



Ontario joins prenatal HIV-screening movement

Ontario joined ranks with 7 other provinces and territories last month when it announced a program of universal prenatal HIV counselling and voluntary testing. The announcement was made on World AIDS Day, Dec. 1. However, some experts are concerned that the province has made little effort to inform doctors about the tests, which can be done only with a pregnant woman's informed consent.

"Doctors who have never really thought about HIV often know very little about it, and are uncomfortable — we've seen this a lot," says Dr. Susan King, a pediatrician and infectious disease specialist at Toronto's

Hospital for Sick Children. She thinks it will take obstetricians in some communities "quite a while to become comfortable" enough to discuss the tests with patients. An information package of brochures for patients and guidelines for doctors was not available when Health Minister Elizabeth Witmer announced the program.

British Columbia, the first province to act, launched its program in 1994, and King is pleased that Ontario has finally taken the same step. "We're still picking up kids who were infected as infants. We just had a 3-year-old referred to us. If we'd had a program in '95, that might have been prevented."

Ontario's standard prenatal laboratory test forms are being revised to include the HIV test and doctors will be required to tick a box indicating that pretest counselling was done. If a test is ordered, a second box specifying that informed consent was obtained must also be ticked.

The province expects that about 150 000 prenatal HIV tests — roughly equal to the number of expected births — will be performed annually at a cost of about \$775 000. Previously, only about 12% of pregnant women were tested for HIV in Ontario. King says the provincial

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BC's "heartsmart" walking paths first of many?

A 10-km route in West Vancouver is Canada's first "heartsmart" walking path, thanks to the new Hearts in Motion initiative launched by the Heart and Stroke Foundation of British Columbia and Yukon.



Dr. Brian O'Connor: a beautiful walk

Hearts in Motion is part of an international program called *Sli na Slainte* — "pathway to health" — that originated in Ireland in 1996 and now covers 200 km in that country. The program has since spread to about 10 countries, mostly in Europe. Denmark has established the most trails — 36 in less than 2 years. In Canada, Prince Edward Island is planning to open 6 routes, and the Heart and Stroke Foundation expects other provinces to follow. Existing community pathways are used to reduce costs. They are marked at 1-km intervals with the *Sli na Slainte* logo so walkers can track their progress.

On the West Vancouver route, which was developed with help from the Greater Vancouver Regional District and the District of West Vancouver, Heart and Stroke

Foundation kiosks at each end of the trail provide maps and cardiac health information.

Dr. Brian O'Connor, the foundation president and medical health officer for Vancouver's North Shore, hopes the trail markers will encourage people to get exercise on what he calls "one of the most beautiful walking routes in Canada." The scenery may well distract walkers from their sore feet. The 10-km walk begins in the forests and mountains of the Capilano River regional park and ends on the West Vancouver seawall with its expansive view.

The use of the pathways is already being evaluated in Ireland. In West Vancouver, the Angus Reid group is polling North Shore residents to determine the trail's success. — © Heather Kent



Aviation medical examiners rally for rights

Doctors should have a say in the medical standards set for pilots and air traffic controllers, some of Canada's 750 civil aviation medical examiners (CAMEs) say.

The new Canadian Aviation Regulation Advisory Council, established in 1997, consults with physicians in the course of setting standards but has no physician members. Instead, its members represent the balloonists' association, Canadian pilots, charter airlines and other groups. "There are rather vociferous lobby groups pounding the table saying what doctors should and should not do and I'm not happy about this," says Dr. Hugh O'Neill, director of civil aviation medicine for Transport Canada. "I'd like to see my profession represented."

Unfortunately, these specialized medical examiners have no national organization to push for such repre-

sentation, although several CMA board members who are also CAMEs recently asked the board for help. Quebec representative Dr. André Senikas hopes to form a "virtual" online organization representing CAMEs, and interested physicians can contact him at 450 348-1118. "We need a national organization with coast-to-coast standards and better training," says Senikas, who is also a commercial pilot.

Senikas and others are also concerned about a new, streamlined process that took effect Jan. 1, 1999. Previously, CAMEs forwarded examination results to the regional aviation medical officer, who decided whether a certificate should be issued. Now the regional officers are gone and CAMEs are solely responsible for certification decisions. There has been no increase in fees despite the added responsibility.

On average, says Senikas, doctors charge the employer or individual \$60 for the 1-hour medical.

Questions of liability for medical examiners in the event a plane crashes abroad were also raised recently, but have been resolved. "The CMPA will cover liability," says Senikas.

"If the CMPA abandons you, we will not," adds O'Neill. — *Barbara Sibbald*

HIV screening

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laboratory will not perform an HIV test, even if one has been requested, unless the counselling and informed-consent boxes have been ticked. Under those circumstances, the laboratory will contact the physician involved.

King says many doctors test patients using only initials, or false names, but when a test result is obtained it becomes part of the patient's medical record. Pregnant women are also supposed to be told that anonymous testing is available at 33 different sites in Ontario. "We will need to know if testing is happening, if it is being done in a reasonable way and if women are being made unduly anxious," says King, who noted that the province has not yet committed itself to such an evaluation.

Knowledge of a pregnant woman's HIV status is crucial. Research published in 1994 revealed that perinatal transmission of HIV can be reduced by two-thirds if pregnant women are treated with zidovudine. More recent research has indicated that treatment with protease inhibitors can reduce the risk of transmission almost completely. However, the long-term effects of that drug treatment on the fetus are not known. — © *Ann Silversides*

Cool sites

<http://www.cafeherpe.com>

Remember when people in single bars used to wear T-shirts that said "I don't have herpes"? Not so long ago, before the advent of AIDS, herpes was the most dreaded STD. Recently it has taken a bit of a back seat to its potentially fatal counterparts, but genital herpes is still around and is still making a lot of lives miserable. If you have patients with HSV-2, consider directing them to this Web site. Café Herpé takes a relaxed, almost humorous approach to the disease. Visitors start off in the Reading Lounge, where they can learn the basics about herpes and its pattern of presentation. Included is advice on how to inform your partner and prevent further infection. Next, visitors can go to the Buffet to gather more in-depth information on virology and the herpes family of viruses; this section features close-up photos of the disease in all its stages. And there's even a game, Virus Trap, in which contestants must correctly answer 16 multiple-choice questions on herpes. The Espresso Bar also has product information on famciclovir, which is not a surprise since the site is sponsored by SmithKline Beecham. Finally, on the Terrace, readers can find a list of links to third-party Web sites and support groups. If herpes can't be cured, at least the symptoms can be controlled. And until a definitive remedy is found, I'm hanging on to that T-shirt. — *Dr. Robert Patterson, robpaterson@email.msn.com*