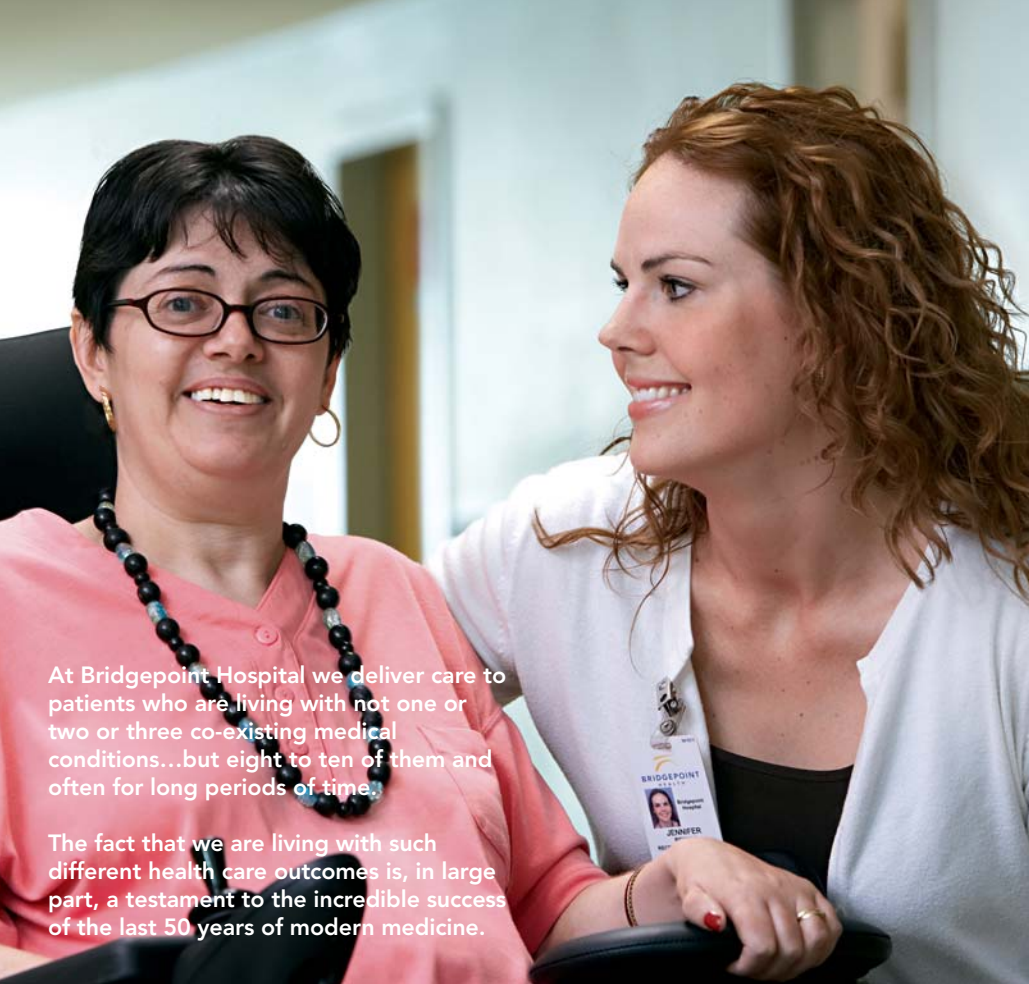




**There's a new
disease out
there**

Chronic disease affects the health of 16 million Canadians and accounts for 87% of all disability and 70% of direct healthcare expenditures in Ontario

COMPLEX CHRONIC DISEASE



At Bridgepoint Hospital we deliver care to patients who are living with not one or two or three co-existing medical conditions...but eight to ten of them and often for long periods of time.

The fact that we are living with such different health care outcomes is, in large part, a testament to the incredible success of the last 50 years of modern medicine.

Bridgepoint Health is Canada's first healthcare organization dedicated solely to the prevention and management of Complex Chronic Disease. It's also Canada's only research and patient care centre committed to changing the world for people living with Complex Chronic Disease. Bridgepoint Health is now building a unique "campus of care" to foster a new generation of researchers, doctors, nurses and therapists specifically qualified to treat this epidemic and deliver specialized care to Complex Chronic Disease patients. This way, we'll be ready when life changes for you. Because life always changes. To find out more, visit www.bridgepointhealth.ca or www.lifechanges.ca.

We all know that the key to managing the epidemic of chronic disease is **health promotion and disease prevention.**

And, that requires all of us to take more responsibility for our health.

We need to make a fundamental shift in our thinking:

- From acute, episodic to chronic, long term
- From treating sickness, to promoting wellness
- From supply side thinking, to the demand side of service delivery
- From paternalism towards patients, to a partnership with patients

By Marian Walsh,
President and CEO,
Bridgepoint Health



AT BRIDGEPOINT HOSPITAL we deliver care to patients who are living with not one or two or three co-existing medical conditions... but eight to ten of them and often for long periods of time.

The fact that we are living with so many chronic conditions is, in large part, a testament to the incredible success of the last 50 years of modern medicine.

Our proposition is that the success of modern medicine has resulted in what has essentially become the unanticipated epidemic of chronic disease and moreover, chronic disease is most often accompanied by its lurking twin – complexity.

SO WHAT DOES THAT MEAN?

It means, first of all, that today's patients are fundamentally different than those we have been dealing with in the recent acute, reactive, save lives phase of modern health care.

And it is this new patient that will ultimately force us to radically transform health care well beyond the restructuring, productivity improvements and supply management projects that have characterized the last 20 years of health care reform.

At the organizational level this new patient will require very different health care roles, interventions and responses then we have been used to.

WHAT CAN WE DO? RAISE AWARENESS

First of all, we must raise the profile of chronic disease and its twin, complexity. We need to increase public dialogue around this critical issue.

Bridgepoint Health has launched a new awareness campaign that capitalizes on the theme of "a new disease out there" by running the names of several common chronic diseases together to draw attention to the current reality.

Neurodiabetesity. Osteocanceritis. Fibrodepressiblepsy.

These words are part of our 2007-2008 public awareness campaign. This campaign is helping us to raise awareness of the fact that chronic disease is reaching epidemic status and we need to make a fundamental change in our thinking.

In 2002, the World Health Organization declared chronic disease to be the single greatest health care challenge facing the developed world. If we as health care leaders are serious about the quality and sustainability of our Canadian health care system, we must vault chronic disease and its twin complexity to the top of our agenda.

THE NEXT LEVEL: INVEST IN RESEARCH

Today, research continues to be disproportionately focused on cures and on single-diseases. We must seriously increase our investments in improving our understanding of complexity and how to support people who are living with multiple chronic diseases. We need to get better at anticipating trends and the consequences of our interventions and providing proactive management over the long term if we are to get more upstream benefit and less downstream burden from the success of modern medicine. Finding and applying best practices and best medicine to the management of chronic disease is just as important as finding and applying best medicine to saving lives. We will need the support of research granting agencies and industry in making this a priority.

WE NEED TO COMPLETE A 180 TURN IN THE PATIENT RELATIONSHIP

We need to get away from the "treat them and street them" approach to health care and actively engage with patients in their health and health care journey. We need to see ourselves as knowledge transfer agents. We need to find new ways to share knowledge between health care providers and the people that we serve. Informed, activated patients will only emerge from a fully realized knowledge transfer partnership with health professionals.

WE NEED TO PUT "HEALTH" BACK IN HEALTH CARE

We know from research that as much as 50% of chronic illness is preventable – and we know from experience that the pace at which a chronic disease advances can be significantly influenced through secondary prevention. This

begs the question: how much of what we do and of what we spend in our health care organizations should be dedicated to health promotion and wellness compared to sickness care?

WE NEED TO EMBRACE INTEGRATION

We have been talking about "right time, right place" care for decades in health care but now we need to achieve it.

Achieving this is all about creating an integrated health system that has the DNA to anticipate and facilitate patient care from prevention to palliation. I'm not convinced that we have that DNA yet or the system, processes and levers to optimize it. What I do know... is that neither the system nor our patients are going to get less complex any time soon. And, because of that I am of the view that integration will only be achieved through:

- Willing partners
- Investment in accessible integrated information systems

- Designated system navigation resources and tools
- New approaches in chronic disease and prevention management

WHAT'S NEXT

The good news is that we can, and I believe we will, be able to change the world for people living with Complex Chronic Disease.

It is possible to experience wellness while living with chronic illness – and it is possible to slow the progression of chronic disease. But change is needed, and to be able to achieve that change, we need the support of people like you.

Please help us spread the word that “There’s a new disease out there” by visiting www.life.changes.ca.

How are Canadian’s feeling about chronic disease?

- 69% of Canadians confirm that they – or someone close to them – are living with Complex Chronic Disease.
- 4 out of 5 Canadians perceive Complex Chronic Disease to have a large or very large impact on the country.
- Yet, 92% claim they are not hearing about Complex Chronic Disease.
- Barely half (52%) of Canadians feel the current health care system is meeting the needs of individuals with chronic disease.
- And, when it comes to meeting the needs of people living with Complex Chronic disease, 60% of Canadians rated the system as fair or poor.
- Beyond a need for funding, Canadians cited the following as key shortcomings of the system:
 - Finding organizations and health professionals with specialized knowledge
 - Knowing how to navigate the system
- Ensuring that health professionals have the knowledge they need, and that research is underway to keep advancing that knowledge.
- Canadians identified the following solutions as extremely important in making a difference for people living with Complex Chronic Disease:
 - 60% cited better access to specialized professionals as the most important solution to improve the system
 - 59% cited more focus on preventing chronic disease
 - 54% cited more research into the field
 - 53% cited more available in-home support
- Respondents said they expect to live a healthy life for 76.3 years.
- When asked if they would like to live an additional 20 years beyond that, nearly 40% said “no thanks”.
 - Biggest concerns were having a poor quality of life or not living well, or becoming a burden.

Source: The survey was conducted on behalf of Bridgepoint Health using Harris/Decima’s online consumer panel with a national random sample of 1,351 Canadian adults between October 5th and 11th, 2007.

It has an associated margin of error of +/- 2.7%, 19 times out of 20

