

Banner says that about half of the international medical graduates who found positions, and 31% of the Canadian graduates, will pursue residencies in family practice. Last year, 29% of Canadian medical school graduates made that choice. The percentage has consistently hovered around 30% in recent years. The numbers for specialties were not available as of *CMAJ*'s press deadline but apparently are also consistent with previous years.

"The match is pretty predictable for Canadians," Banner said, adding that the picture is improving for international graduates. "One of the things we can all be comfortable with is that the

commitment to ensuring there are positions for international medical graduates in our system is stabilizing."

Overall, the number of available residencies was the highest ever. On July 1, 2008, 2478 medical school graduates will begin post-graduate training, breaking the previous record of 2337, set last year. The 353 placements from foreign medical schools eclipsed last year's record of 298.

"Each of the provinces has made a firm commitment to funding positions for international graduates," Banner said.

Canadian medical school applicants to the 2008 match tallied 2134, of which 96% found positions. Of those,

about 87% were accepted into 1 of their top-3 choices of residency programs with respect to location and discipline. A total of 1299 internationally trained medical school graduates applied for residencies. Of those matched, about 23% were accepted into 1 of their top-3 program choices.

Of the 121 remaining residency positions, most are in family medicine, Banner said. "Forty percent of our positions were in family medicine, so, naturally, the bulk of our positions that went unfilled were in family medicine."

— Roger Collier, *CMAJ*

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DISPATCH FROM THE MEDICAL FRONT

More casualties in Vietnam

Forty-two years after United States marines first landed on its beaches, there are signs of increasing economic prosperity in Da Nang, Vietnam. Behind the rows of brightly coloured fishing boats stand advertisements for banks and electronics companies. Bamboo scaffolding surrounds the shells of new high-rise office towers on the banks of the Han River. Road traffic is increasingly motorized, with streams of motorcycles and their helmetless drivers weaving constantly on the streets.

Accompanying that road traffic, though, are an increasing number of deaths and injuries.

Among the physicians in Da Nang most acutely aware of the burdens associated with these injuries, including the social consequences and emotional impact on families, are neurosurgeons at the Da Nang Hospital, the city's 950-bed tertiary-level public hospital.

After spending a month working as a resident on the neurosurgical service, the magnitude of the problem of road traffic-related neurotrauma became clear to me as well. The neurosurgical unit at the hospital has 102 beds but typically twice as many patients, most with brain injuries related to road traffic incidents.

The victims were of all ages: a 4-



Karim Mukhida

Major intersections in Da Nang, Vietnam, often resemble the start of motocross.

month-old girl who fell off her mother's lap and onto the road when the motorcycle on which they were traveling was clipped by a taxi; a 26-year-old man who had consumed too much alcohol to celebrate a Vietnam victory in the Asian Cup and crashed his motorcycle while riding home; a 67-year-old man who was hit by a motorcycle as he was crossing the street.

It was common for 2 to 5 neurosurgical procedures to be performed daily for the evacuation of subdural or epidural hematomas, decompression of cerebral contusions or treatment of skull fractures related to road traffic incidents.

Space in the trauma operating rooms on the ground floor close to the emergency department was at a premium. I was actually surprised to hear a baby crying as we were evacuating an

epidural hematoma and turned to see that another patient had been wheeled into the room on a stretcher to have a cesarean section performed.

It's projected that it will take 35 years before low-income countries like Vietnam see a decline in the incidence of road traffic fatalities to the level now seen in developed nations. That is too long to wait. — Karim Mukhida MD, Toronto, Ont.

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CMAJ invites contributions to Dispatches from the medical front, in which physicians and other health care providers offer eyewitness glimpses of medical frontiers, whether defined by location or intervention. Submissions, which must run a maximum 400 words, should be forwarded to: wayne.kondro@cma.ca