

Press Release

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MANAGING CHRONIC DISEASE HUGE CHALLENGE FOR ONTARIO *Report Says Health System Slowly Improving But Gaps Need Attention*

TORONTO, CANADA (March 26, 2007) — Ontario is facing a huge challenge to reduce and better manage chronic diseases, the Ontario Health Quality Council (OHQC) said today in releasing its second annual report.

“The way we handle chronic diseases is at the top of our ‘needs improvement’ list,” said OHQC Chair Ray Hession. “The number of people living with chronic disease, such as arthritis, diabetes, and heart failure is increasing as our population ages – and yet many of these cases could be prevented or better treated. Ontario needs a coordinated, system-wide, long-term strategy for reducing and better managing chronic diseases. People will be healthier and it will ease a large pressure on our health system.”

Highlights of the OHQC’s findings on chronic diseases in Ontario included:

- 1-in-3 Ontarians has one or more chronic diseases. Of those, almost 4-of-5 over the age of 65 have one chronic disease, and of those, about 70 percent suffer from two or more.
- At least 60 percent of Ontario’s health care costs are due to chronic diseases.
- Obesity increases the likelihood of developing many chronic diseases. One in three Ontarians over the age of 18 is overweight and 15 percent are obese.
- South Asians and Latin Americans are at a higher risk of developing type 2 diabetes. Aboriginal Ontarians also are three to five times more likely to develop this disease.
- Over 80 percent of cases of coronary heart disease, such as heart attacks, and type 2 diabetes, and over 85 percent of cases of lung cancer and chronic obstructive lung disease such as emphysema could be prevented through healthier lifestyles – including nutritious food, physical fitness, clean environment and meaningful, safe work.

Despite the chronic disease challenge, the OHQC reported that, overall, there are positive signs that Ontario is making slow but steady progress in improving its health system:

- Ontario’s Wait Time Strategy has reduced wait times in the targeted areas of cancer and cardiac care, hip and knee replacements, diagnostic imaging and cataract surgery. Success was achieved through a targeted strategy and supplementary funding. The model could be applied more broadly in the health system.

- Ontario has opened 359 telemedicine centres in 190 communities, many of them in rural and remote locations. These centres enable patients to use computer links and video equipment for long-distance “virtual appointments” with specialists who may not exist in their communities.
- Since 2003, an additional half-million people reported that they have a regular doctor, which means we are keeping pace with population growth. The overall supply of health-care providers is growing and will continue to grow in the future because of the increases in seats in education programs.
- Between 2000 and 2005, the number of 12-19 year olds who smoke daily dropped by half, from 11 percent to 6 percent.
- The percentage of heart attack patients admitted to hospital who survive the critical 30-day post-attack period, has grown from 85.5 percent to 88.9 percent over six years.

The OHQC report emphasized that Ontario must work to continually improve the quality of its publicly funded health care.

“Ontarians want independent third bodies to regularly rate, measure and publicly report on their health system,” Hession said. “The OHQC does this on a province-wide level, but we also need this to be done at the regional level and for each local health care organization. Practices such as accreditation drive improvements in quality by measuring how well individual institutions stack up against proven best practices and by spotlighting where there are problems, so that improvements can be made.”

For the second year in a row, the OHQC reported that a major barrier to accountability and quality improvement is a lack of information about what is taking place in the health system. “If we can’t measure quality, we can’t manage it effectively, it’s that simple,” Hession said.

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For further information, please contact:
 Ania Basiukiewicz
 Communications Assistant
 Tel: 416-323-6868 x 221

About the OHQC

The Ontario Health Quality Council is an independent agency funded by the Government of Ontario through the Ministry of Health and Long-term Care. The Council reports directly to Ontarians on access to publicly funded health services, human resources in health care, consumer and population health status, outcomes of the health system and ways of improving it. The Council is made up of 10 appointed members from across the province who have a diverse range of expertise, including hospital governance, medicine, academic and research work, business, public and health policy, ethics and aboriginal and community leadership.