10 stories that mattered: Dec. 6–12

- Nova Scotia’s new collaborative emergency centres have improved access to primary care and decreased the number of unplanned emergency department closures from a lack of available doctors in the province, according to a 10-month evaluation. The province currently has eight such facilities — which provide both primary and urgent care — and plans to open another six.

- Alberta’s health minister struck a task force to look at the business case for a single health information system that would allow communication between health facilities and providers in the province. Currently, there are at least 12 different electronic medical records systems used in Alberta, and more than 20% of physicians in the province don’t use any electronic system.

- Ontario’s health care system will saddle the province with a $1.19-trillion tax burden due to increased costs over the next 50 years, the C.D. Howe Institute reported. The think tank urged the province to control costs by switching from an age-based drug plan to an income-based one, and expanding the role of less costly health workers, such as nurses and pharmacists.

- Two violent attacks on health workers in British Columbia prompted a call for increased security in mental health facilities. The British Columbia Nurses Union asked the Interior Health Authority to immediately provide personal alarms, security cameras and dedicated security on psychiatric wards.

- Arbitration hearings began in Nova Scotia to divvy up thousands of health workers under a controversial new collective bargaining structure. Earlier this fall, the province passed legislation to merge nine health authorities into one and divide nursing, health care, clerical and support staff among four unions.

- Health Canada isn’t enforcing laws on direct-to-consumer advertising for prescription drugs, an expert review revealed. The review cited cases from 2000 to 2011 in which Health Canada turned a blind eye to promotion of off-label drug use and products with serious safety concerns.

- Chronic understaffing in long-term care is fostering systemic neglect, the Ontario Council of Hospital Unions warned in a report. It cited a “barrage of injuries, infections, bedsores, abuse and unsafe work practices … hastening incontinence and loss of mobility in residents.”

- Young adults increasingly rate their mental health as poor, according to results of an ongoing study conducted by the Centre for Addiction and Mental Health. More than 12% of Ontarians aged 18–29 reported poor mental health in 2013, compared to nearly 3% in 2009. Antidepressant use has also quadrupled since 1997.

- A clinical trial of a Canadian-developed Ebola vaccine was suspended after four participants complained of mild joint pains, the CBC reported. The trial will resume Jan. 5 once researchers are satisfied the symptoms are benign and temporary.

- The Canadian Armed Forces created a new national centre of excellence and chair for military and veterans’ mental health. Colonel Rakesh Jetly, senior psychiatrist and mental health advisor to the Surgeon General, will serve as the first chair for a period of three years. — Lauren Vogel, CMAJ