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Editor's preface

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that remain fundamental to excellence in medical practice.

In 1946 Canadian surgeon Arthur Vineberg proposed a surgical approach to the treatment of coronary artery disease.² Coronary artery bypass grafting (CABG) is now common. Jack Tu and Keyi Wu report trends in death rates after CABG for almost 70 000 Ontario patients treated between 1981/82 and 1995/96 (page 221). Although the rate of CABG increased over this period, postsurgical rates of death fell — a remarkable achievement. Tu and Wu suggest that surgical "report cards" listing operative death rates by hospital may have contributed to the greater relative rate of decline in recent years. Paul Armstrong doubts that this is the case (page 237). Citing experience in the US, he argues that the declining death rates associated with CABG in Ontario are probably attributable to many factors including, perhaps, a Hawthorne effect.

Few would contend, however, that we should not monitor the results of medical interventions. John Crocker and colleagues report that a review of the pediatric kidney transplantation program for Atlantic Canada, begun in 1990, showed that graft survival had been less than 50% between 1971 and 1992 (page 229). The review led to the creation of a specific program for children and changes in donor selection criteria, immunosuppression protocols and postsurgical monitoring. The results were dramatic: in the period between 1993 and 1997, only 2 grafts (9%) failed.

References

1. Miettinen O. Evidence in medicine: invited commentary. *CMAJ* 1998;158(2):215-21.
2. Vineberg AM. Development of an anastomosis between the coronary vessels and a transplanted internal mammary artery. *CMAJ* 1946;55:117-9.