

Reserve resident stuck with insulin bill

Feds refuse to cover cost of medication

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A Manitoba man whose kidneys are on the verge of shutting down from Type 2 diabetes has to pay out of pocket for life-saving insulin because he lives on a reserve.

Keeseekoowenin First Nation resident Marvin Blackbird started taking the long-lasting insulin Lantus last summer, after he was repeatedly hospitalized for serious complications from Type 2 diabetes. The former band councillor's blood-sugar levels were so out of control that his right leg was amputated, and he said his doctor told him his kidneys will shut down if he stops taking the medication.

But Blackbird is scraping together money for the drug since the federal body in charge of First Nations health won't cover it.

Health Canada agrees to pay for certain medications for First Nations residents on reserves, but that list is separate and sometimes different from the list of medications paid for by provinces.

If Blackbird lived anywhere off a reserve in Manitoba, his Lantus would be covered by the province's pharmacare plan. He doesn't, so at \$200 a month, Blackbird's prescription eats up the bulk of his monthly \$320 social assistance cheque. The 48-year-old wants to stay in his community, about an hour northwest of Brandon, but has watched other residents uprooted to other communities where they can get their drugs for free.

"(My doctor) said my other organs in my body will start shutting down if I don't have this," Blackbird said. "It's pretty difficult. I got to borrow money from my family members to get the insulin. That doesn't make me feel very happy. Like, how the hell am I going to get the money to pay people back?"

Health Canada sent the *Free Press* an email statement, saying an advisory committee recommended not paying for Lantus "unless the price was lowered." The statement said patients can make a request to the federal government asking for an exception, which is granted on a case-by-case basis.

Blackbird's girlfriend Tracy Polhill said his Brandon-based physician has already made such an appeal, but the federal body denied the request.

"We can't get First Nations and Inuit Health to pay for it," she said, noting several other community residents have been affected by the government's decision not to pay for Lantus.

"(One elder) has to live in Brandon an hour away from her family with no vehicle, so she can stay alive."

The Canadian Diabetes Association called Canada's approach to managing the rising incidence of Type 2 diabetes "backwards" and said access to medicines to keep diabetics healthy shouldn't depend on where they live.

"We feel that no matter where you live in Canada, you should have access to the tools to keep (yourself) healthy," said Jeremy Brace, spokesman for the Canadian Diabetes Association. "Access to medications and supplies is even worse on aboriginal reserves and in aboriginal communities than the general population and that's a deep concern to us." Brace said access to medication on reserves is a particular concern, since the rates of Type 2 diabetes among First Nations are three to five times higher than in the general population. He said proper blood-sugar management reduces the chances a diabetic will suffer serious complications, like kidney failure and amputations, that have life-altering consequences and end up costing the health-care system even more.

Brace is concerned federal funding of the Aboriginal Diabetes Initiative is set to expire this year, leaving prevention, screening, and treatment programs to reduce the prevalence of Type 2 diabetes on First Nations in limbo.

"It just makes no sense that people don't have access to the things they need to keep themselves healthy," Brace said.