eCMAJ's top 10 — May

For the second month in a row, papers dealing with SARS attracted the most interest from *eCMAT* readers, accounting for 7 of the top 10 articles.

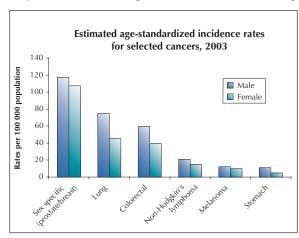
- Ribavirin in the treatment of SARS: A new trick for an old drug? 16 558 hits
- 2. SARS: prudence, not panic 11 026
- 3. Identification and containment of an outbreak of SARS in a community hospital 7435
- **4.** The immediate psychological and occupational impact of the 2003 SARS outbreak in a teaching hospital 7353
- **5.** SARS update 5647
- **6.** Containing a new infection with new technology: a Web-based response to SARS 5086
- 7. 2002 clinical practice guidelines for the diagnosis and management of osteoporosis in Canada 4788
- 8. Peanut allergy: an overview 4262
- 9. The race to outpace severe acute respiratory syndrome (SARS) 3932
- **10.** Drugs in the news: an analysis of Canadian newspaper coverage of new prescription drugs 3423

PULSE

Gap in male-female cancer deaths narrows

The Canadian Cancer Society says 139 900 new cases of cancer will be diagnosed in Canada in 2003, and 67 400 people will die from the disease. Males will account for approximately 51% of new cases and 53% of the deaths.

Lung cancer alone is expected to cause 30% of cancer deaths in males this year (10 900), and 25% in females (7900). Breast cancer will kill 5300 women, while prostate cancer will claim 4200 men. For all cancers, the age-standardized mortality rate among men peaked in 1988 at 254.7 cases per 100 000 population, but it has now decreased to an expected rate of 223.7 cases per 100 000 in 2003. The age-standardized incidence rate increased slightly for males each year in the early 1990s, but then began to decline. In 2003, the age-standardized incidence



rate is expected to be 439.2 per 100 000 for men, compared with 494.0 per 100 000 in 1993. For women, the incidence rate has risen from 330.0 cases per 100 000 in 1989 to an expected 347.9 in 2003. However, the mortality rate for females has declined since then, from 153.1 to an expected rate of 150.5 in 2003. — Tara S. Chauhan, CMA

Suit launched over death following ER closure in Quebec

When Claude Dufresne died of a heart attack in June 2002 after an ambulance was turned away from a Shawinigan, Que., hospital 300 metres from his home, it caused a storm throughout the province. And it isn't over yet.

This spring, Dufresne's family filed a lawsuit against the Centre hospitalier du Centre-de-la-Mauricie and the physician who was staffing the emergency department June 20, 2002. The ambulance carrying Dufresne, 51, was redirected to a hospital in Trois-Rivières, about 30 minutes away, because the local emergency department had closed at midnight. Dufresne died en route.

A statement released by the Dufresne family's lawyer, Jean-Pierre Ménard, said hospital officials had misled the public by blaming the situation on a physician shortage. The hospital "simply passed on the responsibility to the government," the statement said. It also noted that the legal action is being launched to prevent further emergency department (ED) closures.

"We never imagined that an emergency room would refuse a cardiac arrest case," Ménard told *CMAJ*. He said a physician was still present in the ED when Dufresne was stricken, and under Quebec law hospitals can refuse to offer emergency care only if they are battling an epidemic.

Neither André Trottier, the interim director general at the Shawinigan hospital, nor the physician involved will comment on the case. However, many colleagues have rallied to the doctor's defence — 35 physicians from the hospital have signed a letter of support.

The controversy brought under scrutiny the recurring challenge of staffing the province's hospitals, especially during the summer holiday period.

In the wake of Dufresne's death, the Quebec government passed Bill 114, temporary legislation designed to ensure that EDs remain open around the clock. The Shawinigan ED has been open at all times since (see *CMAJ* 2002;167[5]:530;167[6]:617;167[8]:908).

- Brenda Branswell, Montreal