## College to appeal discrimination ruling

The College of Physicians and Surgeons of British Columbia has been hit with an unprecedented provincial Human Rights Commission ruling in a case brought by 5 foreign-trained physicians seeking the right to practise

in Canada. The commission ruled that the college discriminated against the doctors by requiring them to do extra training and an internship. The college was ordered to reach a financial settlement within 60 days of the decision, or the case would be reopened. It is currently preparing an appeal.

The case, the culmination of a 6-year process, involves a system of "category 1 and 2" countries that was abandoned in 1993, partly because the college feared further litigation. Physicians

from category 1 countries, such as Britain and South Africa, were allowed to bypass the internship requirement, while those from category 2 countries needed an extra year of training. The doctors involved in the ruling are from Italy, Romania, Russia, India and the Philippines.

Dr. Morris Van Andel, the college's deputy registrar, said the fact that only 2 BC internships existed for foreign-trained physicians is at the heart of the ruling. However, he said the college was not responsible for setting up the



In 1990, several foreign-trained physicians went on a hunger strike in BC to protest their inability to gain licensure in Canada.

internships. "It is a quantum leap to conclude that because the internship positions were not available, that somehow we were responsible," he says.

He says that some temporary licences are granted to foreign-trained physicians who practise in a rural community or needed specialty. However, he says that for the remainder, the extra training could be justified. "Why should we lower the standards that Canadian graduates have to meet?" He also points out that the medical school at UBC does not have enough post-

graduate positions for its own medical graduates.

The college's position illustrates a larger dilemma: the difficulty of determining the standards of medical schools worldwide. Van Andel says "diploma mills" exist that produce graduates who sometimes have little or no contact with patients during their training. Other countries are also wary of foreigntrained doctors, he adds, pointing out that Israel is now home to many Russian physicians who are not allowed to practise there.

Van Andel says the current situation "is a huge, complex problem." He thinks the first step in resolving it is to increase the number of medical school spaces available. At UBC, the number of first-year spaces has remained the same since 1980. — *Heather Kent*, Vancouver

## Drug testing a growth industry in Salt Lake City

Do your cheeks hurt when touched? Do you have osteoarthritis of the knee? Does overexposure to the sun cause you to get cold sores? Private research firms regularly use newspaper ads in Salt Lake City to solicit individuals with these types of ailments to serve as paid subjects in drugresearch studies.

Until the mid-1980s, clinical trials like these were usually done by researchers at university medical centres, but the managed-care industry put pressure on US drug companies

to cut costs. Now studies to evaluate the safety and effectiveness of new drugs are more likely to be done by private companies or by doctors doing the work as a sideline to their private practices.

Faster and cheaper private studies have helped American drug companies to introduce more than 300 new drugs in the past decade, says Dr. Ralph Karler, a pharmacology professor at the University of Utah. In Salt Lake City, at least 15 organizations—including private companies, doc-

tors, clinics and hospitals — use newspaper and broadcast ads to recruit volunteers. No figures are available for the number of tests conducted or the number of volunteers involved annually. "The drug companies are grinding out drugs at an incredible rate and they need them tested," says Karler. "It's very lucrative and it's very easy."

On a recent Sunday, Intermountain Clinical Research advertised in

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