

Study says overworked private-practice Quebec FPs must change way they practise

It's a bird. It's a plane. No, it's superdoc. A just-released study from the Fédération des médecins omnipraticiens du Québec says that changes to the province's health care system are creating superhuman expectations of overworked, isolated GPs in private practice. It's no surprise, says FMOQ President Rénaud Dutil, that FPs in private practice are becoming morose and discouraged.

They currently provide 80% of primary care in the province, and they are assuming more and more clinical responsibilities because of hospital closures and Quebec's new emphasis on outpatient care ("virage ambulatoire"). Yet there is little infrastructure in place to support these doctors.

"Patients are gravely ill, but nonetheless they are being cared for by doctors in private practice, many of whom are working solo," says Dutil. In addition, the fact that 558 Quebec FPs recently opted for early retirement has left thousands of patients without physicians and has increased the workload for the ones who are left. As well, young physicians now entering the field, many of whom are women, do not want to work the long hours of their predecessors.



FMOQ President Dr. Rénaud Dutil answers question during press conference

But those aren't the only areas of concern. Dr. Michel L'Heureux, the study author, says that with an aging population of "baby boomers" who increasingly act like "informed consumers," family doctors will have to change their overall approach.

What to do? L'Heureux and his team have issued a set of "strategic

guidelines," which propose that FPs change the way they work and allocate their time instead of trying to do more with less. Suggested changes include practising family medicine as part of a "family medicine network" as opposed to practising in individual offices. Que-

(Continued on page 1464)

New McMaster health program overrun with applicants

A new honours health sciences program at McMaster University has proved so popular that the cut-off marks for applicants will be a minimum of 90%, program administrator Teresa Boyd says. The course will be launched with 80 students in September. More than 1400 students applied for entry, with almost 400 applicants making it their first choice.

The new program will employ the same problem-based-learning format that McMaster's medical school made famous. The course is interdisciplinary, but students will have to take several "hard science" courses, including 2 biology

and 2 chemistry courses in the first year. The course goal is to "provide students with a solid knowledge base in health-related sciences, as well as the skills needed to critically evaluate and synthesize health-related information."

Boyd said graduates will have 3 career options. Some will choose a professional career such as medicine, while others will enter graduate school and pursue careers such as health administration. The final group will start work immediately, in areas such as pharmaceutical sales. — *Patrick Sullivan, CMAJ*