

## Written submission for the 2022 Federal Budget

### **CANADIAN THORACIC SOCIETY**

August 2021

### RECOMMENDATIONS

- 1. The federal government should continue to invest and promote national campaigns to combat vaccine hesitancy.
- 2. The federal government should continue to invest in research to support the development of vaccines and novel treatments, including research to determine the long-term effects of COVID-19 on lung function across the spectrum of disease severity.
- 3. The federal government should invest in and improve access to programs known to improve clinical outcomes for those living with respiratory diseases and to support the delivery of care for patients with long-term health consequences from COVID-19.
- 4. The federal government should commit funding to ensure an adequate, accessible, and affordable national supply of personal protective equipment, medications and devices needed for treatment of respiratory illnesses; and invest in the domestic manufacturing of essential equipment and medicines.

### Introduction

The Canadian Thoracic Society (CTS) is a national medical specialty society and membership-based professional association for healthcare professionals working in respiratory care and research. Our mission is to promote lung health by enhancing the ability of healthcare professionals through leadership, collaboration, research, learning and advocacy, and providing the best respiratory practices in Canada. We develop and disseminate evidence-based clinical practice guidelines and engage in knowledge translation activities for the benefit of healthcare professionals in order to enhance respiratory care and improve patient outcomes.

# <u>Recommendation 1</u>: Broad vaccination promotion to combat vaccine hesitancy.

As Canadians have seen and learned over the past year, a safe, effective vaccine is a critical element in the toolbox to combat COVID-19 and begin a post-pandemic recovery. CTS and our partners are strong advocates of immunization programs in Canada and will continue to play a key role in promoting the uptake of COVID-19 vaccines. For instance, the pan-Canadian COVID-19 Respiratory Roundtable led by CTS issued a joint statement urging the federal, provincial and territorial governments to prioritize people living with lung disease who are at higher risk for more serious COVID-19 complications in the vaccination rollout. CTS and the Canadian Society of Allergy and Clinical Immunology developed a guidance sheet for healthcare professionals on biologic therapy and the COVID-19 vaccine – advice for individuals with asthma.

CTS is pleased to see the federal government has invested in the Immunization Partnership Fund to support partners across the country who are working to increase the uptake of COVID-19 vaccines. While this is a step in the right direction, more needs to be done to combat vaccine hesitancy to ensure all eligible Canadians receive the COVID-19 vaccine.

The federal government should also strengthen its efforts to tackle anti-vaccine misinformation online that has no scientific grounding and limits the effectiveness of Canada's public health responses, while putting our population at risk.

Respirologists know that patients with underlying lung conditions such as Chronic Obstructive Pulmonary Disease (COPD) and interstitial lung disease are at an increased risk of developing severe complications of a SARS-CoV-2 infection. The same is true for other respiratory illnesses that can be prevented with robust vaccination programs, including influenza and pneumococcal. Overall, in the context of historic deficits, government will save money on acute care when it invests proactively in enhanced vaccination promotion. This includes providing adequate resources to healthcare providers to discuss vaccine safety, effectiveness and schedules for their patients, especially for those in high-risk groups.

### CTS Recommends:

- The federal government continue to invest and promote national campaigns to combat vaccine hesitancy. This strategy should include plans to tackle misinformation and disinformation online.
- The federal government continue to work directly with organizations who are working to increase
  the uptake of COVID-19 vaccines and other vaccinations, such as Immunize Canada and its
  member organizations (CTS is an active member) to leverage the reach of its constituencies with
  a renewed emphasis on prevention in healthcare.

<u>Recommendation 2</u>: Investing in research to support the development of vaccines and novel treatments, including research to determine the long-term effects of COVID-19 on lung function across the spectrum of disease severity.

The Government of Canada should support innovations in drug development and manufacturing, including industry start-ups and by creating incentives for industry to be Canada-based. This will both expand our domestic capacity for innovation, drug development and manufacturing, while promoting research from Canada's talented scientists and researchers.

We owe good answers to Canadians affected by COVID-19. Investments in the Government of Canada Tri-Agency Funding Councils for research in this area must continue the critical work in accelerating the availability and use of high-quality and real-time evidence to prevent, detect, treat and manage COVID-19, including understanding the impact of new variants on disease severity and progression.

As Canada's interprofessional special society for respirology and respiratory guidelines, an evidence-based strategy for appropriate lung monitoring to detect and regularly monitor early respiratory impairment post-COVID-19 infection, detailing individuals at high risk, and strategies to prevent and treat post-COVID lung disease are high priorities for CTS.

The CTS and its <u>members stepped up during the COVID-19 crisis</u> to provide guidance to healthcare professionals, governments and Canadians through this pandemic. We are well-positioned to help with the implementation of new guidance to our interdisciplinary community of practice, such as by disseminating the research findings through the *Canadian Journal of Respiratory, Critical Care and Sleep Medicine* and through presentations and training workshops delivered at the Canadian Respiratory Conference.

#### CTS Recommends:

• The federal government continue to invest in research to support the development of vaccines and novel treatments, including research to determine the long-term effects of COVID-19 on lung function across the spectrum of disease severity.

<u>Recommendation 3</u>: Investing in and improving access to programs known to improve clinical outcomes for those living with respiratory diseases and to support the delivery of care for patients with long-term health consequences from COVID-19.

As Canada considers how to enhance the delivery and quality of care throughout the remainder of this pandemic and recovery, there are a number of capacity and resource concerns the federal government will need to address and assist the provinces in planning for. The CTS is concerned with the backlog for people living with lung disease, including asthma and COPD, who would typically benefit from non-urgent, outpatient in-person consultations, diagnostic testing in pulmonary function testing (PFT) laboratories and imaging. Many of these facilities were fully or partially closed in an effort to stop the spread of COVID-19.

Physiotherapists are concerned about the lack of pulmonary rehabilitation (PR) programs in Canada and the funding needed to increase the availability of these programs and build capacity.

CTS has conducted research in PR therapy for people with COPD and other chronic lung disease. Through extensive research, CTS has identified 14 core quality indicators (QIs) defining the minimal requirements for PR. These QIs can be used to improve and develop strategies to improve PR. Pulmonary rehabilitation is crucial for people living with COPD and other chronic lung disease, in preventing exacerbations and improving quality of life. In 2015, only 155 healthcare facilities in Canada offered PR. Of these facilities, 60% were in hospitals and 24% were in public health units. These therapies have been limited in many care settings as a result of the COVID-19 pandemic but access to this intervention was woefully low even before the pandemic. Just 0.4% of Canadians living with COPD have access to pulmonary rehabilitation. In 2018-19, COPD was the leading cause of hospital admissions in Canada after childbirth.

In addition to PR's effectiveness in treating those with COPD, early evidence demonstrates its effectiveness in treating post-COVID patients. The Alberta Health Services conducted a rapid review of the published and grey literature to support the development of provincial and national recommendations with regards to PR for individuals recovering after a COVID-19 infection. This review reported improvements in exercise capacity, pulmonary function, and quality of life among post-COVID patients who had previously been hospitalized.

The effectiveness of PR in treating post-COVID patients further demonstrates a need to reduce backlogs and expand capacity for health services to offer it in treating patients. The safe return to PR must be a priority in the post-peak COVID-19 era as a way to improve health outcomes for people with lung disease and for those who have contracted the infection over the course of the pandemic.

It is clear that the pandemic has accelerated the adoption of technology on many fronts. One positive development from the pandemic has been the fast adoption of telemedicine practices across the country and across disciplines to provide diagnostics and care at a distance. As Canadians have adapted to this model so have physicians, who are more increasingly comfortable engaging with patients online. However, further research is necessary to establish best practices for telemedicine. The opportunity remains to improve the functionality and the use of telemedicine and nation-wide networks when it comes to lung conditions. Notwithstanding clear barriers in broadband capacity for many communities, this development could lead to greater efficiencies and access to care over the years to come and its potential benefits makes it a worthwhile investment in the health of Canadians.

### CTS Recommends:

- The government invest in specialized care and supports for patients who will be left with respiratory disability due to COVID-19 and need unique support that could differ from other respiratory patients in managing the long-term effects of COVID-19.
- The government invest in research to establish best practices in telemedicine to broadly adopt and develop telemedicine networks across Canada in the respiratory field of healthcare.
- The government support the development and wide scale implementation of Pulmonary Rehabilitation programs that meet the recommended core Qls in order to standardize quality and improve access to this critical therapy.
- The government encourage the resumption of activities in Pulmonary Rehabilitation therapy and in Pulmonary Function Testing facilities, with an emphasis on safety including appropriate PPE use, cleaning protocols and pre-visit viral testing.

<u>Recommendation 4</u>: Ensuring an adequate, accessible, and affordable national supply of personal protective equipment, medications and devices needed for treatment of respiratory illnesses; and investing in the domestic manufacturing of essential equipment and medicines.

An adequate, accessible, and affordable national supply of personal protective equipment (PPE) and devices needed for treatment of respiratory illnesses for the healthcare sector is critical to managing COVID-19 and any pandemic moving forward.

As the evidence has become increasingly clear around the predominance of COVID-19 spread via aerosols, it is imperative that we are not only reflecting new data in guidance but also providing the necessary tools for healthcare workers in higher risk settings. CTS has been actively working with a healthcare partnership group, the Aerosol Precautions & PPE Stakeholder Roundtable, in enhancing collaboration around the creation of clear aerosol guidance across the country, examining existing guidelines across Canada, and advocating for effective and up-to-date health and safety guidance for healthcare workers and patients in high-risk settings.

As it stands, many healthcare workers across the country have faced barriers in accessing the proper PPE to mitigate against aerosolized spread in healthcare settings. It is our belief that providing proper protections in these settings should be the government's number one priority in ultimately bringing an end to this pandemic and allowing for the resumption of efficient healthcare practices. At the end of the day, any healthcare worker who wants to use an N95 mask for their own protection should be able to.

CTS works with Health Canada to mitigate the effects of shortages of salbutamol inhalers which have resulted from stockpiling during the pandemic and has produced evidence-based clinical guidance for physicians and patients on substitution in the management of asthma and COPD. Other medications such as sedatives and paralytics have also been in short supply. This speaks again to the need to move away from sole source manufacturers and to bolster Canadian production and a secure supply chain and inventory of these essential healthcare products.

### CTS Recommends:

 The federal government should commit funding to ensure an adequate, accessible, and affordable national supply of personal protective equipment, medications and devices needed for treatment of respiratory illnesses. This would include investing in the domestic manufacturing of essential equipment and medicines.