



CMA sets rules for sale of prescribing data

Nine months after becoming aware of the issue, the CMA has approved a statement of principles governing the sale of prescribing data. The issue arose last spring after the Ontario Medical Association learned that IMS Canada, a health-information company based in Montreal, had been purchasing pharmacy databases to develop prescriber profiles, which were then sold to drug companies.

At its December meeting the Board of Directors approved a 4-page statement that says physicians must be informed and give their consent for the compilation or sale of any prescribing data identifying them. As well, anonymity and confidentiality must be maintained for both physicians and patients, and physicians must be given the names of anyone who has been sold or given access to information about them. The next step will be dissemination of the policy to provincial privacy commissioners and bodies such as the National Association of Pharmacy Registrars.

The sale of prescription information angers many physicians. Dr. Michael Wyman, an OMA representative, told the board he refuses to see drug company representatives in his office “unless they come with a letter saying their company does not buy this data.”

Breach of confidentiality angers Ontario MDs

The December release of a physician's confidential billing information by an aide to the Ontario health minister sparked outrage among Ontario physicians already embroiled in a bitter dispute with the

province. The aide resigned over the incident and Health Minister Jim Wilson chose to “temporarily step aside” after the OMA demanded — and got — an independent investigation into what it called the profound lack of security for Ontario Health Insurance Plan (OHIP) patient and physician records. Wilson's resignation appeared to have a positive impact — less than 2 weeks later, the OMA announced that it had reached a tentative interim agreement with the province.

At issue in the confidentiality dispute was the release of information that Dr. William Hughes, a Peterborough cardiologist, is the province's highest OHIP biller. The OMA considers the information misleading because Hughes, vice-chair of the Specialist Coalition of Ontario, is one of only 3 cardiologists serving 300 000 people in a

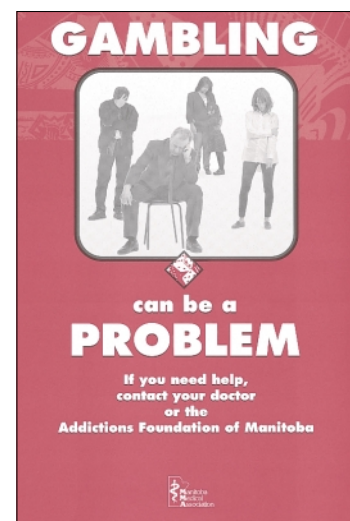
popular retirement area with an above-average number of elderly residents. Although he is exempt from provincial billing thresholds because he practises in an underserved area, Hughes has been active in the specialist coalition's dispute with the provincial government in order to call attention to underfinancing of the health care system.

Truer words were never written

“A custome loathsome to the eye, hatefull to the nose, harmefull to the braine, dangerous to the lungs, and in the blacke stinking fume thereof, neerer resembling the horrible Stigian smoake of the pit that is bottomlesse.” Thus spoke one of the world's first antitobacco advocates, King James VI of Scotland — later James I of England. James and

Manitoba MDs issue problem-gambling warning

Manitoba physicians want to help patients who need treatment and support for gambling problems. The MMA's Public Health Issues Committee recently developed an information package that includes a policy statement and office poster for physicians, and a pamphlet on gambling addiction for patients. The MMA says physicians can advocate low-risk behaviour, such as gambling with a predetermined loss limit and gambling with an acquaintance present. They can also encourage research on gambling's social and economic impact. Lotteries and scratch tickets are the most common gambling activities in Manitoba, where 4.3% of adult residents are considered problem gamblers. However,



two-thirds of callers to a provincial helpline identified video lottery terminals as their nemesis.



his *Counterblaste to Tobacco* were recently featured in the *Annals* of the Royal College of Physicians and Surgeons in an article by Dr. Watson Buchanan, professor emeritus at McMaster University's Faculty of Health Sciences.

Buchanan wrote that King James "waxes eloquently on the 'great iniquitie, and against all humanitie' of secondary smoke: 'the husband shall not be ashamed, to reduce therby his delicate, wholesom and cleane complexioned wife, to that extremity, that either she must also corrupt her sweet breath therwith, or else resolve to live in perpetual stinking torment.'" The effect of peer pressure, which applies to modern teenagers, didn't escape his notice either: " 'divers men very sound both in judgement and complexion' take up the habit 'because they were ashamed to seem singular.'" "

Frequent-visitor status for 13% of Canadians

Even though 62% of Canadians rated their health as excellent or very good, about 77% of adults visited a physician in 1994 and 13% of the population visited a physician 10 or more times, according to data from the 1994 National Population Health Survey. *Canadian Social Trends*, a quarterly publication from Statistics Canada, reported recently that the number of Canadians who consulted a physician during 1994 varied by province, ranging from 82% of Prince Edward Islanders to 70% of Quebecers. A regional variation also held true for Canadians visiting physicians 10 or more times in a year; the highest rate was in Nova Scotia (18%) and the lowest in Quebec (9%).

People who said they had 1 or more chronic conditions (the most

common being allergies, back problems, arthritis and rheumatism) reported an average of 6 consultations with a physician in the previous year, compared with 3 for those who were not experiencing chronic health problems. The survey found that 77% of Canadians aged 15 and older reported using at least 1 prescription or over-the-counter drug, and 15% of adults had used some form of alternative medicine, the most common being chiropractic (11%).

Necessity the mother of invention

An American registered nurse has developed a topical solution that makes medical tape removal less unpleasant for both patients and health care professionals who do the dirty work. *Tape Away* "protects against trauma due to tape tearing and 'burning' skin, in turn guarding against serious infections and other complications," says a release from the Invention Submission Corporation of Pittsburgh. The product, which comes in a pump-spray bottle, is touted for use when intravenous devices or electrodes are being removed.

Hewett named president, CEO of MD Management

Rob Hewett, a director of MD Funds Management and MD Management Ltd., will be MD Management's next president and chief executive officer. He will take over as head of the CMA's wholly owned financial subsidiary on Feb. 1, 1997. He replaces Roland Breton, who is retiring.

In announcing the appointment, CMA secretary general Dr. Léo-Paul Landry said Hewett has extensive experience in the financial-services industry, having held senior positions in trust, insurance, investment-management and leasing organizations. Landry said he brings "a good understanding of the organization and its

More Canadian MDs head south for training

Between 1992 and 1995 there was a 34% increase in the number of graduates from Canadian medical schools taking postgraduate training in the US, according to a report in the Association of Canadian Medical Colleges *Forum*.

The increase was most evident among trainees from Ontario. In 1992 only 89 Ontario medical graduates registered in US training programs; by 1995 that had increased to 165 physicians, an 85% increase. Lesser but significant increases were also reported for medical graduates from BC (71%) and Alberta (63%).

Other highlights of the *Forum* report, which was prepared by

the Canadian Post-MD Education Registry, include:

- The most popular US training program was general internal medicine; in 1995 it attracted 114 Canadian graduates, a 68% increase from 1992.
- The number of Canadian trainees rose in several specialty fields, including family medicine, anesthesia, diagnostic radiology, psychiatry and general surgery.
- There were 580 Canadian graduates enrolled in US training programs in 1995, compared with 431 in 1992.
- The number of graduates seeking the J-1 visa from the US rose from 170 in 1992 to 262 in 1995.

