



Share your plan for arthritis prevention, treatment and care in Ontario

Arthritis is *one* word that describes more than 100 disease types and affects one in five Ontario residents. To effectively treat and manage the most disabling and costly types – osteoarthritis and rheumatoid arthritis – the next elected Ontario government must improve the level of arthritis prevention, treatment and care.

Question 1

Arthritis affects more than 2 million Ontario residents, yet no standardized model of arthritis care is available. This is particularly pronounced outside of the GTA. Where you live can be more important in determining treatment than how sick or disabled you are.

What will your government do to bring a high quality, standardized evidence-based model of arthritis care for all Ontario residents?

Question 2

A 2016 study predicts that by 2031, OA will cost the Canadian economy an estimated \$17.5 billion a year in lost productivity. Osteoarthritis forces people to stop working or work less due to pain, fatigue, and the demands of prescribed treatment therapies. The work time loss is significant because of the reducing number of workers available to replace retiring baby boomers after decades of low birth rates.

What will your government do to introduce patient education and exercise programs, such as GLA:D, that have been proven to significantly reduce hip or knee osteoarthritis symptoms?

Question 3

The new Ontario government must take steps to ensure the sustainability of prescription drug plans and the continued affordability of prescription drugs for Ontario residents. Biosimilars represent a potential source of significant cost savings to the health care system.

What will your government do to improve the uptake of biosimilars and increase accessibility to life saving medications and reduce out-of-pocket costs for Ontario residents living with inflammatory arthritis?

Question 4

Aboriginal Canadians have some of the highest rates of serious or lifethreatening arthritis in the world, and are at greater risk for becoming disabled by arthritis. Significant gaps in Aboriginal arthritis care currently exist in Ontario.

What will your government do to improve the healthcare and lives of Aboriginals living with arthritis in Ontario?

Question 5

Arthritis is the leading cause of disability and work disability in Ontario. About a quarter of the population with arthritis between 20 and 54 years of age in Ontario were not in the labour force because of their arthritis.

How will your government establish better prevention programs and facilitate flexible work arrangements to help reduce the direct and indirect costs of arthritis to Ontario employers and the Ontario economy?

Question 6

The economic burden of arthritis is expected to double within a generation and strain the Ontario's health system's ability to provide quality care to Ontario patients with arthritis.

Will your government take steps to increase the number of rheumatologists and arthritis trained allied health professionals to ensure timely, specialized care for Ontario patients with arthritis?