## HEART AND SOUL

## **Captain Condom captures Vancouver**

If you live in Vancouver, Dr. John Blatherwick is probably as familiar to you as the Lion's Gate Bridge. This outspoken, 30-year veteran of the city's public health wars is a media regular, passionately educating the public on everything from the harmlessness of sediment in running water to influenza.

Blatherwick's career choice seemed unlikely back in 1969, when he graduated from the University of Alberta and began a residency in internal medicine at the Vancouver General. In the emergency department he frequently saw people from the youth hostel who needed help but didn't require hospitalization. He told the city's medical health officer about the need for a youth clinic, and since one had just opened, Blatherwick was offered a job.

Because of his background — his father was an air force officer and Blatherwick had served in the air force reserve — his new patients marked a big change. "All of a sudden," he recalls, "I was faced with drug addicts and deserters from the Vietnam war."

He also came to realize that "public health people make a difference on a much larger scale. I never looked back."

He soon realized that drug addicts are concerned about their health. "The approach had to be to help, support and protect them," he says.

In 1972, Blatherwick moved from the clinic to the Vancouver Health Department. Three years later he was named medical health officer at the Simon Fraser Health Unit, and in 1984 he moved into his current position as Vancouver's medical health officer.

AIDS has proved one of his biggest challenges. In the early years of the HIV epidemic, public and professional awareness was limited, and the view that AIDS was God's revenge was all too common. "That's saying you can't do anything about it," said Blatherwick, who then turned to San Francisco's treatment and prevention programs to use as models for Vancouver.



No stranger to controversy

The aim was to prevent infection and support people living with AIDS, but "there was always a big conflict between those who wanted you to prevent it and those who wanted you to help people who already had it. You had to satisfy both camps."

Despite the city's foreboding, Blatherwick turned to the media to deliver his messages, and they became frontpage news. It was the start of a long-lasting relationship with reporters. "My kids refer to my wife [Carol] as the real doctor," he says. "I'm the one who talks to the media." His local prominence has resulted in some odd monikers, including "Captain Condom."

Today, he's worried about complacency surrounding HIV/AIDS and the rising rates of infection. Education and other preventive measures are being abandoned, he says, and "we simply spend more money on drugs."

Services are also lacking. In Vancouver's Downtown Eastside, the provincial epicentre of HIV/AIDS infection, Blatherwick sees the need for a detoxification centre, accommodation and safe injection sites.

"We have to rebuild the infrastructure so there is some hope for these people," he says. — *Heather Kent*, Vancouver

## Plasticizer an unacceptable risk for some patients, Health Canada told

A Health Canada expert advisory panel recommends banning the use of medical devices containing DEHP (di-2-ethylhexyl-phthalate) in newborns, prepubertal males and patients receiving intensive intravenous therapies.

DEHP, a plasticizer used to soften the polyvinyl chloride used in IV bags, tubing and other devices, has been linked in animal studies to reproductive problems, particularly a decline in sperm production (see *CMAJ* 1998;159 [3]:261-2). DEHP and other products such as pesticides and heavy metals have been linked with modulation of the endocrine system. It is not yet known whether small amounts of the chemicals

The expert panel also expressed concern about the possible toxic effects of DEHP exposure during cardiopulmonary bypass, hemodialysis and similar procedures.

The panel's final report states that infants receiving neonatal intensive care may receive 20 times the exposure to DEHP considered tolerable by the US Food and Drug Administration (FDA). The report recommends using alternative products for patients at "greatest risk" and calls for the labelling of all devices containing DEHP.

Rich Whate, spokesperson for Health Care Without Harm (HCWH), describes the panel's recommendations as "the strongest call for action on DEHP yet." HCWH, an international coalition of 350 organizations, disagrees with Health Canada's stance to date on the strength of the evidence against DEHP. Still, Health Canada plans to develop a position statement by this summer that may provide a basis for legislation or guidelines.

A recent FDA report on DEHP-containing medical devices doesn't go as far as the Canadian panel in its recommendations. It states that critically ill male babies and some other patients should not be exposed to DEHP. — *Barbara Sibbald*, CMAJ