

PAR COURRIER ÉLECTRONIQUE

Québec, le 16 novembre 2021

Objet : Demande d'accès
N/Réf. : 1847 00/2021-2022.482

Nous donnons suite à votre demande d'accès reçue le 14 octobre dernier dans laquelle vous demandez de recevoir une copie des documents que vous décrivez comme suit :

« I am a public health physician and researcher at the [REDACTED]. I am planning a study comparing changes in pediatric emergency room (ER) visits due to cannabis between Ontario and Quebec after the legalization of recreational or non-medical cannabis. I already have access to Ontario data on these ER visits (and have completed a study looking at just changes in Ontario) and am looking for comparable Quebec data.

Our hypothesis is that pediatric cannabis poisonings will not show major increases in Quebec following cannabis legalization (because Quebec has placed strong public health controls on cannabis sales and product formats).

I initially contacted the Canadian Institute for Health Information about accessing Quebec ER visits who recommended that I contact the Quebec Ministry of Health directly since my data request is solely for Quebec and because they believe that you would have better access to data.

My planned study has received research ethics approval and I have funding to pay for data access.

I am specifically interested in the the following aggregate level data for the entire province of Quebec

... 2

- 1) the quarterly count of emergency department visits due to cannabis in children aged 0-9 years for all of Quebec. ER visits due to cannabis would be defined using ICD-10 codes F12 and T40.7 (or equivalent). The request would be for ER visits where cannabis is the most responsible code AND a contributing reason for visit.
- 2) the quarterly count of emergency department visits due to pharmaceutical and non-pharmaceutical ingestions (ICD-10 Codes T36-T65 or equivalent) in children aged 0-9 years for all of Quebec.
- 3) the quarterly count of emergency department visits due to any-cause (e.g. total quarterly ER visits) in children aged 0-9 years for all of Quebec.

Points 2 and 3 are to adjust for decreased health seeking behaviour during COVID-19.

Data Request Time Frame: I am requesting data for items 1-3 starting in January 2013 (or as far back as this data is available in Quebec) and as far forward as data is currently available (e.g. Q3 2021 if available).

- 4) the characteristics and outcomes for children with an ER visit due to cannabis.

This would be in the form of summary statistics for average age, sex, and the percent of children that were hospitalized or sent to the intensive care unit after an ER visit due to cannabis. See an example table below.

Table 1. Characteristics of ED visits due to cannabis exposures in children aged 0-9 in Quebec over three time periods; before recreational cannabis legalization, following recreational cannabis legalization ('Cannabis 1.0'), and following the introduction of commercial edible products ('Cannabis 2.0').

I am happy to share further details about the planned research and our research ethics approvals.

I would also greatly appreciate hearing from you about the time frame that it usually takes for data requests of this nature. As you may be aware Health Canada is about to begin reviewing the health impacts of cannabis legalization and we believe that data from Quebec will be essential to a more complete understanding of these impacts.

We have two plans for this research. We will use this data to generate and publish academic studies. We also hope to submit our results to Health Canada's upcoming regulatory review of the Cannabis Act and through key knowledge circles in Canada. » (*sic*)

Concernant le point 1 de votre demande, les données agrégées disponibles pour le Québec concernant les visites aux urgences dues au cannabis se trouvent sur le site web de l'Institut national de santé publique du Québec à l'adresse :

<https://www.inspq.qc.ca/substances-psychoactives/cannabis/consequences-sanitaires>.

Ces données sont mises à jour sur une base trimestrielle, toutefois, seules les données annuelles sont disponibles. Il est important de préciser qu'il n'existe donc de données sur les visites aux urgences liées au cannabis avant mai 2019 et qu'il n'y a pas de codes de diagnostics secondaires pour les visites à l'urgence, ceux-ci sont seulement utilisés lorsqu'il y a hospitalisation.

Nous avons le regret de vous informer que nos recherches n'ont permis de repérer aucun document répondant aux points 2, 3 et 4 de votre demande d'accès. En effet, le ministère de la Santé et des Services sociaux ne produit pas ces statistiques et n'est donc pas en mesure de vous les fournir. Les statistiques sur les visites à l'urgence sont produites à partir de la base de données du Système d'information de gestion des urgences. Pour tenter d'obtenir les statistiques demandées, vous pourriez vous adresser au Guichet d'accès pour les données de recherche de l'Institut de la statistique du Québec, à l'adresse :

<https://statistique.quebec.ca/recherche/#/accueil>.

Par ailleurs, nous vous informons que vous pouvez demander à la Commission d'accès à l'information de réviser cette décision. Vous trouverez ci-annexée une note explicative à cet égard.

Veillez agréer l'expression de nos sentiments les meilleurs.

Le directeur par intérim

Original signé

Robin Aubut-Fréchette

p. j. 1