

## Most NS seniors to pay higher drug premiums

In an effort to “help more low-income seniors manage their drug costs,” the Nova Scotia government has significantly increased the cost of its provincial drug program for all other seniors. In April the annual premium for the province’s Pharmacare program jumped by more than 50%, from \$215 to \$336.

“This is the first time that the premium has changed since 1995, while drug costs continue to be the fastest

growing health expenditure across the country, at about 10% each year,” says Health Minister Jamie Muir. The Pharmacare program, available to seniors who do not have other drug coverage, has also been changed to increase assistance to low-income seniors. As a result, an additional 7000 seniors are eligible for a reduced premium. At present, approximately 95 000 seniors have Pharmacare coverage and roughly half do not pay the

full premium. Many pay nothing.

One reason for the changes may be the escalating price of Pharmacare, which will cost the government \$87.5 million this year, while the seniors who use it will contribute only \$37 million. When Pharmacare premiums were introduced in 1995, the cost was to be split evenly between government and seniors, but the government now pays 70% of the cost. — *Donalee Moulton, Halifax*

### HEART AND SOUL

## A long way from Kabul

When Dr. Karim Qayumi arrived in Canada in 1983 after fleeing Soviet-occupied Afghanistan with his wife and young son, he and his wife practically lived at the local library for 6 months teaching themselves English. Then he rolled up his sleeves and visited the University of British Columbia.

Today Qayumi, a professor of cardiovascular and thoracic surgery at UBC, is prime mover behind the creation of a high-tech Centre of Surgical Excellence at the Vancouver Hospital. He says it will give students “dry lab” experience with new technologies, while at the same time educating residents and boosting BC’s rapidly developing telemedicine initiatives.

Unlike other North American surgical centres that incorporate anatomy or animal laboratories, the Vancouver centre will link, technologically, to these facilities at the UBC medical school and other sites. A “smart classroom” will be connected to the hospital’s trauma unit, emergency department and operating rooms.

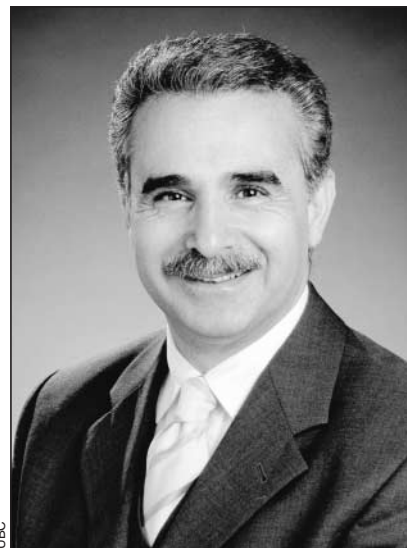
“I can communicate with my students in the whole province,” he says. “Our emphasis is on high tech to facilitate our educational goals.”

These goals include the new problem-based curriculum, which depends on small-group tutoring that requires far more professors than the university can afford. Thus, the high-tech solution.

Qayumi also believes the centre will raise the quality of the physicians UBC is producing. “We hope the centre will provide the facilities so that once we teach our students and residents something, they will have a consistent base to come to and practise more and more to sharpen their skills.”

With help from his son Tarique, Qayumi has also developed interactive “Cyberpatient” software that allows students to take the history of a virtual patient and carry out an examination and offer treatment, while receiving voice and physical responses, such as facial expressions. The software is being tested in 15 medical schools, and results will be available by the end of 2002. “Nobody has tested the validity of these kinds of programs,” says Qayumi. “We want to compare computer-assisted learning with traditional textbook learning.”

Eventually, says Qayumi, technology will supplant animals and “human guinea pigs” in the training of surgeons. For example, pressure-based technology currently under development at BC’s Simon Fraser University will let students manipulate a surgical instrument and “feel” tissue, and in the process learn “how much to pull, how much to push, how much to hold things together.” However, he insists that the technology is not supposed to replace live patients but to provide “a better learning environment before



Qayumi: virtual reality

they go and touch a patient.” He thinks the software will be useful as early as the second year of undergraduate training.

This is all a far cry from the conditions at his beleaguered alma mater, the University of Kabul. Qayumi admits that he “doesn’t know how he can be useful” during Afghanistan’s rebuilding process. “If somebody can convince me that there is money and resources and people to support me so that I can go and build something, and tell me that I am the right person, I’ll go,” he says. “I’ll go tomorrow.” — *Heather Kent, Vancouver*