**MAJOR NEW REPORT SHOWS PREVENTATIVE HEALTH CARE WORKS – COULD SIGNIFICANTLY BEND THE “COST CURVE”**

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 Chronic disease, like cardiovascular maladies, diabetes, cancer and others, represent the leading cause of disability and death in Canada. An estimated 25 per cent of expenditures in the public health system go towards treating these frequently avoidable diseases. This health-care cost curve, which sees more money expended on fighting the increase of chronic disease, can be bent, so to speak, through prevention services that offer long-term benefits to people’s health.

This, according to a new study by The School of Public Policy and author Herb Emery. Emery did a deep dive into AHS data from the Pure North S’Energy preventative health care program. Pure North offers participants in its eight-year-old program access to a variety of health-care practitioners, including doctors, naturopaths, nurses, nurse practitioners and dentists. Participants receive lifestyle counselling and dietary supplements aimed at combating vitamin D insufficiency, obesity, insulin resistance and other problems that can lead to chronic disease.

The study found that participants who stay with the program for two years demonstrate significant reductions in their number of visits to emergency rooms and hospitals. Indeed, after just one year in the program, the number of hospital visits was down 27 per cent and the number of visits for ambulatory care reduced by 14 per cent over a control group matched for age, sex and postal code, who did not participate in the Pure North program. In the second year after joining the program, hospital admissions dropped by 32 per cent for participants aged 55 and over.

These figures translate into significant cost differences. The average cost of hospitals, ambulatory care and visits to general practitioners in the year prior to joining Pure North’s program came to $1,320 per individual. Cost reductions in annual health-care utilization among participants ranged from $294 (22 per cent) per person who joined the program to $600 (45 per cent) per person who stayed in the program for at least a year. Two years into the program, a participant could expect to avoid $276 in hospitalization and emergency room costs.

According to the author, “the public health-care system must shift its focus to preventive care if it wants to realize cost savings, efficiency and improved health for Albertans, rather than waiting to treat people until after they become ill with chronic diseases. Pure North offers an important model to help the public system understand how to make that transition to a prevention-oriented mindset.

The paper can be downloaded at <http://www.policyschool.ucalgary.ca/?q=research>

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