



Canadian Health Libraries Association Association des bibliothèques de la santé du Canada

The Honourable Mark Holland, Minister of Health
and Dr. Stephen Lucas, Deputy Minister of Health Canada

Subject line: Letter of concern regarding cuts to CADTH information services

Dear Minister Holland, Dr. Lucas, and Mr. Agnew,

I am writing to you today regarding recent job cuts at the Canadian Agency for Drugs and Technology in Health (CADTH) - soon to be the Canadian Drug Agency - in my role as Vice-President of the Canadian Health Libraries Association / Association des bibliothèques de la santé du Canada (CHLA/ABSC), and as a concerned citizen. CADTH's decision to quietly scale back the information services it offers impacts the ability of health care leaders to make evidence-informed decisions, which will negatively impact already strained health systems across the country and, ultimately, the health and well being of all people living in Canada.

As “an independent, not-for-profit organization responsible for providing Canada’s health care decision-makers with objective evidence to help make informed decisions” the evidence products and services that CADTH offers to Canadian health systems are a critical component of its taxpayer funded mandate and essential for the provision of high-quality health care across the country. Highly skilled librarians and library technicians are responsible for identifying and retrieving the information that serves as the foundation for all CADTH’s work.

In February, CADTH terminated the employment of 6 librarians and 2 library technicians, reducing the staff of its Research Information Services division by half. This move is the latest in a gradual erosion of CADTH services that provided reliable, unbiased information to ministries of health, health professionals, health policy makers, and the public. Changes of particular concern are:

- The switch to allowing industry sponsors of CADTH drug reimbursement reviews to provide the research evidence CADTH committees use to make recommendations, rather than using in-house expertise to generate unbiased clinical and economic analyses.
- Sunsetting valuable rapid response and rapid review services used by decision-makers across the country to answer time-sensitive questions impacting the health of Canadians.
- Substantial cuts to the organization’s project management structure in December 2023
- Terminating federal, provincial, and territorial liaison officers in December 2022, removing a critical link between CADTH and the people it serves to get timely answers to complex health system questions and compromising CADTH’s ability to respond to emerging health issues like the COVID-19 pandemic.

These cuts are detrimental to decision makers who rely on CADTH for the evidence to make appropriate decisions in an increasingly complex health care landscape across Canada. Provinces and territories that

do not have the resources to do this work for themselves will be disadvantaged, resulting in inequitable and inconsistent care between provinces, territories, and federal health programs. Making companies with vested interests in positive reimbursement recommendations for reimbursement for their new drugs responsible for deciding what information is considered in CADTH drug reviews removes the objectivity of CADTH's recommendations. With an increasing number of drugs entering the Canadian market every year, the pressure on health systems to list new entrants is immense and will continue to grow with the addition of a national pharmacare program. In this context, objective evidence from a trusted partner like CADTH is critical.

CADTH's rationale for these job cuts and program reductions is unclear and does not align with industry trends in an age of prolific misinformation. We need information professionals now more than ever to ensure that our health systems are making decisions based on credible and trustworthy evidence.

CADTH's tools, resources, and services took decades to build and have helped establish CADTH, and Canada, as a global leader in health research evidence synthesis. As CADTH's majority funder, my health library colleagues and I encourage you to investigate the changes at CADTH, and put a stop to any further reductions in services that risk harming evidence-informed decision making by Canadian health systems. As a courtesy, I have attached here a press release that CHLA/ABSC will be circulating to the media tomorrow.

Sincerely,



Amanda Ross-White

Vice-President, Canadian Health Libraries Association/Association des bibliothèques de la santé du
Canada

Cc - Chair of the Board - David Agnew

Dr. Stephen Ellis, Conservative Party of Canada, Shadow Minister of Health

Don Davies, NDP, Health Critic