Closer to private health care options?

he lawsuit that was supposed to settle whether Canadian citizens have the right to timely health care has been delayed.1 Brian Day, former president of the Canadian Medical Association, had initially brought a lawsuit in 2009 to allow his private clinic to exist. A small group of his patients joined him in 2012. The hearing was supposed to commence in September 2014. Since 2012, lawyers on both sides have swelled the process, with dozens of witnesses expected. The lawsuit is expected to take several months to play out. Apparently both sides wanted the delay in order to attempt settling some of the issues out of court. The complexity of the overall case has become overwhelming; however, the initial events that led to the patient portion of the lawsuit seem to be plainly simple. The care of 2 patients with cancer and 2 others with musculoskeletal ailments removing them from normal daily activities were being held up by long wait times. The patients just wanted to get on with a normal life or live what little time they had left off of a wait list. The British Colombia government did not agree with that.

Other attempts in Canada to find an alternative pathway are not being accepted by all those involved. A proposed class action suit in Quebec² has seen a private citizen bringing a suit against physicians allegedly charging unreasonable amounts for local anesthesia or eye drops. This suit should never have been necessary. Doctors trying to deliver care outside the constrictive envelope of the current health care structure may be charging large amounts for medications or actions that are not on the formulary. Physicians trying to pay the overhead for their clinic space may just be attempting to find ways to stay afloat in the face of government opposition to any outside care options despite the Chaoulli judgment of 2005.³ Forcing the physicians into this position is unfair to everyone — patients and doctors alike.

It has become painfully obvious that the health care system is broken. Rising demand and increasingly expensive incremental medical and technological advances are pushing the boundary of affordability and safety in our current health care programs. We as a people no longer

have access to timely health care, particularly in surgery. Period. Certainly smaller and smaller pockets of surgeons still have an ability to treat patients — but this is no longer the rule. More and more studies show that timely care is cost-efficient⁴ — and not just for conditions associated with high mortality. Operating on the walking wounded promptly takes away the wounded adjective and allows a return to normal life. The BC lawsuit judgment will hopefully determine whether we can have an alternative pathway without prosecuting physicians or patients trying to speed up patient care. It will not mean the end of the current social health care system. I think we need to have options. The current amount of money being spent on health care by our governments is unsustainable. If we do not propose options now, we will not have a recognizable health care system much longer. It would be nice if there was a timely judgment on the Brian Day case, but it seems mired in bureaucracy — as much bureaucracy as the health care system it is examining.

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