



Vancouver surgeon Lynn Doyle addresses General Council

you really wait for 6 months, a year or a year-and-a-half before reinvesting the money needed to make our system work?"

Time is central to this debate. The CMA says the system needs help simply to survive in the interim while rigorous evidence on waiting lists is collected. (One of the projects is the CMA's own Access to Quality Health Care project [CMAJ 1998;159:213]). The CMA urged Rock to begin restoring a minimum of \$2.5 billion in cash each year for health care next April and to apportion a "health-specific" amount of cash transfers to the provinces and territories. The CMA also wants the total cash entitlement for health care to be indexed to account for population growth, aging, epidemiology, new technologies and economic growth.

The CMA used the meeting to release its latest public opinion poll, which shows that confidence in the health care system has reached an all-time low. It is part of a series of polls that have tracked responses over the last 3 years; the latest one indicates that 70% of respondents feel that spending cuts have had a negative impact on the quality of care, up from 50% in 1996.

"If the government is waiting until every single Canadian has lost confidence in our health care system before it does something about it, then I'd like to warn it that we are almost there," said Dirnfeld. "It is clear we have reached national consensus in this country that it is time for the federal government to reinvest in medicare."

Although many delegates took Rock to task for having failed to shore up funding, many also singled out Martin and Chrétien for blame, arguing that they were the decision-makers and Rock has had little success in prying more money from them. "I believe Mr. Rock to be a man of integrity and in his role as a minister he is dealing with a political system," said Calgary family physician Rowland Nichol. "That being said, he just didn't go far enough."

General Council responded to Rock's speech by passing a unanimous motion that "Canadians continue to suffer needlessly because of the ongoing and worsening underfunding of the medicare system due to the continued inaction of the federal government."

Originally the resolution targeted Jean Chrétien by name, but delegates voted to remove the prime minister's name by a margin of a single vote.

There but for the grace of God. . .

General Council has chosen Whitehorse family physician Allon Reddoch as CMA president just 3 weeks after he resigned as president-elect because he feared that a looming lawsuit would interfere with his presidency.

He had been named president-elect during the 1997 annual meeting in Victoria, and his decision to step down in August was unprecedented. However, General Council delegates attending the Sept. 6–9 annual meeting rallied behind the 49-year-old FP.

"I think most delegates recognize this as a real case of 'there but for the grace of God go I,' " explained one delegate.

Reddoch told delegates that the legal case involves the failure to repeat a complete history and physical examination on a 17-year-old girl who

had already been admitted to the Whitehorse General Hospital. "Even good doctors can be hit with legal actions and I believe I am a good doctor," Reddoch said. "I also believe in the wisdom of General Council."

Five other candidates sought election: Richmond, BC, internist Victor Dirnfeld, now the immediate past president, Winnipeg anesthetist Ian White, Ontario family physicians John Gray of Peterborough and Michael Wyman of North York, and Yellowknife family physician David Butcher. Reddoch was elected after the second ballot.

"I stood to run to represent rural and remote health care in Canada and to make sure those issues did not get pushed aside," said Butcher as he withdrew from the race. "I fully support his candidacy."