

ON.23.01 To Establish a Sustained Universal Intermittent Catheter Coverage

1 **Resolved**, That the Ontario Provincial Council of The Catholic Women’s League of Canada in
2 2023 provincial annual convention assembled urge the provincial government to establish a
3 sustained, universally-funded, intermittent hydrophilic-coated (HC) or gel reservoir catheter
4 coverage plan for all individuals for whom it has been diagnosed and prescribed as medically
5 necessary.

6 Gifted by the Toronto Diocesan Council

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Brief

1 Studies have highlighted that intermittent catheterization (IC) is the gold standard for long term
2 bladder management. Yet, for some individuals in Ontario, urinary catheters and supplies are not
3 covered by the province's healthcare system. Individuals with conditions such as spinal cord
4 injuries, multiple sclerosis (MS) and Parkinson's disease, rely solely on an intermittent or
5 indwelling catheter for bladder emptying. (Campeau et al. 1; Clark et al.73; Canadian Urologic
6 Association Best Practice Report). Although the use of the indwelling catheter with a urine bag
7 avoids urinary incontinence, it poses the risk of urinary tract infection (UTI), bladder
8 complications such as kidney failure, urethral injuries and urinary stones (Roth et al. 701; Romo
9 et al. 1556). Conversely, the use of the intermittent catheter promotes patient autonomy,
10 independence, increased socialization, engagement, and interaction with the community.
11 Specifically, single use hydrophilic-coated catheters are cost effective in comparison to uncoated
12 catheters (Xi et al.78). Due to inadequate funding from Ontario Disability Support that should
13 cover monthly medical supplies, some patients reuse their urine bags and intermittent catheters
14 thus compromising their health and risking infection that cause them to acquire UTIs. Without
15 universal catheter coverage and dedicated public funding for catheters, patients are forced to use
16 indwelling catheters with urine bags, because they cannot afford intermittent catheters and other
17 urinary supplies (SCIO, 14).

18 Advocates reported the Canadian health care system leaves individuals at risk due to their inability
19 to urinate depending on where they live and what they can afford (SCI-BC,12). Evidently,
20 intermittent catheterization of five times within 24 hours is the gold standard to avert UTIs. In
21 2019, a year's supply in Ontario ranged from about \$558 for people who reused noncoated
22 catheters (using one per day), to about \$12,800 for people who used a new hydrophilic-catheter
23 each time they emptied their bladder (Health Quality Ontario, 10). Wilde et al. mentioned patients
24 expressed being burdened by expenses and cost constraints and recommended that all individuals
25 using intermittent catheters should have adequate coverage (1260; SCIO,14).

26 In Ontario, an estimated 33,140 people live with spinal cord injury and approximately 70-84%
27 have some degree of bladder dysfunction. Additionally, 50-80% percent of the 23,000 Ontarians
28 with MS as well as 37-72% of the 28,200 Ontarians with Parkinson's disease develop urinary
29 incontinence (Health Quality Ontario, 10). The European Nurses of Urology Guidelines
30 highlighted the use of single-use hydrophilic-coated or gel reservoir catheters can reduce the risk
31 of urethral trauma, an IC related complication (Clark et al. 73; Nicolle, 4). Alternatively, Li et al.
32 conducted a meta-analysis on the incidence of infection in the hydrophilic treated group of patients
33 and concluded that hydrophilic-catheters reduced UTIs in comparison to uncoated catheters (786;
34 Nicolle 4).

35 Peckham et al. included urinary catheters as incontinence supplies in household aids and
36 emphasized the need for the development of outpatient medical technologies in policies across
37 Canada (1537).

38 Individuals in Ontario who require intermittent catheterization will continue to suffer severe
39 complications and consequences without modernized publicly funded coverage.

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Action Plan

1. Write letters to the Premier of Ontario, Minister of Health, and local members of Provincial Parliament (MPPs) indicating support for a universal intermittent catheter (IC) coverage for individuals who require it.
2. Monitor the Provincial Government's response to this resolution.
3. Educate members on the challenges individuals experience in acquiring intermittent urinary catheters for bladder emptying.