Critics charge that Health Canada’s recently minted Canadian Adverse Drug Reaction Information System (CADRIS) is user-unfriendly and downright uninformative, in that it doesn’t allow physicians or patients to determine the likely incidence of adverse drug reactions.

Health Canada stands behind its strategy in presenting these data.

The inclusion of measures of drug usage, or another form of common denominator, would have invariably invited comparisons of the relative risk of various drugs, leading to unwarranted conclusions about safety and the inappropriate use of CADRIS as a prescriptive tool, says Heather Sutcliffe, director of Health Canada’s marketed health products safety and effectiveness information division.

“It’s well known that adverse reactions are underreported and that patient exposure is not known. And also adverse reaction reports reflect the suspicions of those who report them [whereas] a cause-and-effect relationship has not been established in the majority of cases. In general, because of the nature of the adverse reaction information, quantitative comparisons of health product safety and effectiveness information division.

“That level of utility isn’t likely to be achieved unless mandatory reporting is introduced for all health professionals and management of the system is turned over to an independent drug safety agency, Young says.

An estimated 10 000 Canadians die annually from adverse reactions but only 1% to 5% of such reactions are reported to health authorities. It’s clear mandatory reporting is absolutely essential to promoting drug safety and providing early warning signals about drugs, Young says.

“But the only way it’s going to happen is if some minister of health or the prime minister says this is the way we’re going to clean this up and reduce the number of deaths.” — Wayne Kondro, Ottawa

Vanessa Young’s death from an adverse drug reaction sparked a call for action.