



**Online Submission to  
The Honourable Heath MacDonald, Minister of Finance**

**Submitted by Diabetes Canada  
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Lisa Matte, Senior Regional Director, Atlantic  
[lisa.matte@diabetes.ca](mailto:lisa.matte@diabetes.ca)  
Jake Reid, National Director, Government Relations  
[jake.reid@diabetes.ca](mailto:jake.reid@diabetes.ca)

## Executive Summary

The number of Canadians with diabetes has doubled since 2000. This means about 11 million Canadians now live with prediabetes or diabetes. Canadians 20 years of age now face a 50 per cent chance of developing the disease in their lifetime. For First Nations Peoples in Canada, that risk is up to 80 per cent and in some subgroups within this population, it is even higher. It is estimated that prevalence will grow by 40 per cent in the next decade with the health-care costs associated with treating people with diabetes and its complications in Canada topping \$39 billion by 2028.

In Prince Edward Island (PEI) today approximately 47,000 people, or 29.8 per cent of the provincial population, are living with diabetes or prediabetes and those numbers are expected to rise to 56,000 (33.3 per cent) by 2029. In fact, this province has one of the higher prevalence rates for diabetes (for all ages) in Canada. Treating diabetes and its complications currently costs the PEI health-care system \$17 million in direct costs, which is estimated to rise to \$22 million by 2029.

Diabetes is a complicated and challenging disease and puts people at high risk of serious and costly complications, including heart attack, stroke, vision loss, kidney disease and amputation. People with diabetes are over three times more likely to be hospitalized with cardiovascular disease, 12 times more likely to be hospitalized with end-stage renal disease and almost 20 times more likely to be hospitalized for a non-traumatic lower limb amputation compared to the general population.

To help mitigate the alarming impact of diabetes on families, employers, health-care and the economy, Diabetes Canada recommends the following actions to the Government as part of a renewed Provincial Diabetes Strategy:

- **Broaden and increase access to blood glucose testing strips for people with diabetes, to conform to Diabetes Canada guidelines on self-management of diabetes.**
- **Remove the current age restriction and expand the existing insulin pump program to include all people with type 1 diabetes who would benefit as medically prescribed.**
- **Support [Diabetes 360°](#): A nation-wide strategy to prevent and manage diabetes.**

Diabetes has been recognized as a health-care priority that requires an organized system of care in order to alleviate the burden of the disease for individuals, communities, for the benefit of the health-care system. Building on the key elements of the existing Provincial Diabetes Strategy, which is in the process of being renewed, will set this province up for improved diabetes care and prevention along with healthier citizens. A provincial strategy focused on enabling individuals to self-manage, supported by a national strategy with the support of all provinces, could help to tackle the epidemic of diabetes, allocate scarce resources and prioritize investments.

## Diabetes in Prince Edward Island

Approximately 16,000 people are estimated to currently live with diabetes in PEI in 2019, representing 10 per cent of the province's population. Over the next decade, this province is projected to experience a 29.2 per cent increase in diabetes prevalence.

While diabetes prevalence is high, this does not represent the full burden of the disease. About one-third of people with diabetes are undiagnosed, and many more are estimated to have prediabetes, a precursor to type 2 diabetes. In 2019, with diabetes, undiagnosed diabetes and prediabetes combined, an estimated 47,000 people in PEI (29.8 per cent of the provincial population) are affected. By 2029, it will increase to 33 per cent. This will mean one in three people will be living with diabetes or prediabetes in this province.

We estimate diabetes is currently costing the provincial health-care system \$17 million as a result of hospitalizations, doctor visits and inpatient medications and will rise to \$22 million by 2029.

Prince Edward Island faces unique challenges in preventing type 2 diabetes and meeting the needs of those living with diabetes:

- The median age in the province is 43.5 years.
- Approximately 16 per cent of the provincial population are seniors (65 years and older), which is among the highest rates in Canada.
- The median after-tax family income is one of the lowest of all the provinces and below the Canadian average.
- Overweight in the province among adults is at about 38 per cent; obesity is at 37 per cent.
- PEI has the highest rural population in Canada. Accessing care for people with diabetes is more challenging in rural areas across Canada than in urban areas.
- As with other smaller provinces, PEI has difficulty in attracting and retaining specialists who are limited in numbers and upon whom people with diabetes rely

## Issues and Recommendations

1. **Broaden and increase access to blood glucose testing strips for people with diabetes, to conform to Diabetes Canada guidelines on self-management of diabetes.** *In PEI, this means expanding current government programs to include people with diabetes who do not use insulin, the majority of people who have type 2 diabetes.*

Self-monitoring of blood glucose (SMBG) is a valuable tool to help people manage their diabetes. SMBG is also the only way to immediately determine hypoglycemia (low blood sugar). Diabetes Canada recommends individualized SMBG based on individuals' circumstances. People with diabetes should work with their health-care providers to determine frequency and a testing pattern that is clinically appropriate and that works best for them. The pattern of blood glucose levels informs health-care providers and people with diabetes how well a treatment is working including medications and lifestyle management. People with diabetes can adjust their food or exercise themselves based on SMBG results to help stay on target.

Currently, eligible Islanders who use insulin have up to 100 blood glucose test strips covered per month through the province's Diabetes Drug Program; they pay \$11 in copayment per prescription. People who do not use insulin, however, have to pay out of pocket or rely on private insurance to pay for the needed test strips. While there is no published statistics about the percentage of Islanders who cannot afford test strips, recent national surveys show that 30 per cent of Canadians with diabetes have no insurance to cover the cost of equipment or supplies to monitor their blood glucose, and that 25 per cent of those with diabetes reported their adherence to treatment plans are impacted by cost.

People with diabetes need timely and affordable access to prescribed medications, devices and supplies to optimally manage their disease and avoid serious and costly complications. As people with diabetes are a heterogeneous group, there is no one-size-fits-all pattern on how often a person with diabetes needs to test their blood glucose. SMBG needs to be individualized, based on the person's circumstances and needs. Timing and frequency of SMBG should be determined based on several factors, including the type of diabetes, the treatment prescribed, the need for information about blood glucose levels prompted by a tendency to have hypoglycemia, lack of awareness of hypoglycemia, inadequate glycemic control, occupational requirements and acute illness; and the individual's capacity to use the information from testing to modify behaviours or adjust medications, such as literacy and numeracy skills and knowledge of what to do with the results.

Some key Diabetes Canada recommendations from the Guidelines include:

- For people using insulin more than once a day, SMBG is an essential part of diabetes self-management for both type 1 and type 2 diabetes, for at least three times a day, both before and after meals.
- For people with type 2 diabetes not on insulin, the frequency of SMBG depends on the type of medications, glycemic control and risk of hypoglycemia. For example, those who are on medications with a higher risk of hypoglycemia may need to test more often.

The current public coverage for test strips does not meet the needs of Islanders with diabetes, including both those who use insulin and those who do not. Without private insurance, Islanders with type 2 diabetes not using insulin need to pay for all of their test strips out-of-pocket, and Islanders using insulin need to pay for any additional strips that they need in order to adhere to prescribed treatment plans.

Diabetes Canada thus urges the Government of PEI to review the current policy for strip coverage against the most recent evidence on SMBG, and introduce changes to ensure all Islanders with diabetes have access to test strips they need to effectively manage their diabetes and avoid serious complications.

- 2. Remove the current age restriction and expand the existing insulin pump program to include all people with type 1 diabetes who would benefit as medically prescribed.** *This means supporting people throughout their lifetime, if they require it, as diabetes does not discriminate based on age.*

In its 2014 budget, the Prince Edward Island government introduced a pediatric insulin pump program that provides assistance to cover up to 90 per cent of the cost of insulin pumps (every five years) and pump supplies for type 1 diabetes under 19 who are deemed good candidates by their diabetes care team. The percentage of eligible coverage depends on income levels. Supplies covered by the program include:

- Infusion sets (maximum of 140 sets per year)
- Reservoirs (maximum of 140 per year)
- Site inserts maximum of one replacement device per year)
- Skin adhesive wipes (maximum of 150 per year)
- Sterile transparent dressings (maximum of 200 per year)

Every province and territory in Canada has an insulin pump program with varying age thresholds as part of eligibility criteria. Currently British Columbia, Alberta, Ontario, the three Territories and Non-Insured Health Benefits program (NIHB) fund insulin pumps and supplies for eligible individuals without age restrictions. Saskatchewan, New Brunswick, and Nova Scotia fund pumps until the age of 25, meaning PEI joins Manitoba and Quebec as the only provinces that solely have paediatric coverage.

Currently, an estimated 800–1,600 Islanders are living with type 1 diabetes; they need insulin every day. Many inject insulin manually several times a day, while others use an insulin pump to deliver the appropriate amount of insulin every day. There is evidence that shows medical benefits of insulin pumps in place of multiple daily injections for some people with type 1 diabetes. Like diabetes therapies in general, the use of insulin pumps should take into consideration an individual's needs and circumstances. When used appropriately, insulin pump therapy can help people achieve target blood glucose levels and prevent potentially debilitating and life-threatening complications.

There is evidence that an intensive insulin therapy using an insulin pump can lead to better glucose control over multiple daily injections of NPH or long-acting insulins for individuals who are clinically eligible. However, the current insulin pump program on PEI provides coverage for pumps and supplies up to age 18. Due to the high cost of an insulin pump and pump supplies, the age restriction essentially denies the access to an effective method of delivering insulin to other people with type 1 diabetes who may benefit from this therapy.

Diabetes Canada has estimated that, when the cost of treating downstream complications are considered, an investment into an expanded insulin pump program will improve health outcomes in people with diabetes in PEI resulting in \$450,000 in net savings for the province by 2032. Type 1 diabetes is a life-long disease, and people who are considered good candidates by health-care professionals for insulin pump therapy should have access to this option, regardless of age. Diabetes Canada urges the Government of PEI to lift the age restriction of the insulin pump program and make this program available to all eligible Islanders with type 1 diabetes. By helping people to effectively managing their diabetes through expanding the insulin pump program, the Government is helping to prevent the serious complications of diabetes, including heart attack, stroke, kidney failure, blindness, amputation and depression, which account for 80% of the cost of diabetes to the health-care system.

### **3. Support Diabetes 360°: A nation-wide strategy to prevent and manage diabetes.**

The World Health Organization recommends that every country implement a national diabetes strategy yet, despite higher prevalence and per capita costs of diabetes than most of the world's developed nations, Canada has been without one since 2013.

With an aging population and exploding growth rates amongst at-risk populations – most notably Indigenous Canadians – Canada's diabetes burden will continue its rise over the next decade. Both prevalence and direct costs for treating the disease in Canada have been rising at a rate of 4 per cent and 10 per cent respectively per year and show no signs of slowing down. Treating diabetes costs Canada's health care system \$28 billion per year and will approach \$40 billion per year by 2028 unless we act with a sense of urgency.

Canada needs a strategy to coordinate the efforts underway in all provinces and territories to combat this epidemic, one which would bring Canada in line with global best practice, reduce the human burden of this disease significantly in a very short period and achieve savings in health care costs.

That is why Diabetes Canada partnered with representatives from more than 100 stakeholder organizations over the past year to develop Diabetes 360° – a measurable, outcome-focused national strategy for the prevention and management of diabetes. It is based on the hugely successful 90-90-90 model implemented globally to combat HIV/AIDS and is the product of collaboration among 129 stakeholders including representation from nine provincial governments.

The Diabetes 360° framework includes specific evidence-based recommendations in the areas of prevention, screening, treatment and patient outcomes for diabetes, and is set up to deliver results in just seven years by focusing on the following key targets:

- 90 per cent of Canadians live in an environment that preserves wellness and prevents the development of diabetes
- 90 per cent of Canadians are aware of their diabetes status
- 90 per cent of Canadians living with diabetes are engaged in appropriate interventions to prevent diabetes and its complications
- 90 per cent of Canadians engaged in interventions are achieving improved health outcomes

These targets are based on extensive consultation and rigorous analysis of research, and the actions required for their achievement are detailed in our Diabetes 360° report.

Diabetes Canada has submitted its recommendations for a national diabetes strategy to the Government of Canada and recommends that a seven-year national partnership be established with a strategic investment of \$150 million over the seven years. The partnership will collaborate with provinces and territories, civil society and private sector to prioritize and implement programs to achieve the Diabetes 360° targets and then sunset – a realistic and evidenced approach that can work for Canada.

Diabetes Canada is asking the government of Prince Edward Island to extend its endorsement of the Diabetes 360° strategy framework to the Government of Canada's Minister of Health, the

Honourable Ginette Petitpas-Taylor, as well as consider its financial investment in the strategy to ensure the future of health and prosperity of Newfoundlanders and Labradorians.

## **Conclusion**

Diabetes Canada urges the Government of PEI to implement the recommendations contained in this submission to ensure people living with diabetes in this province have the support to achieve their full health potential. With a national diabetes strategy like Diabetes 360°, linked to a provincial diabetes strategy, with strong leadership from government, in close collaboration with key stakeholders in the diabetes community, we can bend the impact curve of diabetes and significantly improve the lives of those with diabetes and all Islanders.