Dr. Kraus, I presume?

Every 3 weeks, Dr. Daniel Kraus hops on a plane at 7 am and flies 531 km to see patients with chronic mental illness in the Northern Quebec town of Val d’Or. Every 6 weeks he continues on from Val d’Or to other remote communities, checking in on his schizophrenic patients along the way. At the end of the day, he flies home to Montreal.

This peripatetic life — after 22 years, he has the routine down pat — lets the McGill psychiatrist be part of many communities. “Each of these towns has its unique identity, its own history, its own idiosyncrasies. And it’s just beautiful country to roll through.”

An avid hiker and cyclist, Kraus rarely gets a chance to experience the backwoods when he is up North. As one of the few psychiatrists seeing outpatients in the mining towns of Val d’Or and Timmins, Ont., he has almost no free time. Another of his regular stops is Cochrane, an Ontario town with 4500 residents. Since 1992, Kraus has been its sole psychiatrist.

Despite the shortage of help, Kraus says patients who develop a mental illness may be better off in places like Val d’Or than in Montreal. In the North, he says, they become more integrated into the life of their small communities and have a greater sense of belonging.

Flying in and flying out every few weeks gives Kraus a break in his routine and satisfies his desire to see how patients fare over the long term. “I’ve known some of these patients for 15 to 20 years. The life stories of people who work in the mines or who go into the forest to cut their own wood are very different from the stories I hear in Montreal.”

Despite his commitment to outreach psychiatry in the North, Kraus is a city boy at heart. He grew up in Westchester, NY, but has lived in the heart of Montreal most of his adult life. A pianist, he was awarded a master’s degree in music performance the day he graduated from medical school.

Kraus first flew north in the cockpit of a turbo-prop owned by Dr. Maurice Dongier, the Montreal psychiatrist who pioneered the provision of psychiatry services in remote communities. Because Kraus has a pilot’s licence, he often flew the plane himself. Now that commercial airlines fly the route, he contents himself with driving the backroads between towns and meeting up with the occasional moose, bear or flooded highway along the way. “I can go the 72 km between Duparquet [Quebec] and Matheson [Ontario] and not see another car,” he says.

The other perk is the people. “It’s really about forming relationships,” he says. “Psychiatry is a very transportable skill. I don’t have to bring equipment along — I just bring myself.” — Susan Pinker, Montreal

UBC takes brakes off tuition fee increases

Tuition fees at the University of British Columbia (UBC) will rise by 75% for incoming medical students and by 50% for other students this September.

The BC government had frozen post-secondary tuition fees for the last 6 years, making UBC’s fees — $3740 for first-year medical students — the lowest in Canada except for Quebec. They will remain much lower than in Ontario, where University of Toronto students currently pay $15 000 annually.

UBC Dean John Cairns says the 6 years of flat fees and decreasing operating grants have left the school in a precarious position. “The strains in terms of sustaining quality are severe. We have not been able to hire junior faculty and we have lost faculty positions.”

And the fee increases will continue. “The provincial government will not be increasing the funding to postsecondary education over the next 3 years, but costs will certainly rise.”

Lance Anderson, a third-year medical student and UBC’s representative on the Canadian Federation of Medical Students, says medical schools are becoming less accessible. “They will become so elitist that they will only be available to rich families. A lot of people won’t even consider them.”

Cairns is worried too. “Any increase in costs has the potential to create financial barriers, so part of the reason for phasing this in is to allow time to try to put in place some more effective [financial] initiatives.”

Cairns thinks the student loan system should be changed. “The repayment schedules for student loans are absurd. … Our students graduate with an MD and enter anywhere from 2 to 6 more years of education, and yet they have to start repaying their loans on a very modest income.”

Anderson, who says many students now graduate facing debts of $50 000 to $100 000, thinks loan amounts should be increased before the fee increases take effect. But he understands that a fee increase was needed.

“We have had a tuition freeze for a long time, but when we are talking about $15 000, we are getting a little out of control.” — Heather Kent, Vancouver