

Dearth of dialysis feared in UK

An acute shortage of dialysis machines is causing numerous premature deaths in the UK, a study by the country's National Kidney Research Fund indicates. More than 100 000 people have kidney disease but only 34 000 are receiving dialysis or have had a kidney transplant.

Of the 71 UK kidney treatment units surveyed, 12 have been forced to turn away patients. Other units reported that they have been forced to take emergency measures to accommodate increasing numbers of patients. Some offer patients dialysis only 2 times a week instead of 3, while others hold overnight treatment

sessions. Most units reported they were working at full capacity, with no appointment times for new patients. "Some providers acknowledged that the final options for such patients are conservative management and/or death," the report said.

The number of Britons receiving dialysis, 328/million inhabitants, compares unfavourably with other European countries, where the average is 537/million.

"We are extremely concerned, for it is clear that the progress we thought we were making over the past 5 years has

amounted to nothing," said Tim Strathan of the National Federation of Kidney Patient Associations. He said the number of patients with kidney disease is expected to double over the next decade, as rising levels of obesity and related type 2 diabetes mellitus cause more kidney disease and failure.

More than 90% of treatment units surveyed reported they had trouble taking in patients from outside their area, and over 75% reported difficulties in arranging treatment for patients moving to another part of the country. — *Mary Helen Spooner*, West Sussex, UK

PULSE

Family matters

The 2002 CMA Physician Resource Questionnaire (PRQ) determined that 84% of Canadian physicians are currently married, living common law or living with a partner. Among doctors married to or living with a partner, 32% of females and 14% of males are living with another physician. Female physicians whose partner is a physician tend to spend fewer hours per week on professional activities than those whose partner is not (45.2 hours vs.

49.9 hours). Having a physician spouse has no impact on the number of hours per week that male physicians spend on professional activities (56.2 hours when the partner is a physician vs. 55.7 hours when he or she is not).

For female physicians, hours spent on professional activities increase as the age of the youngest child increases, and those with no children work longer hours than those with children of any age. Male physicians, on the

other hand, tend to work fewer hours if they have no children at home.

Just over half (51%) of Canadian physicians have 1 or more children under age 18 at home, and for 19% of them the youngest child is under age 6. Female physicians spend an average of 42.2 hours/week with primary responsibility for their children, almost triple the time reported by male physicians (15 hours/week). For women, the age of their youngest child has an impact on hours of primary responsibility for children, ranging from 46.6 hours/week for those whose youngest child is under 6 to 36.6 hours for those whose youngest child is aged 12 to 17. The number of hours per week that male physicians have primary responsibility for their children is only very slightly related to the age of the youngest child at home (15.5 hours when the youngest child is under 6 and 14.6 hours when the youngest child is 12 to 17).

Male physicians also report spending less time on household maintenance, both indoor and outdoor, than female physicians (8 hours/week vs. 12.2 hours). — *Shelley Martin*, Senior Analyst, CMA Research, Policy and Planning Directorate

Hours per week spent on professional activities, by sex and age of youngest child at home

