


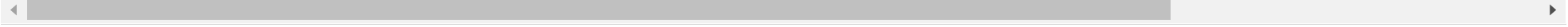
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# Canadians dying while on medical wait lists reaches five-year high, report finds

*Government data shows more than 17,000 deaths among patients waiting for life-saving or quality-of-life procedures. Real numbers may be higher*

National Post Staff

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A new report finds that deaths while waiting for medical procedures is up 64 per cent over the last five years in Canada. PHOTO BY GETTY IMAGES

The number of Canadians dying while on wait lists for surgery or diagnostic scans has reached a five-year high, according to numbers gathered by government policy watchdog SecondStreet.org.



The group's latest policy brief, titled *Died on a Waiting List*, claims that government data collected through Freedom of Information requests show more than 17,000 patients died while on wait lists in 2022-23.

This includes patients waiting for potential life-saving procedures such as heart operations, and those waiting for quality-of-life operations such as hip surgery. Times on the wait lists varied from less than a week to more than 10 years.

“We’re seeing governments leave patients for dead. It’s deplorable,” said SecondStreet.org president and report author Colin Craig. “More money won’t solve the problem. Governments have tried that for 30 years. Only meaningful health reform will reduce patient suffering.”

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The report points out that annual per capita government spending on health care has increased to \$5,607 from \$1,714 since 1992, a rate double that of inflation over the same period.

But despite that, data from health care bodies that provided information each of the last five years found an increase in surgical wait list deaths of 64 per cent. In Ontario alone, 101 patients died while waiting for heart surgery, and more than a third of those had been on the list longer than the maximum recommended wait times.

“Ontario, Alberta, and other provinces are hiring private clinics to help provide surgery to patients in the public system. This is a good first step,” said Craig. “Sweden and other European countries have shown this can help. However, more needs to be done.”

The report notes that some provinces provided only partial data to requests for information, and that the true number of people dying on wait lists may thus be even higher. Extrapolating from the known data, it estimates that more than 31,000 patients died on wait lists last year.

In addition to those higher numbers, the report includes several caveats. For instance, it notes that a patient may not have been medically ready for a particular treatment at time of death, or they may have been waiting to receive another procedure first.

There are also probably cases in which death occurred for reasons unrelated to the patient's condition. "For example," the report states, "the system may have been timely about scheduling a procedure or appointment with a specialist but, during the wait, the patient died in a motor vehicle accident."

However, the report cautions against dismissing deaths that occurred while patients were waiting for quality-of-life procedures such as eye surgery or a hip replacement. It points out that inactivity while waiting for such operations can contribute to other health problems and lead to premature death. Also, "patients often value eyesight and mobility as much as life itself."

In addition to calling for more private-sector involvement in health care, and more choices for patients who may want to pay out-of-pocket for procedures, the report calls for better tracking and disclosure by provincial governments,

"At the very least," said Craig, "governments need to do a better job of tracking this problem and assessing just how many patients died because they had to wait too long for surgery. This would remove ambiguity around waiting list deaths while improving accountability. Such analysis could also help policymakers identify problem areas and address problems within the system."

The report singles out Nova Scotia for its "insightful data" in this respect. That government was able to report that, while there were 532 total waiting list deaths, only 50 were cases in which patients were waiting for procedures that could have potentially saved their lives. Among those, it said, 19 had been on wait lists longer than the recommended maximum time.

But Nova Scotia also held the unenviable record for longest wait list time before death, for a patient who had spent 4,009 days (almost 11 years) waiting for a septoplasty — a procedure that reopens the septum, helping to improve breathing and reduce the risk of sinus infection.

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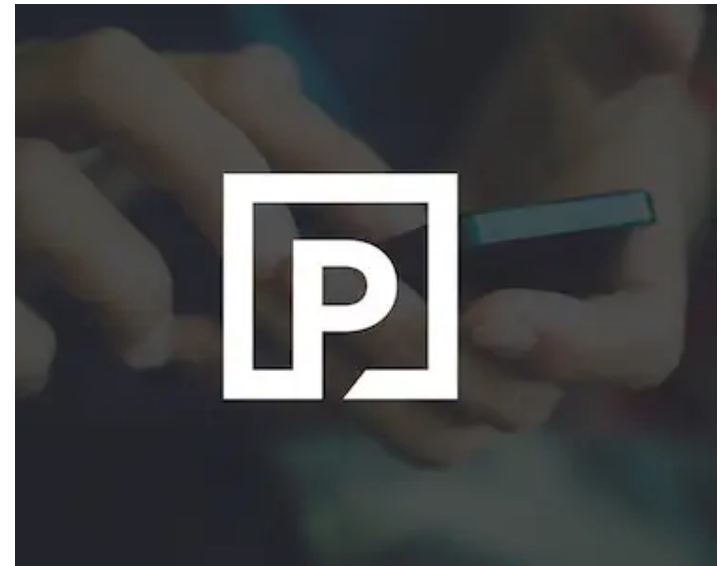
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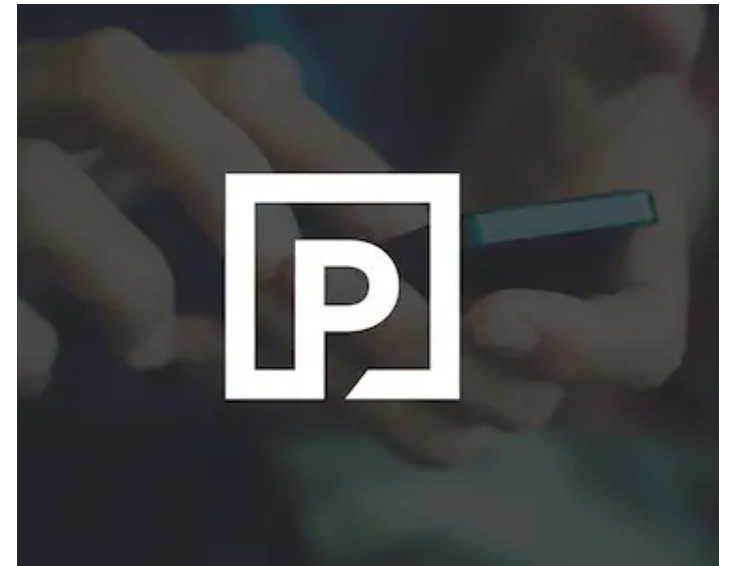
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