



## The smoking-cessation movement moves to the bedside

There's nothing like using a captive audience to try out a new product. And that's one reason why some bed-bound smokers at 3 hospitals in Cambridge and Kitchener, Ont., are being given a chance to rid themselves of the addiction that may have helped land them in hospital in the first place.

Patricia Smith, a professor of health studies and gerontology at the nearby University of Waterloo, is enthusiastic about this opportunity to give heavy-duty smokers another chance to overpower their addiction. "Since smokers are more likely to be hospitalized than nonsmokers, we are taking the program to where we know the smokers are," she says.

Half the patients recruited for her randomized clinical trial will receive the test protocol, while the other half will receive care from their physicians. Physicians play a relatively low-key role in the program, which is funded by a \$400 000 grant from the National Cancer Institute of Canada.



Primary care physicians are being asked to give their patients a "1-minute unequivocal message to stop smoking," Smith says. "The idea is that it reduces the burdens on physicians to counsel."

A push is under way in both Canada and the US to have physicians counsel their patients on smoking cessation. But physicians don't get paid to provide this advice and they usually don't have adequate time to do it, Smith says. "Speed is of the essence when you are trying to get people through

the system and get them taken care of."

Smith also says doctors don't want to agitate patients. "If somebody comes in for a broken toe, they don't want to talk to them about smoking cessation because it might upset their patients."

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## Canadians travelled "Viagra Highway" after drug's release delayed

Sildenafil (Viagra) will be available in Canada early next month. Its release was delayed for at least 5 months because of understaffing and the need to examine 170 reported deaths connected with the anti-impotence medication, Health Canada says.

The drug was initially expected to be available in Canada by late November. It has been sold in the US since April 1998, and it quickly became that country's best-selling prescription drug ever — 7 million prescriptions were written by mid-December. To date sildenafil has been approved for use in more than 50 countries.

Dr. Andre-Marie Leroux, medical officer at the Health Protection Branch, said the branch is examining

cases of adverse drug reactions involving about 170 sildenafil-related deaths reported by the drug's manufacturer, Pfizer, by the end of August 1998. Most of these men had cardiac conditions and were using nitrate or nitrate derivatives. Advertisements and the drug's label clearly state that sildenafil should not be used by men who are taking nitrates in any form, including nitroglycerin.

Leroux said approval is also being delayed because of a shortage of staff in Health Canada's chemistry and manufacturing group, which is also reviewing sildenafil. Although he couldn't attach a precise number to the shortfall, he pointed out that Canada receives the same number of

drug submissions as the US Food and Drug Administration but has a fraction of the staff. "The FDA has 8 times as many people," he said.

Another reason for the delay is that sildenafil was considered a priority drug in the US, but in Canada the high priority is assigned to drugs used to treat cancer, AIDS and other life-threatening diseases.

"People are frustrated when drugs are approved in the US but not available in Canada, but certain drugs just go through later," Leroux explained. A road connecting Canada with upper New York State has already been dubbed the "Viagra Highway" because of the number of Canadians crossing the border to buy the drug.



## Too many handicapped-parking permits, too few parking spots?

A new type of road rage may be developing because of the growing number of drivers vying for parking spots reserved for handicapped Canadians.

The problem has arisen because the number of people applying for permits to park in these spots is rising astronomically. In Nova Scotia, for example, the number of permits issued rose from 530 to almost 6200 between 1985 and 1998. The huge increase is probably attributable to an aging population and increased public awareness of designated parking spots. However, there is growing concern that the permits are becoming too easy to obtain. In Nova Scotia, there have been calls for the De-

partment of Highways to appoint a limited number of physicians to sign the official application forms needed to get a handicapped-parking sticker. At the moment, family physicians usually have to deal with them.

Dr. Bob Mullan, president of the Medical Society of Nova Scotia, says physicians have little control when patients present the application forms. He said doctors simply rely on the patient's history and their own perception of the patient's disability. He insists that none of his colleagues would knowingly sign a form for an able-bodied person.

Spokespeople for groups representing disabled Canadians do not dispute this, but say physicians should take more time to study and review applications. They say they should also stipulate if a parking permit is required only temporarily.

There are no easy answers, but physicians can provide a partial solution by treating these applications with the same vigilance they apply to other important medical documents. — © *Dorothy Grant*, former Coordinator, Patient Affairs, Medical Society of Nova Scotia



## Former CMAJ editor dies

Dr. Andrew Sherrington, a well-known medical editor who served stints at *CMAJ*, the *Lancet* and the *Canadian Journal of Public Health*, died at his Ottawa home Feb. 2, 1998. He was 70. At the time of his death he was working as a freelance medical writer, editor and translator.

Born in England, Sherrington graduated from Oxford University Medical School in 1959 and spent a year as a translator at the World Health Organization's regional Euro-

pean bureau. (A life-long lover of languages, he was fluent in English, French, Danish, Russian, German and Spanish.) He then spent 2 years as a junior associate editor at the *Lancet*.

He arrived in Canada in the late 1960s at the invitation of Canada's minister of health, who put him in charge of the department's scientific information division; he served there in various capacities until 1980, and also spent about 6 years as part-time editor of the *Canadian Journal of Public Health*. In 1980 he was named

## Quitting smoking

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Instead, this program uses specially trained nurses to provide patients with information, including reading materials and audio tapes. They also use counselling to prepare patients for situations when their willpower will be tested, and provide follow-up services. Once the patient is discharged from hospital, the nurses will make twice-weekly, and then weekly, follow-up phone calls for 2 months.

The study, which has already been conducted at Stanford University School of Medicine in California, began in Ontario Nov. 1, 1998. (California has the lowest smoking rate in North America, in part because of the state government's aggressive antitobacco campaigns. Only 19% of Californians smoke, compared with 31% of Ontarians.) "At Stanford we had a success rate of up to 70% among people who previously had a heart attack," says Smith. People who have had heart attacks have the highest quit rates among smokers.

"We will simply offer patients an opportunity to stop smoking. For some patients, this invitation could prove to be one of those life events that has a profound and beneficial impact." — © *Ken Kilpatrick*

scientific editor at *CMAJ*; after 2 years at that post he became director of publications at the Medical Research Council of Canada, where he remained until 1993.

Ann Bolster, the CMA's associate director for online and information services, remembers Sherrington as an inveterate globetrotter. When she saw him shortly before Christmas, he showed her a book he had recently translated and discussed his plans for a new career as a medical correspondent for a British newsmagazine. He left no survivors.