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Safe medication disposal

by Lori MacDonald-Blundon, Editor

There are literally thousands of prescription drugs available for sale in Canada, and significantly more over-the-counter medications and nutraceuticals.

Studies around the world have indicated that trace amounts of pharmaceutical and personal care products (PPCPs) are found in our water and soil.

An Ontario Ministry of the Environment study that collected samples throughout 2005/06 looked at 46 different chemical compounds, broken down by antibiotics, hormones, pharmaceuticals and emerging contaminants (see chart). Twenty-two of the 46 chemical compounds were detected in drinking water in trace amounts. Forty-eight percent of antibiotics, 11% of hormones, 73% of other pharmaceuticals and the sole emerging contaminant—Bisphenol A (BPA)—still found their way into drinking water.¹

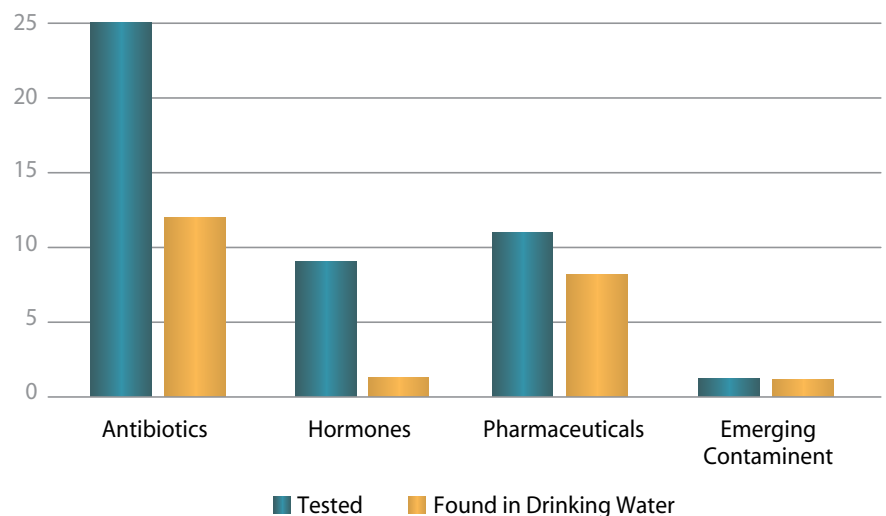
Common medications found in the study were: over-the-counter pain relievers acetaminophen (Tylenol) and ibuprofen (Advil); cholesterol medications bezafibrate and gemfibrozil (Lopid); anti-inflammatories diclofenac (Arthrotec) and ketoprofen; equilin which is used in hormone-replacement therapy; and, a dozen different antibiotics.

Although BPA in infant bottles is banned by the Canadian government, it's permitted in food packaging.

While the concentration levels in our drinking water remain low, it's unknown what effect long term exposure may have. Health Canada notes that, "Although there is not yet any solid evidence, there is also some concern about leftover prescriptions drugs, which are disposed of into the environment, possibly adding to the problem of antibiotic

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Ontario drinking water results



¹ www.ene.gov.on.ca/stdprodconsume/groups/lr/@ene/@resources/documents/resource/std01_079830.pdf

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First aid advice for sunburn and heat illness

Sunburn (also called erythema) is caused by over-exposure to ultraviolet radiation (UV rays). While the symptoms are usually temporary (like red skin that is painful to the touch), skin damage is cumulative throughout a person's life and can develop into serious long-term health effects, including skin cancer.

Mild sunburn results in skin irritation and redness and can be safely treated at home. Severe sunburn requires medical attention. The first signs of a sunburn may not appear for a few hours. The full effect to your skin may not appear for 24 hours or longer.

If you have been in the sun long enough to get a severe sunburn you may also have heat illness. Some symptoms of heat illness are the same as sunburn so it is important to protect yourself.

Symptoms

Possible symptoms of sunburn include:

- red, tender skin that is warm or sensitive to the touch
- blisters that develop hours or days later
- severe reactions (also called “sun poisoning”), including fever, chills, nausea, or rash
- peeling skin on sunburned areas several days after the sunburn

Possible symptoms of heat illness include:

- dizziness or fainting
- nausea or vomiting
- headache
- rapid breathing and heartbeat
- extreme thirst (dry mouth or sticky saliva)
- decreased urination with unusually dark yellow urine
- changes of behaviour in children (like sleepiness or temper tantrums)

Safety tips

What to do if someone gets a sunburn:

- Immediately remove the person from the sun.
- Place the person in a cool (not cold) shower or bath, or apply cool compresses several times a day. Do not wash burned skin with harsh soap.
- Avoid creams or lotions that may hold heat inside the skin or may contain numbing medication (i.e. benzocaine or lidocaine). Aloe gel can be used.
- Offer the person extra fluids for the next two to three days.
- If needed to relieve pain, give the person ibuprofen or acetaminophen, as directed. Do not give aspirin to children.

- Make certain all sunburned areas are fully covered to protect the person from further sun exposure.

Get immediate medical attention if the person has:

- sunburn that forms blisters or is extremely painful
- facial swelling
- nausea, fever or severe chills
- pale, clammy or cool skin
- rapid pulse or rapid breathing
- headache, confusion or a feeling of faintness or dizziness
- signs of dehydration (increased thirst, dry eyes and mouth, no urine output)
- signs of skin infection (increasing redness, warmth, pain, swelling, or pus)
- eyes that hurt and are sensitive to light

What to do if someone gets heat illness:

- If you have any heat illness symptoms during extreme heat, move to a cool place and drink liquids right away. Water is best.

Heat stroke is a medical emergency!

- Call 911 or your local emergency number immediately if you are caring for someone who has a high body temperature and is either unconscious, confused or has stopped sweating.

While waiting for help—cool the person right away:

- Move them to a cool place, if you can.
- Apply cold water to large areas of their skin or clothing.
- Fan the person as much as possible.

Remember

- The best treatment for sunburn is prevention.
- There is no such thing as a “healthy tan.” Unprotected sun exposure causes skin and eye damage, premature aging of the skin, and a weakened immune system.
- Skin cancer usually appears in adulthood, but can be caused by excessive sun exposure and sunburns in childhood. You can help prevent skin cancer by protecting your skin and your family's skin from the harmful rays of the sun.

Source: www.healthycanadians.gc.ca/environment-environnement/sun-soleil/brun-coup-eng.php

Generic vs. brand drugs

People are sometimes reluctant to use a generic equivalent for a brand name drug because they are concerned that the drug will not be as effective in treating their illness.

Generic drugs have the same medicinal ingredients and in the same dosage, as their brand name counterparts. The main difference between them is that generic drugs may only be produced after the Canadian patent protection on the brand name drug has expired. They undergo the same scrutiny in their testing as do brand name drugs and must follow the same strict guidelines outlined by Health Canada.

The generic drug must show that it can deliver the same amount of medicinal ingredient at the same rate as the original brand name drug. The generic drug will only be approved for sale by Health Canada if this test is successfully completed. Generic drugs are sold at a fraction of the brand name price.

While there are always individual differences with how people react to different drugs, prescribing generic drugs, where appropriate, can be effective and can provide savings to members and the RTO/ERO Extended Health Care Plan. 🍌



Coverage at Age 65

RTO/ERO Extended Health Care (EHC) Plan participants sometimes question whether they still require Extended Health Care once they reach age 65. Many have heard that once you reach age 65 the government covers the cost of your medications. This is only partially true.

The Ontario Drug Benefit (ODB) program covers approximately 20% of the medications available in Ontario. Of this 20%, many drugs are covered on a “limited use” basis only, meaning a particular drug is required AND specific clinical criteria must be met. It’s interesting to note that, of the top 20 drugs paid under the RTO/ERO EHC plan, seven drugs are not covered by the ODB and six are covered on a limited use basis. In 2012, more than half of the paid drug claims were for participants age 65 and over. In fact, over half of the total claims paid for all benefits under the RTO/ERO EHC plan were for this age group.

It’s very important to keep in mind that the RTO/ERO EHC Plan offers much more than just prescription drug coverage. Many other valuable benefits are also included:

- Brand and generic drugs are covered;
- Eyeglasses, contact lenses, laser eye surgery and eye examinations;
- Access to 15 paramedical practitioners without a physician’s authorization;
- Aids and appliances, including hearing aids, insulin pumps, and orthopaedic shoes;
- Private duty nursing;
- The education benefit covers health-related physician-authorized educational programs;
- Diabetic supplies are included in the drug maximum;
- Incontinence supplies; and
- Out-of-Province/Canada Travel—emergency medical coverage of \$1,000,000 per person per trip and trip cancellation/interruption and delay coverage of \$6,000 per person per trip.

The RTO/ERO EHC Plan is a comprehensive and invaluable plan for retirees of all ages. You can enrol at any age and without medical evidence, so long as you have had continuous group insurance coverage. 🍌

Did you know?

- RTO/ERO's premium rates and coverage are the same at any age.
- Prescription drug and dental claims can be submitted electronically by your pharmacist or dentist. This eliminates the need for you to send a paper claim, thereby avoiding mail delays and postage costs.
- Out-of-Province/Canada Travel coverage is included as part of your Extended Health Care Plan and covers trips of up to 62 days in duration. It also includes such benefits as trip cancellation/interruption and delay insurance to a maximum of \$6,000 per insured person per trip. For those travelling for longer periods, additional coverage is available for purchase under the Supplemental Travel Plan
- When making claims under the travel benefit, proof of departure is required for each traveller for whom a claim is made.
- Under the RTO/ERO Out-of-Province/Canada Travel Benefit, charges for transportation or travel (for example, taxis or buses) are not covered, unless specifically listed under eligible expenses.
- Following emergency treatment for a medical condition during an out-of-country trip, if your attending physician confirms that you are stable to travel and able to wait to have treatment done, Allianz will make arrangements for you to return to your province of residence for continued treatment in Canada. If you choose not to return to Canada, Allianz will issue a limitation of benefits and no payments will be made for the continued treatment, recurrence or complications arising from the same or related medical condition. Coverage will remain in effect for unrelated emergencies.
- As an RTO/ERO member, you can use the internet to access and interact with your Group Benefits Program in a completely secure and private environment. The information is stored in real-time so claims and coverage information is current. To obtain a confidential user name and password, go to www.johnson.ca/rto-ero, choose your province of residence and click on "Members Only". ●



Assistive Devices Program

The Ontario Ministry of Health and Long-Term Care runs the Assistive Devices Program (ADP) to help people who have long-term physical disabilities get needed equipment and supplies.

In some cases ADP pays 75% of the cost of items like orthopaedic braces, wheelchairs and breathing aids. In other cases, such as artificial limbs and breast prostheses, ADP contributes a fixed amount up to a maximum contribution.

For some kinds of supplies, such as ostomy and needles and syringes for insulin-dependent seniors, ADP pays an annual grant directly to the person.

If you are receiving social assistance benefits under Ontario Works (OW), Ontario Disability Support Program (ODSP) or Assistance to Children with Severe Disabilities (ACSD), you may be eligible to receive more money.

For more information contact the Ministry of Health and Long-Term Care, Assistive Devices Program at the following link: www.health.gov.on.ca/en/public/programs/adp/about.aspx.

Source: Ontario Ministry of Health and Long-Term Care ●

You asked... we listened

Many of our members have communicated to us that our Supplemental Travel Plan rates were too costly. We have heard your comments and believe that many of our members will be pleased with our new, and improved, rate structure!

We are still in the review process with our partner, Johnson Inc., with new rates to be rolled out for the September 1, 2013 travel season. Check our website www.ero-rto.org/sites/default/files/SuppTravel_E_July_2012_0.pdf in early August for our new rates! ●

Safe medication disposal

FEATURE CONTINUED FROM PAGE 35

resistance.”² The World Health Organization indicates that there are, “currently few systematic monitoring programmes or comprehensive studies available on human exposure to pharmaceuticals from drinking-water.”³

Aquatic creatures are particularly vulnerable to the effects of PPCPs and studies have shown adverse reactions in fish and frogs.

The question to be answered is whether there is a cumulative effect of the PPCPs that we are knowingly taking in pill form, what we may be consuming through our food, and what we are drinking. And, if there is an affect of this long-term exposure through multiple sources, what is the impact? Given the tens of thousands of medications and supplements, it’s a difficult question to answer.

How do these PPCPs make it into our drinking water? One of the ways that we can control is through proper disposal. Flushing prescription and over-the-counter medications, nutritional supplements, etc. down the toilet, or the sink, or tossing them into our garbage contributes to the contamination of our environment. Most of us know that prescription medications should be disposed of safely, but we often never think about vitamins or supplements.

What can you do to help?

- Take your medication as prescribed. If you have a reaction, check with your physician and your pharmacist.
- Use all of your antibiotics (the study showed that 48% of the antibiotics were in our drinking water), even if you feel better.
- Check to see if your pharmacy has a safe disposal program. This applies to prescription and non-prescription medications and nutritional supplements.
- If your pharmacy doesn’t collect medications, check with your local municipality.
- If you live in an area where there isn’t a safe disposal program through the pharmacy or the municipality, ask your pharmacist how to best dispose of the medication you have.
- Review your medicine cabinet regularly, remove and properly dispose of anything that you no longer use or that has expired.

The Canada Health Products Stewardship Association is a good place to start if you want to learn more about your province’s initiatives to ensure safe disposal of prescription and non-prescription medications and nutritional supplements. Visit their website www.healthsteward.ca. ●

School board coverage terminating?

If you are turning 65 and currently covered under the school board retiree plan for your benefits, you can certainly apply to the RTO/ERO Group Benefits Program. Your coverage under the RTO/ERO Group Benefits Program will commence the day after the termination of your previous coverage (your previous coverage can also be your spousal plan or another group insurance plan), provided you apply within 60 days of its termination. Note: to ensure there is no gap in your coverage, premiums and coverage will be back-dated to the day following the termination of your other group plan, regardless of when your application is received in the 60 day period.

You are guaranteed acceptance without a medical questionnaire when you enroll in the RTO/ERO Insurance Plans within 60 days of leaving another group insurance plan (i.e., school board plan, spouse/partner’s group plan, etc.).

For further information contact RTO/ERO’s plan administrator Johnson Inc. at 416-920-7248 or 1-877-406-9007. ●

2 www.hc-sc.gc.ca/hl-vs/iyh-vsv/med/disposal-defaire-eng.php

3 www.who.int/water_sanitation_health/emerging/info_sheet_pharmaceuticals/en/index.html

media corner @

Assistive Devices Program – for more information on who can apply, how to apply and what types of equipment are covered contact the Ministry of Health and Long-Term Care Assistive Devices Program (ADP) toll-free at 1-800-268-6021 or visit www.health.gov.on.ca/en/public/programs/adp/about.aspx.

To obtain information about Insulin Pump Therapy funding assistance, you can also contact the same division at the Ministry of Health and Long-Term Care's Assistive Devices Program (ADP). It provides funding assistance to eligible individuals of all ages with type 1 diabetes to purchase insulin pumps and supplies. Ministry of Health and Long Term-Care, 7th Floor, 5700 Yonge Street, Toronto, ON M2M 4K5; Toronto 416-327-8804; Toll-free 1-800-268-6021; Fax 416-327-8192; e-mail: adp@ontario.ca or visit www.health.gov.on.ca/en/public/programs/adp/insulin_pamp.aspx.

Home, Community and Residential Care Services for Seniors –

Many services are available in Ontario to help seniors lead healthy and independent lives. If you are looking for care for yourself or a loved one, this website is a great place to start. It will answer many of the questions you may have about seniors' care, and help you find the right kind of care in your community. Visit www.health.gov.on.ca/en/public/programs/ltc/default.aspx.

Assisted Living Services support people with special needs who require services at a greater frequency or intensity than home care, but without the medical monitoring or supervision that would be provided in a long term care home (LTCH). These services vary according to need, but consist essentially of attendant services, personal care, essential homemaking and an emergency response system. Call your local CCAC for help with assessment, determination of eligibility, and wait list management. Visit www.health.gov.on.ca/en/public/programs/ltc/13_housing.aspx.

For more information on the above services call ServiceOntario, info-line at 1-866-532-3161. In Toronto, 416-314-5518; TTY 1-800-387-5559. In Toronto, TTY 416-327-4282.

Personal Supports Program – The B.C. government's Personal Supports service helps you find programs that provide equipment and assistive devices or other personal supports for people with disabilities in British Columbia. Visit the Personal Supports website to learn more about personal support and assistive devices programs in B.C., www.personalsupports.bc.ca. ☺

Topping up travel coverage

Are you travelling for more than 62 days in one trip? If you're planning a holiday outside your province of residence that is greater than the 62 days permitted under the RTO/ERO Extended Health Care Plan, you should consider RTO/ERO's Supplemental Travel Plan.

When considering additional travel insurance for longer trips, it's important to ensure that you have complete, comprehensive coverage. This is especially important if you have an existing medical condition, or have sought treatment for a medical condition in the past.

Do your research and purchase based upon coverage, rather than rates. If the prices are too good to be true, they probably are. Select a plan that provides you with the best possible coverage, a medical stability clause that offers you the least restrictions, the flexibility to change your trip dates while you're away and affordable rates.

It's easy to enrol in RTO/ERO's Supplemental Travel Plan. There are no medical questions, it offers you the same comprehensive coverage you enjoy under the Extended Health Care Plan, no matter what your age, plus our rates are being updated for September 1, 2013 to ensure further competitiveness. Your coverage is seamless! Simply complete an application online, print the form, sign and date it, and forward it to Johnson Inc., Plan Administrator, or, you can contact Johnson Inc. directly at 416-920-7248, 1-877-406-9007 (toll-free) to receive an application by mail. ☺

September 2013

National Arthritis Month. Have you signed up yet? The Arthritis Society provides several informational events and programs to help you manage your arthritis. Find out what is going on in your Province in terms of events or services by visiting www.arthritis.ca/province?redirect=http%3A//www.goriete.com/page.aspx%3Fpid%3D1330; or to find an event near you visit www.arthritis.ca/specialevents.

Terry Fox Run. September 15, 2013. Participants can raise funds online, find a Run site, download a pledge sheet, donate to a participant, get fundraising tips, and more. Visit www.terryfox.org/Run.

World Alzheimer's Day. September 21, 2013. Second global World Alzheimer's Month, an international campaign to raise awareness and challenge stigma. The theme for World Alzheimer's Month 2013 is "*Dementia: a journey of caring*". Alzheimer associations across the world will focus their activities on the care required by people with dementia throughout the course of the condition. A list of activities worldwide will be available soon. Visit www.alz.co.uk/world-alzheimers-month.

Childhood Cancer Awareness; Men's Cancer Awareness and Ovarian Cancer Awareness month. For more information on community activities organized by the Canadian Cancer Society visit www.cancer.ca/en/get-involved/events-and-participation/awareness-weeks-and-months/?region=on.

AIDS Walk for Life. September 14 - 22, 2013. Canadian AIDS Society is registered as a charity since 1986, the Canadian AIDS Society (CAS) is a national coalition of over 120 community-based AIDS organizations across Canada. They are dedicated to strengthening the response to HIV/AIDS across all sectors of society, and to enriching the lives of people and communities living with HIV/AIDS. To obtain more information about the walk visit www.cdnaids.ca/scotiabank-aids-walk-for-life. ●



October 2013

Breast Cancer Awareness Month. This October, the Canadian Cancer Society will raise funds and awareness in partnership with great organizations across Canada. To obtain information regarding this event and others visit www.cancer.ca/en/get-involved/events-and-participation/awareness-weeks-and-months/?region=on.

● **Mental Illness Awareness Week (MIAW).** October 1 - 12, 2013. This is an annual national public education campaign designed to help open the eyes of Canadians to the reality of mental illness. Visit <http://camimh.ca/mental-illness-awareness-week-english/about-miaw>.

National Seniors Day. October 1, 2013. The Government of Canada is proud to pay tribute to the seniors who have helped build our country and continue to make valuable contributions to Canadian communities, workplaces and society. National Seniors Day is an occasion for all Canadians to appreciate and celebrate seniors. To find tips and resources to celebrate the day and commemorate the seniors in your life visit <http://seniors.gc.ca//eng/pie/nsd/index.php>. ●

