



CMA honours Manitoba medical pioneer Dr. Gordon Fahrni with bust

In March the CMA unveiled a bust commissioned to commemorate Dr. Gordon Fahrni's contributions to organized medicine. The Manitoba-born surgeon, who died at age 108 in 1995, graduated from the University of Manitoba in 1911, the same year *CMAJ* published its first issue. A strong proponent of organized medicine, Fahrni helped organize a campaign to save a debt-ridden and cash-strapped CMA in 1921. He later served the association as president in 1941, and was instrumental in establishing the Medical Procurement and Assignment Board to help the Royal Canadian Army Medical Corps balance medical services for servicemen abroad and civilians at home.

After his term as president ended he joined the army as a consulting surgeon, and promoted the value of early postoperative exercise and warned of the dangers and debilitating effects of prolonged bed rest.

An avid hunter, fisherman and golfer, Fahrni recognized the value of balancing business and pleasure, and said his longevity resulted from his active lifestyle.

The commemorative bust, created by Vancouver pediatrician Umberto Callegarini, will be displayed at CMA House in Ottawa; only Sir Charles Tupper and Sir Frederick Banting have received similar honours from the CMA. Fahrni was also honoured in 1991 when, on the 50th anniversary of his presidency, the



CMA Past President Athol Roberts (left) and current President Victor Dirnfeld unveil bust of Dr. Gordon Fahrni

CMA's historical-records section was named the Gordon S. Fahrni Archives. When he turned 100 in 1987 he was named the first-ever honorary president of the British Columbia Medical Association.

Newsflash: it's unhealthy to be poor

Montreal's director of public health says many citizens in Canada's third-largest city are literally sick of being poor. The city currently has an unemployment rate of almost 12% and nearly 25% of its families live below the poverty line.

The annual report from the Regional Council for Health and Social Services for the island of Montreal indicates that poor Montrealers can expect to live 5 fewer years than those with higher incomes. Other findings are not surprising: more low-income earners smoke, infant-mortality rates

are higher and the birthrate is 6 times higher among adolescents living in low-income parts of the city.

Although the link between health and wealth is already well documented, Dr. Richard Lessard, a community medicine specialist and director of the council, said this report is important because it highlights areas of the health and social-safety nets that need improvement. He added this is just the first in a series of annual reports that will focus on different public-health issues. "This will help us address challenges and take effective action," said Lessard.

In 1992, Quebec released a 10-year vision for the future of health and so-

cial services in the province, which specified 19 concrete goals within 5 specific areas. Areas selected for development were social adaptation, health, public-health protection, mental health and social integration. With less than 4 years to go in achieving the vision's goals, Lessard admits that achieving all the goals is unlikely. Still, he credits the government for at least coming up with a plan.

"The policy on health and welfare is both a position statement and a framework that sets out precise steps that must be taken," he said. "We are one of the rare Western societies that has such a valuable tool at its disposal." — *Steven Wharry*