

## EDITORIAL • RÉDACTION

### Editor • Rédacteur

John Hoey (john.hoey@cma.ca)

### Senior Deputy Editor • Rédactrice adjointe principale

Anne Marie Todkill (annemarie.todkill@cma.ca)

### Deputy Editor (Scientific) • Rédactrice adjointe, Sciences

Jennifer Thomas (jennifer.thomas@cma.ca)

### Associate Editors • Rédacteurs associés

Tom Elmslie (telmslie@scohs.on.ca)

Ken Flegel (ken.flegel@muhc.mcgill.ca)

Anita Palepu (anita@hivnet.ubc.ca)

Erica Weir (erica.weir@utoronto.ca)

Eric Wooltorton (eric.wooltorton@cma.ca)

Nick Barrowman (Biostatistics • Biostatistique)

### Editorial Fellow • Boursier en rédaction médicale

James Maskalyk (james.maskalyk@cma.ca)

### Ombudsman-Ethicist • Ombudsman-éthicien

John Dossetor (ombudsman@cma.ca)

### Managing Editor • Rédacteur administratif

Randy Chafy (randy.chafy@cma.ca)

### News Editor

### Rédacteur, informations générales

Patrick Sullivan (patrick.sullivan@cma.ca)

### Editors • Rédacteurs

Patricia Lightfoot (patricia.lightfoot@cma.ca)

Jennifer Raiche (jennifer.raiche@cma.ca)

Kate Schissler (kate.schissler@cma.ca)

Barbara Sibbald (barbara.sibbald@cma.ca)

Steven Wharry (steve.wharry@cma.ca)

### Editorial Administrator • Administratrice de rédaction

Carole Corkery (carole.corkery@cma.ca)

### Editorial Assistants • Assistantes à la rédaction

Erin Archibald (erin.archibald@cma.ca)

Wilma Fatica (wilma.fatica@cma.ca)

Melanie Mooy (melanie.mooy@cma.ca)

Joyce Quintal (joyce.quintal@cma.ca)

### Translation Coordinator

### Coordonnatrice de la traduction

Marie Saumure

### Contributing Editors • Rédactrices invitées

Gloria Baker, Charlotte Gray, Peggy Robinson,  
Lori Anderson, Ann Bolster, Leanne Ridgeway

### Editorial Board • Conseil de rédaction

Paul W. Armstrong (Edmonton)

Neil R. Cashman (Toronto)

Deborah J. Cook (Hamilton)

David H. Feeny (Edmonton)

William Ghali (Calgary)

Frank R. de Gruijl (Utrecht, the Netherlands)

Judith G. Hall (Vancouver)

Carol P. Herbert (London)

Alejandro R. Jadad (Toronto)

Jerome P. Kassirer (Boston)

Finlay A. McAlister (Edmonton)

Allison J. McGeer (Toronto)

Harriet L. MacMillan (Hamilton)

David Moher (Ottawa)

Susan Phillips (Kingston)

André Picard (Montreal)

Donald A. Redelmeier (Toronto)

Martin T. Schechter (Vancouver)

Sander J.O. Veldhuyzen van Zanten (Halifax)

Salim Yusuf (Hamilton)

All editorial matter in *CMAJ* represents the opinions of the authors and not necessarily those of the Canadian Medical Association (CMA). The CMA assumes no responsibility or liability for damages arising from any error or omission or from the use of any information or advice contained in *CMAJ* including editorials, studies, reports, letters and advertisements.

Tous les articles à caractère éditorial dans le *JAMC* représentent les opinions de leurs auteurs et n'engagent pas l'Association médicale canadienne (AMC). L'AMC décline toute responsabilité civile ou autre quant à toute erreur ou omission ou à l'usage de tout conseil ou information figurant dans le *JAMC* et les éditoriaux, études, rapports, lettres et publicités y paraissant.

## Weapons of mass construction

Last year as we wrote the editorial for our holiday issue<sup>1</sup> we wondered where the events of September 2001 would lead us. Twelve months later, we wonder if we've been led to the brink of war. Frustrated by the amorphous quality of the enemy, the campaign against terror has the hard target of Iraq in its sights. We cannot presume to second-guess "intelligence" or to judge the degree of economic self-interest in the West's goals of regime change and disarmament, but there can be little argument about the human cost of war.<sup>2</sup> As many as 86 000 civilian deaths are attributable to the Gulf War in 1991,<sup>3</sup> a figure that does not take into account the health effects of massive environmental degradation in Iraq and Kuwait. Nor does it include the impact of the more indirect aggression of sanctions.

A UK affiliate of International Physicians for the Prevention of Nuclear War estimates the potential casualties in a "conventional" war on Iraq at between 48 000 and 261 100.<sup>3</sup> If chemical, biological or nuclear weapons are used, the toll will be exponentially higher and the environmental cost incalculable. Ironically, the UN resolution authorizing war on Iraq should weapons inspections fail was approved barely a month after the WHO launched a campaign to combat all forms of violence with a report that, among other things, outlined risk factors for "collective violence," including social inequity (including in health and education), economic decline, repressive governance and the deterioration of public services.<sup>4</sup>

The violence that Saddam Hussein has inflicted on his own people cannot be glossed over. But "regime change" will not be sufficient to remove the risks to health and well-being that plague the people of Iraq, let alone restore an economy that plunged from a gross domestic product of \$66 billion in 1989 to

\$245 million in 1992.<sup>3</sup> Any tactical plan must include reconstruction.

For the grim reasons we all know, Western foreign policy has concentrated on matters of national security in this past year, deflecting attention from the risk factors for collective violence. Despite US President Bush's pledge to the Millennium Development project to fight poverty, disease and environmental degradation, the US falls \$60 billion a year short of the target while its annual military spending has increased by about the same amount.<sup>5</sup> In Canada, intellectuals and military advisors alike urge us to increase our military capacity to exert more influence on the international stage. Ah, but what of our capacity for influence in international aid, which stands, unimpressively, at about 0.25% of GNP?

The deadly business of military risk management must not cause us to lose our grip on the armamentarium of peace: water, food, health care, education and economic development. As UN Secretary-General Kofi Annan has said: "Today's real borders are not between nations, but between powerful and powerless, free and fettered, privileged and humiliated. Today, no walls can separate humanitarian or human-rights crises in one part of the world from national-security crises in another."<sup>6</sup> — *CMAJ*

### References

1. Time signatures: 9/11 and 1911 [editorial]. *CMAJ* 2001;165(12):1573.
2. Murray CJL, King G, Lopez AD, Tomijima N, Krug EG. Armed conflict as a public health problem. *BMJ* 2002;324:346-9.
3. Salvage J. Collateral damage: the health and environmental costs of war on Iraq. London: Medact; 2002. Available: www.medact.org (accessed 2002 Nov 15).
4. World Health Organization. *World Report on Violence and Health*. Available: www5.who.int/violence\_injury\_prevention/main.cfm?p=000000682 (accessed 2002 Nov 15).
5. Sachs J. Weapons of mass salvation. *Economist* 2002; Oct. 26: 71-2.
6. Annan K. Nobel lecture. Delivered in Oslo; 2001; Dec 10. Available: www.nobel.se/peace/laureates/2001/annan-lecture.html (accessed 2002 Nov 15).