



Ontario  
Chiropractic  
Association

## **2019 PRE-BUDGET CONSULTATION**

**Presenter:**

**Nancy Gale**

**VP STRATEGIC COMMUNICATIONS AND STAKEHOLDER  
MANAGEMENT, ONTARIO CHIROPRACTIC ASSOCIATION**

**DATE:** THURSDAY JANUARY 24, 2019

**TIME:** 4:15PM  
7 MINUTES FOR PRESENTATION AND 8 MINUTES FOR QUESTIONS

**LOCATION:** HOLIDAY INN - WEST HALL, 1498 VENETIAN BOULEVARD, SARNIA,  
ONTARIO

Good afternoon. My name is Nancy Gale and I'm the Vice President of Strategic Communications and Stakeholder Management at the Ontario Chiropractic Association. The Association represents over thirty-five hundred chiropractors in Ontario, mostly working as small business owners with employees in your communities.

Joining me is Marg Harrington, Director of Government Relations, Health Policy and Program Development.

Ontario is open for business, and people want to work.

Yet, sadly many hard working Ontarians are forced into unemployment due to musculoskeletal injuries and conditions or MSK conditions affecting the muscles, bones and joints.

Before we start with the evidence of how we can help you save taxpayers health dollars and end hallway medicine, I want to introduce you to two hard working constituents – two patients.

Leroy Gallagher suffered a knee injury that caused problems in his back and neck, and left him unable to work.

After receiving chiropractic care, he was back at work as an electrician, when, not long ago, he could barely move and was dependent on government assistance.

Next, I want to tell you about Lisa Morris. Lisa suffered with severe low back pain for years.

She made multiple visits to the emergency department, had many diagnostic tests and she was prescribed opioids by her doctor.

Tragically, Lisa became addicted – that's the face of many opioid dependent people in Ontario.

Then Lisa received care through the **Primary Care Low Back Pain** program offered at her local clinic.

Like Leroy, Lisa received a comprehensive physical assessment and hands-on treatment – all from a chiropractor.

Lisa's back pain was resolved.

And she received support by her chiropractor, in partnership with her pharmacist and prescribing doctor, to reduce her opioid dependency.

I'm so thrilled to share with you that Lisa is now completely off opioids and no longer visits the emergency department – all thanks to the ***Primary Care Low Back Pain*** program in her community.

Treating MSK conditions can help save taxpayers' dollars by getting hard working Ontarians back to work.

In Ontario, MSK conditions cost taxpayers over two billion dollars annually in medical expenditures, in addition to the loss in worker productivity and associated disability payments.

Every year, over four hundred thousand Ontarians with MSK conditions visit an emergency department.

In fact, back pain is one of the top four reasons why people visit emergency departments in Ontario.

Over ninety-seven per cent of those patients are not admitted to hospital. They are sent home. But they contribute to overcrowding, increased wait times and health care costs.

Hospitals are not the place for treating these conditions.

Tragically, back pain is also reported in over half of regular opioid users. Research reveals that in Ontario, back pain is the most common diagnosis for opioids prescriptions by both emergency and family physicians.

The Two Thousand and Seventeen Canadian Guideline for Opioids for Chronic Non-Cancer Pain recommends non-drug approaches, such as manual therapies performed by chiropractors and other MSK practitioners before prescribing opioids.



The ***Primary Care Low Back Pain*** program, launched by the Ministry of Health and Long Term Care in twenty fifteen, provides MSK care in community settings.

Chiropractors, physiotherapists and other MSK experts work with physicians and nurse practitioners to provide appropriate care for patients with low back pain.

They work on an annual operating cost, no additional OHIP billing, so the cost per program is known; there's no red tape or lengthy referral processes and the program can be launched and scaled wherever it makes sense in a local community.

Today, there are seven ***Primary Care Low Back Pain*** programs across Ontario.

And they have:

- Reduced unnecessary emergency department visits and diagnostic tests
- Substantially decreased pain medication use, including opioids
- Improved patients' outcomes so they can return to work and,
- Increased equitable access to services for vulnerable Ontarians

An evaluation of the **Primary Care Low Back Pain** Programs, conducted by the Centre for Effective Practice, found that:

Seventy-one per cent of physicians reported ordering fewer diagnostic tests, such as MRIs for patients that were part of the low back pain programs.

Eighty-three per cent of patients agreed or strongly agreed that they now rely less on medication to help manage low back pain;

And ninety-four per cent of patients are satisfied or extremely satisfied with the assessment and treatment they received. Now that's patient satisfaction!

Expanding the number of ***Primary Care Low Back Pain*** programs across Ontario will keep patients, like Leroy and Lisa, and hundreds of thousands of other Ontarians out of emergency departments and reduce hallway medicine by providing appropriate assessment and treatment of low back pain.

The numbers are simple. The cost of an emergency department visit starts at about five hundred dollars.

Four hundred thousand people with MSK conditions visit Ontario's emergency departments each year.

But ninety-seven percent of those patients are not admitted.

That's a total cost of one hundred and ninety-four million dollars of emergency department costs with no patient outcomes.

Instead, if a patient visits a ***Primary Care Low Back Pain*** program in their community, that patient will receive an assessment, a diagnosis, a care plan and actual treatments – all for a fraction of the price of one ED visit.

We will be submitting a detailed business case on January twenty-ninth.

Better care, less cost, less ED congestion,  
and less opioid prescriptions.

With think that makes financial sense for  
Ontario.

Thank you.