



stantial risk that we would be hit with similar legislative amendments in this province if we did not take a more proactive approach.”

But Kendel doesn't believe that public pressure forced the college into its decision. He says it was impressed by arguments from Citizens for Free Choice and by the organization's moderate stance concerning the college's regulation of Saskatchewan physicians. Kendel says the primary issue has always been public safety.

“Where there is a standoff between doctors and the regulatory bodies, the regulatory bodies lose control,” Kendel says with a sigh. “They [college regulators] don't know what goes on in clinics.”

In a nutshell, the college authorized chelation therapy because it was better for it to be able to regulate the treatment than to have it taking place anyway but in an unregulated and possibly dangerous or fraudulent fashion.

Kendel makes no apologies for the decision. Even though he remains sceptical about chelation therapy, he feels regulatory bodies like his must be more responsive to public demands for a voice in health care. “The society we serve is moving in droves to accessing alternative medicine, and if there's a big demand and it can be delivered safely. . . .”

Over at the Saskatchewan Medical Association (SMA), Dr. Allan Miller thinks carefully before offering his response. “Alternative therapies may be growing in popularity

at the moment, but I'm not sure that because something is popular and trendy that's good enough reason for the medical profession to adopt it as the reasonable thing to do.”

Miller, who was SMA president when the college made its ruling, is unhappy with it and says many of his colleagues feel the same way. In one case, a Saskatchewan television station used stock footage of a doctor in a story about chelation therapy during its supper-hour newscast. By the late-night newscast the station was issuing an apology to that physician, telling viewers the doctor was in no way associated with chelation therapy. That's one measure of the depth of suspicion and scepticism some Saskatchewan physicians feel toward it.



Dr. Dennis Kendel: “this won't open the floodgates”

Miller isn't surprised that many physicians have expressed their anger to the college and the SMA. He

notes that scientific validity is the major factor separating medicine from other types of health care. “As soon as we start offering treatments where there is no proof of effectiveness or safety, our credibility goes out the window.”

Miller knows the college faced a tough situation in the chelation debate, but worries that its decision may indicate that public pressure now dictates health care policy. “If we're going to allow the public to decide which therapies are regulated by the college, we might as well roll over and accept a whole lot of unconventional treatments now,” he says.

Others respond that giving patients more input is a

Don't forget your wallet when you visit the Chelation Clinic

If you're planning on visiting Dr. Joseph Persram's Chelation Clinic, bring your wallet. Chelation therapy isn't cheap, and medicare won't pay for it.

Persram's clinic accepts only patients showing evidence of ischemic heart disease. A complete history and physical rules out those with serious renal insufficiency or with other problems that will exclude them from treatment, as outlined in protocols produced by the College of Physicians and Surgeons of Saskatchewan. Patients pay for their own laboratory work during this initial stage, usually between \$100 and \$200.

Persram charges \$100 per chelation treatment. For that, patients receive a dose of ethylenediamine tetraacetate acid, which is administered intravenously with

the aid of an infusion pump. The treatments take 3 hours.

Each patient receives a treatment every other day, with a typical course of treatment lasting for 25 to 30 sessions. Persram recommends that patients receive a monthly booster treatment after that for the rest of their lives.

He also provides diet counselling and recommends that patients take plenty of antioxidants and betacarotene, and reduce their fat intake. He says most of his patients have high cholesterol levels.

In Saskatchewan, physicians require the college's permission to administer chelation therapy. Only licensed doctors who have been certified in the field can receive this authorization, and they must adhere to rigorous guidelines.