

Globe and Mail (March 25, 2003)

Ottawa tells clinic to suspend cancer test

By BRIAN LAGHI

Ottawa — Health Canada has ordered a private medical clinic providing high-tech cancer diagnoses at \$2,500 each to suspend the service, The Globe and Mail has learned.

The order came after a letter of complaint from Ontario Health Minister Tony Clement, who said the department was opening the door to two-tier health care in the province.

Federal officials said yesterday that their order had nothing to do with the fact that the company, CareImaging, was charging for the tests, but, rather, that the tests were being done on the wrong type of patient.

Ottawa gave CareImaging the right to open its doors two weeks ago, allowing it to operate a positron emission tomography machine, which is used as a diagnostic tool for cancer and heart disease and other ailments. Like other PET scans, the Mississauga machine was to be used in clinical trials, because the drug needed to facilitate the scan is still considered experimental.

A federal spokesman said yesterday that CareImaging's approval to operate was strictly for patients with heart problems, not those suffering from cancer.

"There was a variation from the approved protocol. They weren't following it exactly the same," said Ken Moore, risk process manager of the department's Biologics and Genetic Therapies Directorate.

"They will need to get approval before they would be able to start enrolling patients again."

Mr. Moore said the department only learned that the company was not operating within its mandate after it opened two weeks ago.

One of CareImaging's owners, Dr. Robert Stodilka, would not say yesterday whether it has shut down.

Critics said yesterday that Health Canada was behaving unethically by allowing the company to charge fees for what amounted to an unapproved treatment.

Mike McBane of the Canadian Health Coalition said the federal government should now accept the recommendations of Health Care Commissioner Roy Romanow, who said last year that diagnostic equipment should be covered under the Canada Health Act, which would prevent private firms from charging for such services.

"This should not be in the hands of private entrepreneurs," he said. "It's a perversion of medicare and of government."

Federal officials have said there is nothing that prevents firms from charging for clinical trials. Typically, however, corporations such as large pharmaceutical companies don't levy charges because of the experimental nature of the trial.

Mr. Clement also raised concerns in his letter to federal Health Minister Ms. McLellan, saying the department was using clinical trials as a back-door entry for private firms to charge for services.

Normand Laberge, chief executive officer of the Canadian Association of Radiologists, said the order is unfortunate because it may mean that many needy patients will go without the service. He added that three other PETs in Canada may also be forced to stop operating because of the federal order.

"This could be a real disaster for patients in need," he said. "It may close down access to PET scans in Canada. If that's the effect, clearly people are going to die."

Mr. Laberge said the PET scan has been approved for use in several countries, but that government authorities are reluctant to give their okay to the machines in Canada because they don't want to have to pay for them. Mr. Laberge said various levels of government were warned three years ago that the new high-tech equipment was coming down the pike and to be prepared for it. Ontario is in the process of setting up a series of clinical trials to test the equipment.

A private Vancouver firm has also established a clinical trial. It does not charge for patients who are part of the trial, but does have a \$2,500 fee for others who want the test.

Mr. Moore said his department sent out letters last week asking other PET scan operators to give assurances that they were using their PET scans for the purposes for which they are intended.

Globe and Mail (March 22, 2003)

Ontario accuses Ottawa of two-tier health care

Federal government allows private clinic to charge \$2,500 for high-tech cancer tests

By BRIAN LAGHI

OTTAWA -- The Ontario government is accusing Ottawa of promoting two-tier medicine after Ottawa gave the green light to a new private clinic that charges \$2,500 each for experimental, high-tech tests for cancer.

Ontario Health Minister Tony Clement issued the warning in a confidential letter to his federal counterpart, Anne McLellan, after Ottawa gave permission for the firm, CareImaging Corp., to operate a positron emission tomography scanner in Mississauga.

Patients will pay up to \$2,500 each for the test, though the technology is still being studied by the Ontario government. Without provincial approval, only Ottawa has the right to give the company permission to go ahead.

In his letter, Mr. Clement says that Ottawa indirectly is opening up the opportunity for the wealthy to have access to certain treatments that others would not have.

"I would ask that you address these issues urgently to ensure that the clinical trials system or the use of investigational drugs in Canada does not become a back door for inequitable access," he says in the letter, a copy of which was obtained by The Globe and Mail.

CareImaging opened the facility last week. Proponents of the technology said the PET scanner has the ability to determine the spread of disease and distinguish between benign and malignant tumours.

However, the Ontario government has not decided whether to fund the service, saying the effectiveness of the technology has not been conclusively proven.

Although the machines are in use in several countries, some cancer specialists wonder whether they are worth the \$3-million purchase price. There are four PET scanners in the province and about 10 across the country, but most are used for research purposes only.

"There are bona fide questions about the utility of this," said Bill Evans, executive vice-president of Cancer Care Ontario. Dr. Evans said the province is in the process of establishing four clinical trials across Ontario to test the service. The government will not charge for the tests.

Normand Laberge, chief executive officer of the Canadian Association of Radiologists, said the technology is used the world over, and there is little doubt that it works. Still, he said, it is wrong for individuals to be forced to pay for testing technology the government has not approved.

"Normally, you do not charge patients to serve as guinea pigs," Mr. Laberge said. "It's rather the reverse. When there's a risk involved, you get paid. If it is experimental, then it shouldn't be offered for payment."

Tara Madigan, a spokeswoman for the Health Department, said there is nothing in the regulations that prevents individuals from being asked to pay for clinical trials.

A spokesperson for Ms. McLellan said the minister would not comment publicly.

"We don't use the media to respond to letters from ministers and counterparts," said Farah Mohamed. "We respond in writing in due course."

But federal officials were scrambling late in the week to ameliorate the situation, though they would not divulge their plans.

In his letter, Mr. Clement says his department has been left in the dark about who can participate in the study. "The terms and conditions under which people can enroll in this study are still not clear to my ministry," he wrote.

But one of the clinic's owners said this week that only people suffering from certain types of cancer can apply for the service.

Nek Manji, a part owner of the clinic, said that patients suffering from cancers of the lung and breast, as well as from lymphoma, melanoma and two other cancers, can get the tests.