

UK's reliance on foreign health workers increasing

The British government has announced a £3.4-billion program to train 8000 more nurses, midwives and other health professionals, to encourage those who have left the field to return, and to promote careers in the National Health Service (NHS).

The program includes an advertising campaign with the slogan "Join the team and make a difference." One commercial features a smiling young woman who had recovered from serious craniofacial injuries incurred in an accident. She lists the different NHS personnel who "helped put a smile back on Jenny's face." The NHS has

undertaken similar campaigns in the past, but the new funding represents a 12% increase over previous budgets. Health minister John Hutton said that annual funding for new NHS training would increase to £4.1 billion by 2005.

The British Medical Association and the Royal College of Nursing welcomed the announcement but warned that pay and working conditions have to improve if the NHS hopes to retain more staff. The college recently released a report stating that there are now more than 42 000 foreign nurses

registered in the UK — over twice as many as in 1999. The report, *Here to Stay*, examined one NHS trust in London where nurses from 68 countries (including Canada) are now employed.

The report said that overseas recruitment of nurses is no longer viewed as a stop-gap measure by the NHS.

"It is no exaggeration to state that some health care organizations, particularly in the independent sector, would cease to function without their international nurses," the report said. "Many more, including NHS trusts, could not function effectively without their international recruits." — *Mary Helen Spooner*, West Sussex, UK



FDA's approval of anesthetic challenged following deaths

A Canadian researcher has questioned the US decision to approve use of the injectable anesthetic rapacuronium (Raplon), a neuromuscular blocking agent used as a muscle relaxant during breathing tube placement in surgery. It was voluntarily withdrawn from the market after 5 deaths related to bronchospasm. Although approved for use in the US by the Food and Drug Administration (FDA), rapacuronium was never available in Canada.

In a letter to *Anesthesia & Analgesia*, (2003;96:631-2), Dr. Robyn Lim of Health Canada's Therapeutic Products Directorate said evidence that rapacuronium caused excessive bronchospasm was available before the drug was approved. Those data indicate that it occurred in 4% of cases; the comparable incidence for succinylcholine was 2.1%.

"This assessment should establish that the benefits outweigh the risks ... before the drug is approved."

Despite raising this question, the letter is "by no means a criticism of the FDA," says Health Canada spokesman Emmanuel Chabot. "It was the initiative of one scientist."

The FDA says the incidence of bronchospasm at the time of approval "did seem to be safe." Dr. Nancy Chang, the FDA's medical team leader in anesthesiology, says bronchospasm is a "known event in the perioperative setting for many reasons, drug and nondrug." Asthmatic patients, for instance, can have an incidence of 45%. She says a difference of several percentage points "is not unusual."

The head of Health Canada's Therapeutic Products Directorate, Dr. Robert Peterson, says the point of Lim's letter is that "one shouldn't overlook that premarket assessment is the most effective tool in preventing these situations."

Lim's letter followed an editorial (*Anesth Analg* 2002;94:483-4) about a postmarket study of rapacuronium. It has been pulled from the market worldwide. — *Barbara Sibbald*, CMAJ

Twenty percent of population, 80% of care

Waiting times and access to care for patients who make heavy use of the health care system is markedly poorer in Canada than in 4 other Western countries, a new survey indicates.

The survey, conducted by the Commonwealth Fund and Harvard University, found that 24% of Canadian patients reported it was very difficult to see a specialist, primarily because of long waiting times (86%). In Australia and Britain, 17% of patients reported similar difficulties; the US (15%) and New Zealand (12%) had the fewest complaints.

"This is clearly a problem in Canada," Dr. Robert Blendon said of the survey results, published in the May/June issue of *Health Affairs*.

The survey of 3844 "sicker" adult patients in 5 countries, including 750 in Canada, also revealed high rates of medical error and barriers to accessing care.

These "sicker patients," who routinely see 5 or more physicians, account for only 20% of patients but consume about 80% of all care.

Findings were common among all countries surveyed, said Blendon. "The issue of how well these people are managed is clearly a problem," he said. "The systems are not integrated."

— *Barbara Sibbald*, CMAJ