

Presenting Author Name

Jacob Marks

Phonetic spelling of your (full) name

Jacob

Presenting Author Category

Undergraduate Student

Supervisor Name

Aziz Mhanni

GBD Audio File

CHRD.m4a

Headshot

Headshot.jpg

Short Bio (100 words)

My name is Jacob Marks and I am a second-year medical student here at the University of Manitoba completing my B.Sc. (Med) in pediatrics and genetics/metabolics with Drs. Aziz Mhanni and Cheryl Rockman-Greenberg. I am interested in helping pediatric populations in Manitoba and Canada get more equitable and timely access to care, especially for rare diseases which can present with potentially fatal consequences. I hope to work with these populations clinically in the future, while also contributing to research in the field. In my free time, I enjoy long-distance running and watching the Green Bay Packers.

Research Category

Clinical

Abstract Title

Bridging the gap: availability of emergency medications/emergency medical foods for inherited metabolic diseases in Canadian metabolic treatment centres.

Authors

Name	Role	Profession
Jacob Marks	Presenting Author	Medical Student
Cheryl Rockman-Greenberg	Co Author	Distinguished Professor
Michal Inbar-Feigenberg	Co Author	Associate Professor

Angela Krutish	Co Author	Genetic Counsellor
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Aziz Mhanni	Co Author	Associate Professor
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Background

Patients with certain inherited metabolic diseases (IMDs) are at risk for life-threatening metabolic decompensations requiring prompt administration of emergency medications and medical foods. While standardized emergency management protocols exist, timely access to these critical resources may vary among tertiary metabolic treatment centres in Canada.

Objective

This study aims to collect data on and to identify gaps in the availability of emergency medications and medical foods used in the initial management of these patients in crisis. Through this, we will propose solutions to mitigate these gaps.

Methods

A cross-sectional, mixed-methods survey has been distributed to 17 tertiary Canadian metabolic centres with an estimated completion time of 15-30 minutes for approximately 75 questions. The survey assesses the availability of key emergency medications and medical foods, institutional protocols for emergency response, barriers to timely access, and existing mitigation strategies. Quantitative data will be analyzed using descriptive statistics (frequencies, proportions, and measures of central tendency) to characterize availability and variability across centres. Qualitative responses will be analyzed using thematic analysis to identify common barriers, system-level challenges, and potential mitigation strategies.

Results

Collection of results is ongoing and will be completed by the end of summer 2027. Quantitative results will summarize the proportion of centres with immediate access to select emergency medications and medical foods, variability in institutional protocols, and reported delays in access. Qualitative responses will undergo thematic analysis to identify recurring barriers, including procurement, regulatory, or logistical challenges. Findings will be synthesized to highlight disparities between centres and identify opportunities for system-level improvement in emergency preparedness for IMDs.

Conclusion

By mapping national variability and gaps in access to emergency medications and medical foods for IMDs, this study seeks to identify barriers to timely equitable care and generate evidence to support national strategies that strengthen and standardize emergency preparedness across Canadian metabolic centres.