## Ottawa investigating "suspicious" health Web sites

Twenty-five Canadian Web sites are being investigated by Canada's Competition Bureau following an international sweep that uncovered 1041 "suspicious" health-related sites worldwide.

About 50 were in Canada, and half of them are "potentially problematic," says Ian Spence, leader of the bureau's National Internet Surveillance Project. Corporate offenders can face fines for a first offence under the Competition Act.

Canada's sweep is part of a global effort by 29 countries, which is led by the International Marketing Supervision Network. The network helps prevent and redress deceptive marketing practices. Previous Internet sweeps have uncovered get-rich-quick schemes and miracle cures,

with 1400 of the latter uncovered worldwide. Sites whose claims appear to be untrue are dubbed "suspicious" and subjected to further investigation.

Spence says most of the 25 Canadian sites being investigated are selling longevity and weight-loss products. A number of sites sell "amino acid products" that "block the metabolic process" so that purchasers "consume fat as they sleep." Since January 2002, the bureau has received about 100 complaints concerning weight-loss products.

Site owners may be asked to back their claims. If they can't, they are "encouraged" to drop them; a court injunction — essentially, a cease-and-desist order — may be placed against them, and fines may be applied. Spence says this has happened only a "couple of times" since the act was implemented in 1999.

But the bureau has stepped up surveillance. Beginning last August, it began conducting monthly Web searches for potentially suspicious sites, such as those that encourage people to earn money by working from home.

In late April regulators from 13 countries, including Canada and the US, launched econsumer.gov to gather and share cross-border e-commerce complaints and improve investigations. It has also released a new guide for e-consumers, which is available at www.econsumer.gov/. — Barbara Sibbald, CMAJ

## PULSE

## Visit 2 Web sites and call me in the morning

Results from the CMA's 2001 Physician Resource Questionnaire (PRQ) indicate that almost half of Canadian MDs (48%) refer patients to medical Web sites at least occasionally. There were no notable differences in referral rates by the sex, broad specialty or age of the physician, with the exception of those aged 65 and older — only 34% of respondents from that age group make these referrals. Almost all physicians who refer patients to Web sites (93%) are Internet users themselves.

Among those who make these referrals, disease-specific sites received the most frequent recommendation (77%), followed by government (31%), consumer group (21%) and medical association (20%) sites. Only 8% referred patients to commercial health sites such as WellnessWeb.

PRQ respondents were asked if they tend to recommend Canadian sites rather than American or other international sites. Among those who make these referrals, half prefer Canadian sites while 36% have no preference. GP/FPs were somewhat more likely to prefer to send patients to Canadian sites (57%) than were medical specialists (43%) or surgical specialists (39%).

Among those who tend to recommend Canadian sites, 89% do so because they prefer sites oriented to Canada's health care system, while 28% prefer those that offer information either in French or in both official languages. Respondents without a preference for Canadian sites said that the content of American/international sites is appropriate for Canadian patients (52%), that equivalent Canadian sites do not exist (31%) or that American/international sites are of higher quality and/or are more comprehensive than their Canadian counterparts (27%). Surgical specialists were somewhat more likely to state that non-Canadian sites are higher quality or more comprehensive (40%) than were medical specialists (32%) or GP/FPs (17%). Full results from the 2001 PRQ are available at www.cmaj.ca /cgi/content/full/165/5/626/DC1. — Shelley Martin, Senior Analyst, Research, Policy and Planning Directorate, CMA

