

if the unit goes overseas?" he asks. "Who's going with them? A civilian doctor? I don't think so."

He also says that the retention problem extends beyond medicine, because staffing shortfalls already exist in the ranks of military pharmacists and medics.

Almost all 10 nonadministrative physicians based in Petawawa already work in emergency rooms and walk-in clinics throughout the Ottawa Valley. For instance, Dr. Paul Bradford says he earns more money working after hours and on weekends than in the military. He says he has to moonlight to maintain competence and remain current, since doctors at the base see few pediatric and relatively few female patients.

"You have to moonlight or the brain gets rusty," adds Captain Daisy Vianzon Edora, a UBC graduate who arrived at Petawawa last summer to join her husband, Captain Fil Edora. "The military provides a picked patient population, so the medicine itself isn't that interesting or challenging."

"Three-quarters of it is orthopedic sports medicine, with sore backs, ankles and so on," agrees Goldstein. "You're basically dealing with people aged 18 to 40, and anyone who becomes seriously ill gets released."

A world of hurt

The job of making military medicine more palatable at Petawawa falls to Major Jim Kile, the base surgeon, who is responsible for coordinating care for the base's 5000 potential patients. He says he only has to look at his officers' dress uniforms to see where the major difficulty exists. "You see young guys here with 5 or 6 ribbons [each signifies a different deployment] and you know why there is a problem. [Deployments are] part of the deal when you sign on, but after a while civilian life starts to look awfully appealing."

Kile, who graduated from the University of Toronto in 1992, says the medical service is facing a multifactorial problem that it must solve quickly. "Two of my captains — both unit medical officers — are leaving in May, and to the best of my knowledge no one is coming in to replace them. If we don't do something, and do it soon, we could be in a world of hurt."

So what does the future hold? Ron Goldstein isn't holding his breath. "The way things are going," he sighs, "the last one standing will be surgeon general."

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"I'm outta here"

Captain Paul Bradford should be a poster boy for military medicine. A former air cadet whose family medicine skills were honed in northwestern Ontario's superb residency program, he signed on with the Medical Officer Training Plan in 1989 and currently serves as medical officer with the Royal Canadian Dragoons at CFB Petawawa. Come May, the Dragoons will need a new doctor — Bradford is returning to civilian life and a year's training in emergency medicine. After that, he'll hang his shingle in southern Ontario.

Military life looked reasonably attractive when Bradford joined up — military physicians had just been granted a large raise and there was a chance for attractive postings to places like West Germany.

He probably signed on at the worst possible time. Not only did massive personnel cuts begin early in the 1990s strength has dropped from 85 000 personnel in the late 1980s to 60 000 today — but the government began asking the military to do more.

During 4 years of full-time duty Bradford did not benefit from a posting to Germany because Canada no longer has bases there. Instead, he was posted to the country's busiest army base and completed a tour in Bosnia, provided 5 weeks of emergency relief in Honduras and spent a month in Winnipeg during the 1997 flood. He also answered the call during Ontario's 1998 ice storm and Toronto's 1999 blizzard, and participated in several military exercises.

"There's more to it than the pay," says Bradford. "My wife wanted me to get out, basically because there's so much uncertainty — they can suck you out of your life any time they want."



Captain Paul Bradford greets young patients at Canadian clinic in Bosnia; a Bison armoured ambulance is in background

As he gets ready to leave, he's worried about the soldiers he's leaving behind. "Brian [Devin] and I are still primaries [to be posted to] Kosovo, DART [the military's disaster response team], an air disaster or to replace a doctor injured in Yugoslavia," Bradford says, "and in a few months we'll both be gone.

"Who's going to replace us?"