

In 1995 Quebec's minimum wage was \$6.85 per hour. A routine office visit is reimbursed the equivalent of less than 2.5 hours' wages, compared with almost 2 days' wages in the 1870s. The income ceiling for almost all physicians in Quebec is \$300 000. Someone working a 40-hour week at minimum wage would earn \$14 250 a year. Thus, physicians reaching the ceiling earn about 21 times as much as someone earning minimum wage.

It is difficult to compare the incomes of physicians and nonphysicians over the last 350 years, but it is interesting to note that Sarrazin earned 60 times the wage of the lowest-paid labourers, whereas his present-day counterparts earn a maximum that is only about 21 times that of someone employed at minimum wage. It is also worth remembering that, until early this century, there was no income tax.

Jack Cohen, MD Montreal, Que.

The population explosion revisited

r. Klaus D. Teichmann deserves credit for reminding us of "the population bomb" in his letter "Immunization and global ecology" (Can Med Assoc 7 1997;156:1698). Most of the world's ecologic problems are caused by increasing numbers of humans seeking an affluent lifestyle. Teichmann concludes by proposing that physicians consider themselves responsible for the consequences of the human population explosion in the same manner that scientists who researched the nuclear bomb should be considered responsible for the consequences of its use. He should reconsider.

The population has increased be-

cause of a relatively recent paucity of devastating wars and civil disorder, and because of better agriculture, transportation to move food to areas of need, water and sewage treatment, housing and medical intervention. The population explosion was well under way decades or centuries before the introduction of effective vaccines in the 1950s. Currently, some areas that have very high vaccination coverage (for example, Germany, Denmark and Quebec) have a fertility rate much below the replacement level. The reverse situation is also true in areas like sub-Saharan Africa. Overall, the outlook for restraining human population growth has brightened in the last 30 years, mostly because of countries that decided to provide birth control and education to women.

The responsibility to limit human fertility to replacement levels rests with politicians, not physicians. Individually and through our organizations we should encourage politicians to provide all women the means to limit their fertility and the motivation to do so — equal access to education and jobs.

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Remembering Jimmy Quayle

Your brief death notice for BC plastic surgeon Jimmy Quayle (Can Med Assoc J 1997;157:115) gave short shrift to a fine physician.

While at McGill University during World War II, he and 2 classmates were commissioned into the Royal Canadian Regiment (RCR). In December 1943 the regiment had 3 weeks of vicious fighting defending the Allied approach to Ortona, Italy, which later became known as Royal

Canadian Avenue. It was here that Captain Mitch Sterlin and Lieutenant Jimmy Quayle wrote themselves into the regimental annals because of their defence of "Sterlin Castle," a farmhouse of strategic importance. Their platoon, reduced to 6 men, battled all day to hold it before being forced to pull back.

Quayle's 2 classmates, Sterlin and Ian Wilson, were to die within months of one another. "I was destined to carry on," Quayle recalled, "but things were never the same after their deaths. A part of my youth vanished in wartime Italy."

By the time the war ended, Jimmy Quayle had been wounded 4 times — a regimental record — and was still only 21. He graduated from McGill in 1950 and may have decided to specialize in plastic surgery because of his war service. In 1957 he settled in New Westminster, becoming the first plastic surgeon in BC to practise outside Vancouver.

In 1995, when the Dutch marked the 50th anniversary of their liberation, Quayle returned to Holland, where the town of Apeldoorn still remembers the RCR. In 1945 a German V-1 rocket had been flying over the city as Quayle, by then a captain, was marching his company into town. It suddenly dove to earth a few hundred yards away. With the company sergeant major marching backward to keep a stern eye on the men, Jimmy Quayle led his troops through the smoke and dust of the explosion without breaking step. The incident, suitably embellished, soon entered regimental lore.

Today's physicians would do well to remember doctors like Jimmy Quayle with admiration and pride.

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