

Quebec drug plan caused deaths

Bitter fruit of PQ "reform"

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An exhaustive study of the impact of the Quebec government's new prescription drug insurance plan has found that it is causing many welfare recipients and seniors to stop taking their medication, resulting in hospitalizations and even deaths. According to the study, which was prepared by a team of leading Quebec epidemiologists, the new drug regime led, in a period of just 10 months, to the health of 4,000 Quebecers being placed at risk and to some 120 deaths.

In August 1996, the Parti Québécois (PQ) provincial government introduced mandatory prescription drug coverage for all Quebec residents. Those who are not covered by a private drug insurance plan are now compelled to participate in a government-run scheme, making them subject, depending on their income, to premium payments, user fees and minimum charges.

The PQ touted and continues to tout its drug plan as a major, progressive 'reform.' Former PQ Premier Jacques Parizeau recently cited it as proof of the Bouchard PQ government's 'social-democratic' bona fides. But the real purpose of the PQ drug plan was to slash \$300 million from the Quebec government's annual expenditure on prescription drugs for welfare recipients and seniors. (Prior to August 1996, welfare recipients received prescription drugs free of charge, while seniors paid \$2.00 per prescription to a maximum of \$100 per year.)

Pharmacists, doctors, social activists, and even the province's Ombudsman warned that the imposition of monthly user fees of between \$8.33 and \$62.50 per month on welfare recipients and an increase in the user fees for seniors' prescriptions would cause cash-strapped people to not take their medication as prescribed. But the PQ government was determined to slash its expenditure on prescription drugs and download the financial burden onto welfare recipients and seniors, among the poorest and most vulnerable elements in society. The legislation establishing the drug insurance plan was rammed through the provincial legislature in June 1996 and within two

months the new scheme came into effect.

Complaints by pharmacists over the plan's adverse effects on drug consumption led PQ Health Minister Jean Rochon to commission the epidemiologists' report in June 1997. By last summer it was complete, but Rochon and the government decided to keep it under wraps, forcing the report's authors to sign a pledge that they would not divulge its contents until January 1999. Rochon claims a six-month delay was needed to give his Ministry time to sift through the report, but many, including the PQ's parliamentary opponents and much of the press, accuse the government of suppressing the report because of its potential impact on the PQ's re-election campaign.

As it was, the gag order failed. The 600-page report was leaked to two Montreal newspapers earlier this month, smack in the middle of the campaign for the November 30 Quebec election.

Based on a detailed examination of the drug consumption patterns of 120,000 welfare recipients and 120,000 seniors, the report found that during the drug plan's three-stage, ten-month implementation period drug consumption fell sharply. For welfare recipients, medication consumption fell by 13.6 percent, 16.8 percent and 14.2 percent respectively over the three stages and for seniors, by 4.6 percent, 8.9 percent and 9.2 percent.

Within any large group, there will always be some who fail to adhere their drug regime. But the report found that following the imposition of user fees on welfare recipients, the number of welfare recipients not taking their medication as prescribed tripled. Those greatest at risk were mental patients, but the consumption of medication for potentially life-threatening conditions like diabetes, heart disease, and epilepsy also fell dramatically.

The report concluded that over a 10-month period the new drug regime had led to 4,046 'undesirable incidents'-that is admissions to hospitals, nursing and convalescence homes and an estimated 120 deaths. 'These are very conservative estimates,' said one of the

researchers, Robyn Tamblyn. 'When people reduce their essential drug use, they get into trouble: There is hospitalization, a small portion may be institutionalized and a small proportion may die.'

In seeking to discredit the report after it was leaked to the press, Rochon and Quebec Premier Lucien Bouchard seized on the figure of 120 deaths and the impossibility of establishing a direct causal link between the imposition of user fees, failure to follow a prescribed drug regime, and any particular individual's death. 'There's been some swindling over the question of the deaths,' grandstanded Bouchard. 'No one can say that they can draw causal conclusions between deaths and the introduction of the new [drug] regime.' Bouchard, nonetheless, has sought to mollify critics of the drug insurance plan, promising that changes will be made in the new year, including possibly providing medication for some conditions free of charge.

The report's authors, meanwhile, insist that the drug plan has been responsible for deaths, adding that the 120 figure was a conservative extrapolation based on their findings.

Leading epidemiologists outside Quebec have praised the report's methodology.

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