

## Manitoba tightens pharmacare reimbursements

Manitoba has tightened its regulations on Pharmacare reimbursement for prescription medicines. The drug-insurance program now reimburses up to a maximum of only 100 days' supply of a drug in a 90-day period; the balance of any quantity in excess of that limit is now the responsibility of the patient. The step was taken to stop "the growing practice of prescriptions being filled for excessive periods ranging from 365 days to as much as 2 or 3 years," Health Minister Jim McCrae said.

# Anesthetists given something to chew on

A recent letter to the *Canadian Jour-nal of Anaesthesia* warned physicians about the dangers posed when patients chew gum prior to surgery.

The letter recounted a procedure in which preoxygenation had commenced. Just before anesthetic induction with thiopentone, the 81-yearold female patient asked: "Is it time for me to take my chewing gum out?" A 2-cm wad of gum was removed, much to the surprise of the preoperative staff and anesthetists, who had noted nothing strange about her speech and witnessed no chewing. Had it not been removed, said the anesthetists, "a potentially fatal airway obstruction could have ensued." Patients are already advised to refrain from chewing gum before anesthesia because it might increase acid secretion and gastric volume, and cause obstruction.

# Mental illness "at bottom too long"

Cuts in the number of psychiatric inpatient beds continue to compromise seriously the effective treatment of patients with acute and chronic mental illness, the past president of the Canadian Psychiatric Association (CPA) charges. Speaking at the CPA's recent annual meeting, Dr. Diane Watson said "care and treatment of persons with mental illness has been at the bottom of Canada's health care agenda for too long." The situation is made worse by a lack of leadership in addressing the stigma that surrounds mental illness, which affects 1 in 5 Canadians. Watson said there should be no further hospital cutbacks until appropriate alternative community services are in place.

### Insulin too costly in some areas

Seventy-five years after the discovery of insulin the drug remains unavailable or unaffordable in many parts of the world, the World Health Organi-

### "Memo" casts light on malaise affecting Ontario hospitals

Just how low can morale go at Ontario's hospitals? A fake "intradepartmental memorandum" that has been making the rounds at Ottawa hospitals provides some indication. Its subject is "new cost-cutting measures."

"Effective immediately, this hospital will no longer provide security," it begins. "Each charge nurse/technologist will be issued a .38-calibre revolver and 12 rounds of ammunition. Additional rounds will be stored

in the pharmacy." It adds that in addition to their routine duties, nurses and technologists will take turns patrolling the hospital grounds and the ICU will take over responsibility for security surveillance because of its experience watching cardiac monitors.

There is bad news for patients as well, because food service will be discontinued. "Patients wishing to be fed should inform their family, or make arrangements with Subway, Domino's Pizza, etc. before meal times." Coin-operated phones in each patient's room will make this possible.

The memo goes on to tell physicians that they can order no more than two x-rays per patient per stay. "This is



due to the turn-around time required by the photo labs. Two prints will be provided for the price of one, and physicians are being advised to clip coupons from the Sunday paper if they want extra sets."

Administrators are now responsible for groundskeeping duties. "If an administrator cannot be reached by calling his/her office," says the memo, "it is suggested that you go outside and listen for the sound of a lawn

mower, Weed Whacker or snow blower."

The hospital is also starting a recycling program to collect unused fruit and bread. "The resulting mouldy compost will be utilized by the pharmacy for nosocomial production of antibiotics. These will also be available for purchase through the hospital pharmacy and will, coincidentally, soon be the only antibiotics listed on the Ministry of Health formulary."

The black humour is a sign of the malaise affecting Ontario's hospitals because of a rash of funding cutbacks and closures. In Ottawa, workers currently are waiting for the axe to fall on one or more of the city's acute-care hospitals.



zation (WHO) reported as it marked the drug's anniversary in November. About 120 million people have diabetes today, but WHO predicts an aging world population, unhealthy diets, obesity and a sedentary lifestyle will drive the number of diabetic patients to 250 million by 2025.

WHO considers insulin an essential drug but says its cost varies widely. The lowest mean cost of a vial of insulin is in the Middle East (US\$2.70) and Southeast Asia (US\$2.80); South and Central America are in the middle range (\$12.20) and in some parts of Africa a single vial can cost \$22, the equivalent of a month's salary.

### Physicians target media violence

Before graduating from high school, says the American Medical Association (AMA), the average American child will have witnessed 8000 murders and 200 000 acts of violence on television. Now the AMA wants physicians to make media violence a counselling topic with young people and their parents.

As part of a new antiviolence initiative, the AMA recently published a *Physician Guide to Media Violence*, a 21-page booklet offering suggestions for taking a patient's "media history" as well as tips on how to monitor media viewing. The AMA said physicians have a unique opportunity and obligation to educate parents because "people who are victims of violence would rather tell their physician than any other person." Last year the AMA issued a national violence "report card"; it gave the media a D+.

# Medical curriculum will include addiction, abuse

Five Ontario medical schools are integrating substance-abuse issues into their undergraduate curricula. With the assistance of the Lawson Foundation, the Addiction Research Foundation and the Max Bell Foundation, McMaster and Queen's universities and the universities of Ottawa, Toronto and Western Ontario are establishing a 5-year, \$650 000 initiative called CREATE (Curriculum Renewal and Evaluation of Addiction Training and Education).

Medical schools have traditionally

taught little about addiction and substance abuse, even though they are among the leading problems facing today's doctors personally and professionally, said the University of Ottawa. Its undergraduate course on addiction will be complemented by a physician-in-training health program to help students cope with the stress of medical education.

#### Research Update • Mise à jour de la recherche

### Banking on umbilical-cord blood

Canadian physicians now have a precious supply of stem cells to draw upon for treating cancer or working to solve genetic puzzles.

This fall, University of Alberta Hospitals and the Canadian Red Cross opened the country's first umbilical-cord blood (UCB) bank, where cells capable of kick-starting the blood and immune systems of patients who have received aggressive chemotherapy or radiation therapy are cryogenically stored. Dr. John Akabutu, a pediatric hematologist and oncologist, is overseeing the project. He says UCB contains stem cells and progenitor cells, which can help patients recover from the damage caused by potent anticancer treatments. He says UCB transplants may eventually replace bone-marrow transplants. The use of UCB is becoming more popular because it is easier to find a UCB match than a bone-marrow transplant match, and graft-versus-host disease is unlikely.

Other uses for UCB include genetic therapies in which stem cells are trained to fight off viral infections before being transplanted into a host. Akabutu says technology that makes the use of UCB possible also raises new ethical questions for physicians. No one knows what to do if screening tests involving UCB donations uncover a genetic condition, such as Huntington disease, in the donor. Should physicians tell the parents of the newborn whose blood was saved? Such questions may be difficult to answer. — *R. Cairney* 

