



It would be nice to think that Canada has the best health-care system in the world, and for many years that was true. But times have changed.

Look at the facts. Recently the Conference Board of Canada reported that this country ranks just 10th out of 16 countries in health performance. In 1970, we ranked fourth in the world in the ratio of doctors to population. Today, we're No. 26. The costs associated with the lengthy wait times in five critical medical areas (cancer, cardiac care, diagnostic imaging, joint replacement and sight restoration) identified by the federal government amount to \$14.8 billion a year.

Among the seven leading industrialized nations in the world, Canada has the lowest usage rates for electronic medical records.

Let us not fool ourselves into believing that the situation is not serious and that things are the same everywhere. While Canadian health care may be in dire straits, that is certainly not the case for many other countries that provide universal medical coverage for their citizens. It is also wrong to believe that nothing can be done to improve the situation. Other countries faced major problems that were identical to ours and managed to solve them. Compare what's going on in Canada with examples from these countries.

- The wait time for hip replacement surgery in France is only two weeks compared with a median wait time of three months in Canada.
- In Denmark, if a patient has to wait more than a month to be treated, the government pays the cost of treatment in the private sector.
- The maximum wait time acceptable under the law in Great Britain for a patient to be seen and treated by a physician in a hospital emergency room is four hours.



- Great Britain has also adopted a policy that allows no more than 18 weeks between the first contact with a doctor's office and the date a patient is examined, diagnostically tested and treated. That's four and a half months maximum! And bear in mind that the count starts from the moment a patient asks for a medical consultation, by telephone or otherwise.

The human body is not the only thing that needs movement to stay in shape. Our country's health-care system needs it, too.

We must not be afraid to look at what others are doing elsewhere

and what has been successful. Nor can we be afraid of seeking out viable new solutions that might, for example, involve greater participation by the private sector.

There is no one cure-all solution. There are many solutions. But what is important is that we be brave enough to seek them out.

Under my direction, the Canadian Medical Association has started an initiative to visit countries in Europe and learn from their successes and how they have overcome the problems that are plaguing us now. We will be looking closely at their research and their results to determine the most compatible and effective elements of their systems that can be applied to ours.

This trip is only the beginning. The most important, protracted and difficult part of the journey will begin once we return home. Then we must come up with a concrete plan for implementing these changes in ways that will work in our system. What we will be proposing is not only a new way of doing things but a new way of seeing things — a profound cultural change.

Dr. Robert Ouellet
President

Canadian Medical Association

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