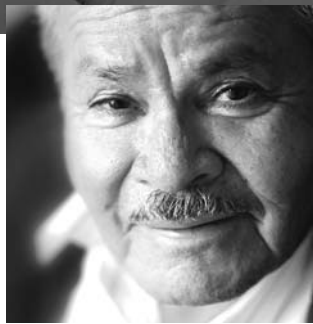


Support Rights of Quebec Kidney Patients



Problem: Access to appropriate treatment

Paul*, a 60-year-old kidney patient, thought he was lucky to be in

Quebec where his health care was pretty good. Sure, he was hooked up to a dialysis machine three times a week, but he felt good and was still working.

All of this changed about three weeks ago. Paul was told that the hospital would no longer administer a medication that he was taking in addition to his kidney treatment. This medication, called erythropoietin (or "epo"), is a replacement for a hormone normally produced by the kidneys. Without it, the body does not make enough red blood cells, resulting in a condition called anemia. Untreated, anemia causes extreme fatigue, stress on the heart, and, eventually, death.

Kidney patients used to require blood transfusions but since 1990 have been successfully treated with epo. The medication is paid through the Quebec Drug Plan. Like most hemodialysis patients, Paul received the epo through the same lines that were used for his blood filtration.

Three weeks ago, the hospital informed Paul it would no longer inject epo when he went in for hemodialysis. A Quebec policy threatens to charge hospitals for any medication they administer, even if it was paid for through the drug plan and brought in by

the patient. The dialysis clinics had continued to administer epo, hoping the governments would recognize the serious implications of this policy for dialysis patients. Now the government is threatening to enforce this directive.

Paul was given two options. The first was to go a CLSC to have the epo injected. The second was to change to a different anemia medication that he could inject subcutaneously (under the skin) by himself at home.

After consulting with his doctor, Paul decided he did not want either option. He had been on the same medication with no problems for five years and was concerned about switching. Moreover, he knew any protein injected under the skin carries a greater risk of side effects than one injected by IV. Across Canada, 85% of hemodialysis patients receive epo by IV. But Paul knew he could not take more time from his job to have the medication injected at a health center.

In Quebec, patients are being exposed to unnecessary risks and denied treatment of choice, not for scientific, medical or even financial reasons but because of a bureaucratic directive. The Anemia Institute for Research & Education and AGIR (Association générale des insuffisants rénaux), along with physicians and other healthcare providers, have written to the Quebec government asking for a reconsideration of this directive. The government doesn't seem to care. We need your support to make a difference.

*Name and image have been changed to protect patient confidentiality.

"I believe dialysis patients in Quebec have the right to the same standard of treatment for anemia as patients in other provinces."

Name _____

Address _____

Email (Optional) _____

Mail to: Anemia Institute for Research & Education, 2075 rue de Champlain, Montreal, QC H2L 2T1 Visit www.anemiainstitute.org to send a message directly to the health minister or your MNA.

Association générale des insuffisants rénaux

Anemia Institute for Research & Education