



Avoid proliferation, keep CPGs current, workshop told

Clinical practice guidelines (CPGs) have a key role to play in Canada's health care system, but a workshop on the implementation of guidelines has been told that attempts must be made not only to keep CPGs current but also to keep them from proliferating. The 2-day workshop was part of the National Partnership for Quality in Health, which was established by the CMA in 1991 to coordinate and facilitate the CPG process in Canada. The workshop was designed to share information, develop a handbook on the implementation of CPGs and encourage networking among people involved in the CPG process.

Common themes such as the need for effective coordination among

CPG developers emerged during the meeting. Participants also concluded that consumers have an important role to play in the implementation of CPGs, and that computer technology and the Internet are important tools for disseminating information about them. Because of Canada's current emphasis on getting its financial house in order, participants recognized that demonstrating the cost-effectiveness of CPGs will play a key role in encouraging their implementation.

Further information about guidelines is available from the CMA's CPG Infobase (www.cma.ca/cpgs [English] or www.cma.ca/cpgs/index_f.htm [French]), which has a wealth of information, including many full-text CPGs. It is made possible in part by unrestricted education grants from Astra Pharma Inc. and Merck Frosst Canada Inc.

It's between me and my doctor

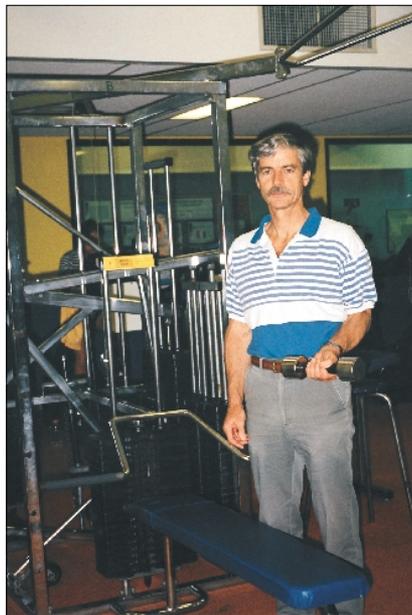
A poll suggests that an overwhelming majority of Canadians want access to their medical records limited to themselves and their physicians. The Angus Reid poll, conducted in April for the accounting firm Ernst & Young, found that 97% of those asked felt they should have access to their own records and 95% believed their doctors should also have access. Beyond that, however, respondents are very concerned about who sees their personal health information.

Of the 1500 Canadians polled, 56% felt pharmacists should have access to their records. That figure dropped to 51% for community-based health care providers and 42% for medical researchers. At the bottom end of the scale, 38% felt insur-

Might weight training help older women?

Older women are beginning to enter the traditional male domain of the weight room. A recent study conducted at the University of British Columbia's (UBC) School of Human Kinetics explored strength and bone-mineral-density changes in 44 women aged 65. The subjects, medically screened by Dr. Jack Taunton, one of the project investigators, were randomly assigned to exercise and control groups.

The weight-training group worked out in the Human Kinetics Laboratory at UBC 3 times weekly for 3 months, with activities such as bench presses and exercises to strengthen their biceps. There was also an additional 9 months of exercise at community centres. Compli-



Dr. Alan Martin: new study planned

ance was encouraged through monthly lunch meetings and visits by a coordinator. After 1 year, upper-body strength had improved dramatically — by about 50% — in the group doing the exercise. Bone density improved modestly in the lumbar spine.

Dr. Alan Martin, a coinvestigator, says the findings are significant because of the improved functional capacity of the women who did the weight training. Most continued to train after the study ended and some have returned to former sporting activities.

Martin is now recruiting 70 women aged 75 for a similar study that will start this September. — Heather Kent