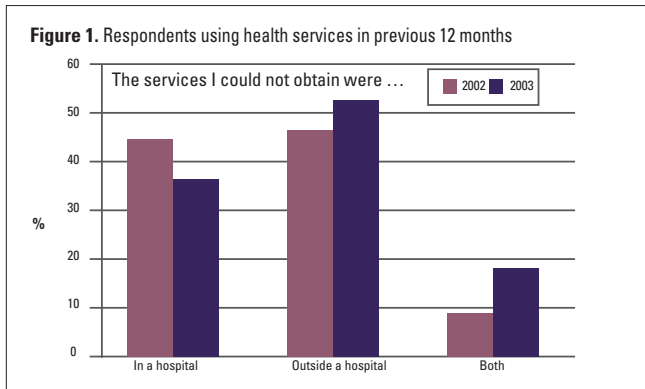




Quarterly Index

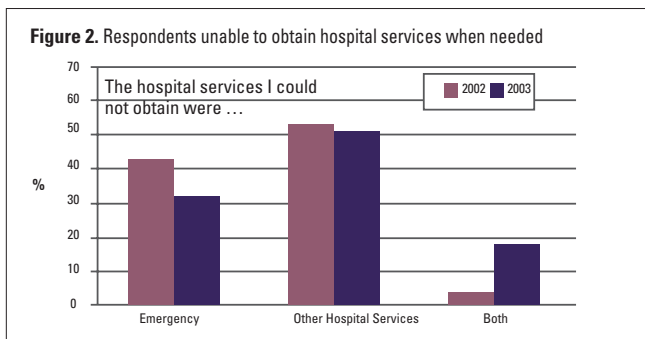
ACCESS TO HEALTH SERVICES WHEN NEEDED; SITUATION SHIFTS IN HOSPITALS.

The percentage of health service users who reported they were unable to obtain health services when they needed them in the past year decreased slightly to 16% from 18% in 2002. Of this group, only 36% reported they were unable to access hospital services, compared to 44% a year ago.



We also see from the chart above a doubling of those reporting inability to access services both in the community and in the hospital.

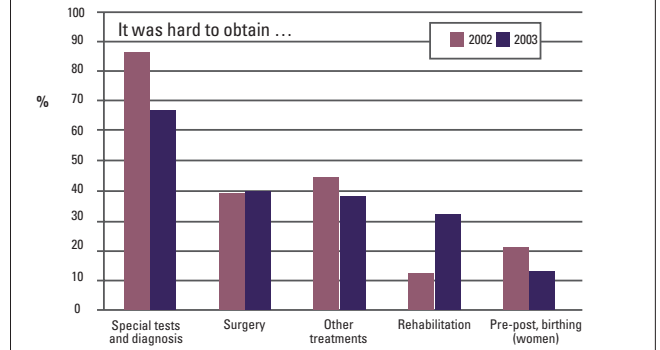
Within the hospital sector, we find a decline in the proportion reporting they were unable to obtain ER services when needed, but a quadrupling in the proportion reporting inability to obtain both ER and non-ER services when needed.



Among non-ER services, the most commonly unavailable service was "special tests and diagnosis." There appears to be a substantial increase in the inaccessibility of rehabilitation services.

Survey #24 results consist of the three national monthly surveys conducted during January, February and March 2003. Final results may vary by a percentage point or two after weighting.

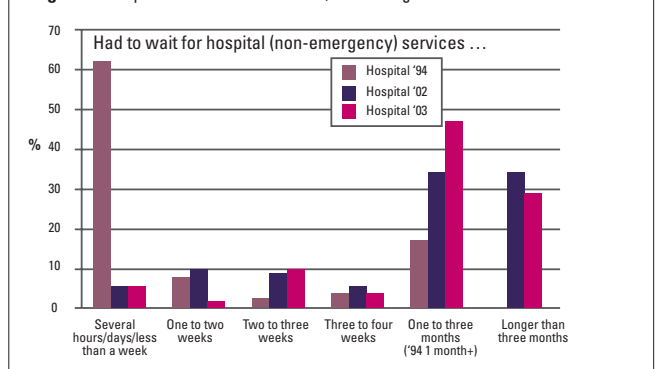
Figure 3. Respondents unable to obtain hospital (non-emergency) services in past 12 months



Apparent differences from year to year should be treated with caution because of sample sizes, and because the figures apply nationally and not to individual hospitals or regions.

Hospital waiting times improve (at the long end). The overall pattern since 1994 is unmistakable. More non-ER hospital patients are waiting much longer for services. In 1994, the majority of these patients waited less than a week for services. Today, the majority waits longer than a month. The good news is there may be a decrease in the percentage waiting longer than three months. It has dropped from 34% to 29% of hospital users (unfortunately, the drop is not statistically significant).

Figure 4. Hospital users who had to wait/could not get services when needed

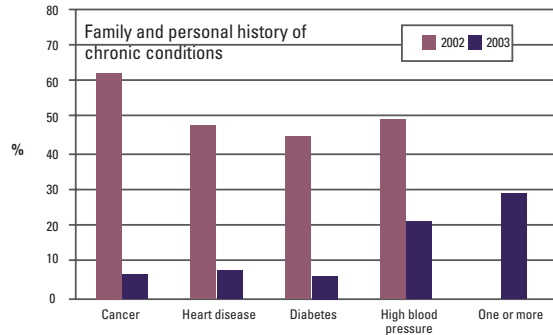


CHRONIC CONDITIONS INCREASE

A substantial proportion of Canadians (29%) report one or more of four common chronic conditions. (Figure 5, next page)

The figures on family history of these chronic conditions have to be treated cautiously because some respondents may not immediately recall all their

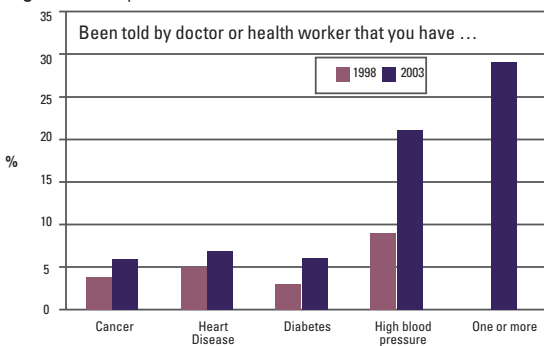
Figure 5. All respondents



immediate family members have the specified chronic condition – and that may explain the high proportion reporting cancer, a condition which typically is not forgotten.

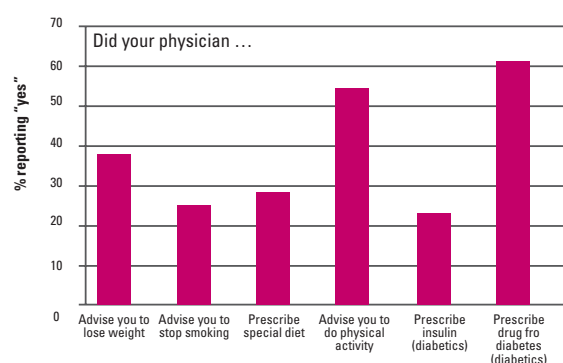
All the chronic conditions show statistically significant increases since 1988. The largest increase involves high blood pressure, which has more than doubled since 1988.

Figure 6. All respondents



One factor in these increases is almost certainly improved testing and diagnosis. It is not clear if this is the sole reason or if there are other considerations.

Figure 7. Respondents with one or more of diabetes, heart disease, cancer, high blood pressure

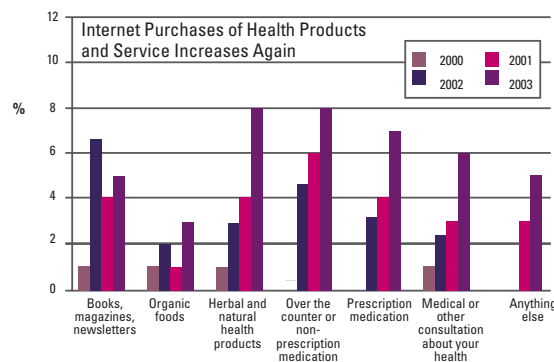


ARE ENOUGH PHYSICIANS PROVIDING GUIDANCE TO PATIENTS?

Among those respondents with chronic conditions, large proportions report not being given important advice by their physicians. (see Figure 8)

Less than half said that they had been told by their physician they should lose weight, a quarter said they were prescribed a special diet and half said their physician advised them to do physical activity.

Figure 8. Users of Ontario in previous month for health purposes



INTERNET USE FOR HEALTH PURPOSES CONTINUES INCREASE.

Almost a third of Canadians (31%, compared to 24% in 2002) reported using the Internet in the previous month for health-related purposes:

Seven percent of Internet users for health purposes in the previous month reported they had purchased prescription medication over the Net, compared to 4% last year. Similarly, purchases of non-prescription medications over the Net have increased to 10%.

Data supplied by the Berger Population Health Monitor. Data from surveys prior to 2002 were administered to ±2,500 respondents 15 years of age and older in the 10 provinces. Data from 2003 are based upon three surveys in January, February and March of 750 respondents each in the 10 provinces plus the three Territories 15 years of age and older for a total of approximately 2,300.

Topics in the Berger Population Health Monitor are selected in consultation with subscribers and the Hay Health Care Consulting Group. The Berger Population Health Monitor surveys are conducted jointly with the Physical Activity Monitor of the Canadian Fitness and Lifestyle Research Institute of Ottawa. The three 2003 surveys were administered by the Institute for Social Research, York University. For more information contact Earl Berger, 416-815-6405 or email: Earl_Berger@haygroup.com.