

A “buddy” program for mothers

Very preterm birth (< 30 weeks’ gestation) is a stressful event for parents because such births are associated with high mortality and poor outcomes for the infants who survive. Michele Preyde and Frida Ardal evaluated the effectiveness of parent-to-parent peer support for mothers of very preterm infants in a neonatal intensive care unit (NICU). Mothers in the intervention group were paired with trained mothers who had previously had a very preterm infant in the NICU and who provided principally telephone support. The mothers who participated in the “parent buddy” program reported less stress, anxiety and depression and greater social support than the mothers in the control group.

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Irfan Khan/Canpress

Quality of care in walk-in clinics

Walk-in clinics are an increasingly common feature of Ontario’s health care system. However, the quality of the care they provide is the subject of continuing debate. In this issue, Brian Hutchison and colleagues describe how they assessed and compared patient satisfaction (by questionnaire) and quality of care (by chart abstraction) for common minor acute conditions in walk-in clinics, family physicians’ offices and emergency departments. They found that overall satisfaction was highest among family practice patients. Both family practices and walk-in clinics were perceived more positively than emergency departments with regard to patient-centred communication, physician attitude and waiting times. In contrast, overall quality-of-care scores were higher for walk-in clinics and emergency departments than for family practices.

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Hormone replacement therapy

Although there is evidence from clinical trials to support the use of estrogen replacement therapy for the treatment of vasomotor and urogenital symptoms in postmenopausal women, support for the use of hormone replacement therapy (HRT) in this population to prevent cardiovascular disease, osteoporotic fractures and colon cancer is controversial and, until

recently, was based largely on observational trials. Whereas recent randomized controlled trials have confirmed that HRT reduces the risk of colorectal cancer and osteoporotic fractures, they have failed to show a protective effect of HRT against coronary artery disease and instead have revealed an increased risk of heart disease, stroke, invasive breast cancer and venous thromboembolism. Karin Humphries and Sabrina Gill review current evidence for the risks and benefits of HRT and advise physicians to consider these with each patient before prescribing this therapy.

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Training internists

Are today’s internal medicine residency programs adequately preparing new internists for their professional lives? Kenneth Flegel and Anita Palepu argue that they are not. In recent years, hospitals have closed beds and shifted more patients to outpatient clinics and day hospitals to cut costs. As a result, the diagnostic thinking that used to take place on the ward takes place before admission, or it will take place after discharge when the patient’s test results become available. The authors contend that internal medicine residents, who spend 85% of their time on inpatient services, are not gaining sufficient exposure to the complex diagnostic challenges they will face in their careers.

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