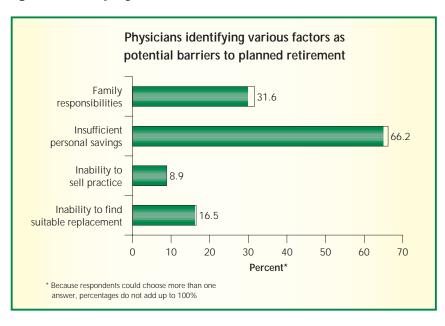
Pulse

"Freedom 55" closer to age 65 for physicians

This year, for the first time, the CMA's Physician Resource Questionnaire (PRQ) asked physicians to state the age at which they plan to retire from active medical practice. While the average age of planned retirement is 63 years, there are distinct differences among demographic groups. Female physicians tend to plan to retire earlier than their male colleagues (at age 60 versus age 64). The average age of planned retirement for GP/FPs (62 years) is slightly lower than for medical and surgical specialists (64 years).

Interestingly, the average age of planned retirement increases consistently by age group. On average, those under age 35 plan to retire at 58 years of age, while the average age of planned retirement is 63 years for those in the 45–54 age group and 66 years in the 55–64 age group. On average, active physicians aged 65 and older plan to retire at 72 years.

The PRQ also asked physicians to identify factors that might prevent them from retiring at their planned age. Insufficient personal savings was the most frequently cited barrier, with 66.2% of respondents indicating that this could interfere with their retirement plans. Younger physicians appear to be particularly concerned about having insuffi-



cient savings to retire at their planned age, with 73.3% of physicians under age 35 and 71.7% of those aged 35–44 citing this as a potential barrier, compared with 58.1% of those aged 55–64 and 43.6% of those aged 65 and older.

Overall, 16.5% of physicians indicated that failure to find a suitable replacement could impede their retirement plans. This appears to be a greater concern among rural physicians; 22.5% of them cited it as a barrier to retirement, compared with

15.9% of urban physicians. At 21.4%, GP/FPs were more likely to view inability to find a replacement as a possible barrier to retirement, compared with only 11.1% of medical specialists and 10.9% of surgical specialists.

The 2000 PRQ was mailed to a random sample of 8000 Canadian physicians, and the response ate was 36.3%. Results are considered accurate to within ±1.9%, 19 times out of 20. — Shelley Martin, martis@cma.ca

Alberta support program for MDs more popular than expected

Physicians are using Alberta's Physician and Family Support Program twice as much as expected. When the program was created in 1997, the Alberta Medical Association anticipated that 2% to 2.5% of eligible Alberta physicians and trainees would use it annually; in fact, 5.5% of physicians, medical students and residents have taken advantage of the free confidential referral and counselling service, and prevention and education sessions.

Robin Robertson, the program man-

ager, says the high usage is due to publicity, effective word-of-mouth advertising and clients who trust that the service will be beneficial. The service is available to eligible Alberta physicians, residents and medical students, and to their immediate family members.

The predominant topics dealt with are family and psychological issues such as anxiety and depression, which account for 68% of primary presenting problems. "Callers may have more than one issue, but we record the primary

presenting issue and this is where the statistic comes from," says Robertson. Work-related problems account for 9% of calls and the remainder involve issues such as addiction and legal problems.

The counselling programs, including retreats, are also popular. More than 100 doctors have attended "Reclaiming Equilibrium," a 2.5 day retreat during which facilitators help participants discuss the challenges of balancing a medical career with family life. — *Grace Visconti*, Calgary