include BIOTECanada, the Canadian Association for Pharmacy Distribution Management (CAPDM), the Canadian Association of Chain Drug Stores (CACDS), the Canadian Generic Pharmaceutical Association (CGPA), the Canadian Medical Association (CMA), the Canadian Pharmacists Association (CPhA), Canada’s Research-Based Pharmaceutical Companies (Rx&D), and the Canadian Society of Hospital Pharmacists (CSHP).

The Working Group has held four meetings initiating the following activities:

- Discussions have been held with the American Society of Health System Pharmacists (ASHP) and the University of Utah to learn more about their Drug Shortages Resource Center;
- In June, CPhA, CSHP, and CMA conducted a survey of their respective members to better understand the demand for a national reporting system and the kinds of information that would be of most value. Approximately 1,300 pharmacists and physicians responded. The results demonstrated a clear desire for a system that would provide greater information on current and anticipated drug shortages. It also provided details on the specific kinds of drug information that practitioners needed;
- Individual member associations have met with Paul Glover, ADM, Health Products and Food Branch, on numerous occasions to better understand Health Canada’s perspectives; and
- Discussions have occurred with a number of organizations who currently host regional drug shortage reporting systems about partnering with our associations in order to expand and take on a more national scope.
What has become clear from our proceedings thus far is that the establishment of a Canadian drug shortages monitoring system is a complex undertaking, requiring the involvement of hundreds of companies, the creation of a standardized definition of a drug shortage, all while operating within a very complex health care environment. However, we also understand that health practitioners are demanding this information as quickly as possible to allow them to address drug shortages and prepare better care plans for their patients. As a result, the Working Group is proposing the following:

- In the short term, Canada's Research-Based Pharmaceutical Companies (Rx&D) and the Canadian Generic Pharmaceutical Association (CGPA) are prepared to start collecting information within the next month from their member companies on current and impending drug shortages. This information would include name and dosage form of the drug in short supply, reason for shortage, expected duration of the shortage, and notification that the shortage is resolved. Some companies may choose to report whether a particular “shortage” was indicative of a “no supply” situation, or whether the “shortage” reflected disruptions in the supply chain for which better management of the supply chain was required. BIOTECanada will also encourage its members to collect and report this information on an individual basis.

- This national-level information would be provided to two existing drug shortages websites, the Saskatchewan Drug Information Service (http://druginfo.usask.ca/healthcare_professional/drug_shortages.php) and Vendredi.PM (http://vendredipm.wordpress.com). Other sites requesting this information would be evaluated on a case by case basis. These websites that host shortages information would be promoted and communicated by CPhA, CSHP, and CMA to their respective memberships, and to the broader health community using other communications vehicles such as the media, possibly with the promotional assistance of Health Canada. These promotional efforts would commence as soon as confirmation is received as to when the supplementary information provided by manufacturers can be posted.

- Research has been conducted into existing drug shortages monitoring/reporting systems and industry data tools that, with modifications, may meet the needs of Canadians in a broader way. Because we recognize that these existing platforms mentioned above have limitations, over the next several months the Working Group will continue to work towards the objective of creating a national, “one-stop shop” drug shortages monitoring system. Various options for where such a system could reside and how it would function have been explored, but more time is required to build a more comprehensive system. It is our intention that a more detailed plan for a national reporting system can be fleshed out by early 2012. Another outstanding question that needs to be resolved in advance of creation of a national site is funding and resources – a question that should be discussed with Health Canada in greater detail at some point in the near future.

The Working Group will be holding its next face to face meeting on September 29. We have extended an invitation to your Assistant Deputy Minister, Paul Glover, to attend that meeting, where we will provide him with greater details as to our plan and engage in a discussion regarding next steps.
Your letter also asked our working group to consider measures to help reduce drug shortages. As you know, the underlying causes of drug shortages are complex and international in scope. Our group has had some discussions on measures that can be taken to alleviate shortages, but certainly more discussion is required – we look forward to engaging with Health Canada in that discussion. Several of the organizations represented by this letter may be writing you individually to address those measures that have been taken, and should be taken, to directly address the root causes of shortages.

We trust that this information provides greater clarity to our efforts thus far and our proposed direction. Although this remains a work in progress, there is a commitment and determination from all the members of our Working Group to put in place a reporting system that provides timely, accurate, and comprehensive information that will provide value to all health care practitioners and patients across Canada.

We welcome your thoughts and views on our work thus far. We are anxious to work with you and your officials within Health Canada to ensure that health care practitioners are provided with the tools they need to deliver high quality, patient-centric care to all Canadians. Once again, thank you for your letter, and we look forward to continuing to work with you.

Yours truly,

Peter Brenders, President and CEO
BIOTECanada

David Johnston, President and CEO
Canadian Association for Pharmacy Distribution Management

Nadine Saby, President and CEO
Canadian Association of Canadian Drug Stores

Jim Keon, President
Canadian Generic Pharmaceutical Association

Dr. John Haggie, President
Canadian Medical Association

Dr. Jeff Poston, Executive Director
Canadian Pharmacists Association

Mark Ferdinand, Vice-President
Canada’s Research-Based Pharmaceutical Companies

Myrella Roy, Executive Director
Canadian Society of Hospital Pharmacists

c.c. Mr. Paul Glover, Assistant Deputy Minister, Health Products and Food Branch, Health Canada