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1867 prom. Alta Vista Dr.
Ottawa ON K1G 3Y6
613 731-9331, 800 267-9703
fax 613 523-0937
E-mail • Cour. élect. : pubs@cma.ca
<http://www.cma.ca/journals/cmaj>



The prevalence of suicide, without doubt, is a test of height in civilization; it means that the population is winding up its nervous and intellectual system to the utmost point of tension and that sometimes it snaps.

— Havelock Ellis, *The Dance of Life*

The suicides of 3 physicians in residency training programs in Winnipeg have been tragic for their families and friends and for the medical profession. Such events make us stop to think about life, and some of us may realize that the daily routine of our lives is composed of countless trivial worries. We also wonder if these deaths could have been avoided. In this issue we report on these deaths and the reaction of the medical community in Manitoba (page 1599). We also publish an open letter to Manitoba's minister of health from 4 representatives of the Manitoba Medical Students' Association. The students review factors that may have added to the stress of the residents' lives and propose solutions.

When should cervical spine x-rays be ordered for alert, stable patients with trauma to the neck? The American College of Surgeons says always. Ian Steill and colleagues examine this question in the context of 8 Canadian hospitals (page 1537). Their review of almost 7000 cases of patients with nonpenetrating trauma to the neck found that only 60 had an acute injury. Rates of ordering radiography ranged from 37% in a community hospital in BC to 72% in a teaching hospital in the same province. Rates also varied considerably between physicians. Clearly some physicians and hospitals are either doing too many or too few.

Sir William Osler has become an icon in Canadian medicine. David Hogan and Mark Clarfield examine Osler's attitudes toward Jews and conclude that he did not adopt the anti-Semitism of his day but was in fact philo-Semitic (page 1559). Faith Wallis responds that despite Osler's respect for the Jewish people he was in fact a man of his age in many of his views on race (page 1549). She argues convincingly that we cannot apply the political correctness of 1997 to a physician from a small town in rural Ontario growing up at the turn of the century.

John Carsley and associates review the mounting evidence that advances in the design of phlebotomy needles with safety devices and the use of blunt suture needles have markedly reduced the rate of needle-stick injuries among health care workers (page 1587). These advances are important. We are still unable to prevent hepatitis C, many health care providers are not vaccinated against hepatitis B, and health care workers who suffer needle-stick injuries do not receive appropriate HIV postexposure prophylaxis.

The CMA has begun publishing a new journal, *Cancer Prevention and Control*. Editor-in-chief Brian Leyland-Jones and Associate Editors-in-Chief Donald Iverson and Fredrick Ashbury hope that the new journal will promote the publication of the findings of Canadian research on the prevention and treatment of cancer. We wish them success in this new venture. — JH