NWT report urges recognition for aboriginal healers

Recognition for traditional aboriginal healers and increased involvement of nongovernmental organizations are among the recommendations from a government-appointed committee that

investigated health care issues across the Northwest Territories.

Our Communities, Our Decisions: Let's Get On With It!, the final report of the Minister's Forum on Health and Social Services, also calls on the territorial government to remove itself from delivery of health services unless specifically asked for help by health boards.

The suggested changes constitute a complete restructuring of a system that, in just 10 years, has been transferred from the federal government to the territorial government and then to 9 health and social services boards.

The report points out that the territorial government has produced 4 major reviews of its health care system during the past 5 years, resulting in about 200 recommendations, many of which have yet to be acted upon. "No more reviews, studies or reports are needed," the authors stated. "Action is

wanted today." The report says that the territorial government should retain responsibility for legislation, standards and enforcement, but responsibility for program delivery should be transferred from

ADDICTION IN THE NWT

"Far and away the most pressing, most pervasive and most shattering health issue, and the symptom of a society broken down in the Northwest Territories, is substance abuse. Communities, boards and front-line workers talk of alcohol, drugs, inhalants, gambling, food, promiscuous sexual activity and nicotine as addictions."

regional boards to local communities over the next 5 years. Territorial funding should not be program specific, and boards should be free to negotiate among themselves for shared services. The forum visited 12 communities across the NWT and received input from more than 800 individuals and organizations.

Repeating a recommendation from a 1998 consultant's report commissioned by the territorial government, the new report suggests that health boards "be encouraged to hire competent traditional healers in situations where their expertise and knowledge may be beneficial in treating a patient."

According to the report, nongovern-

mental organizations and other agencies are now prevented from working harmoniously with health care providers by "obsolete territorial and federal funding arrangements and inappropriate lines of authority." These include groups devoted to mental health, the aged, disabled, and a wide range of conditions and disabilities, which should be supported by multiyear funding through regional boards.

Substance abuse remains the NWT's most serious health concern, the authors said. "Communities, boards and front-line workers talk of alcohol, drugs, inhalants, gambling, food, promiscuous sexual activity and nicotine as addictions. Substance-abuse problems in our communities are deeply rooted and of long standing. People are beset with feelings of hopelessness, despair and impotent rage. From this comes violence, suicide and sexual abuse." — David Helwig, London, Ont.

Beware of all types of bat exposure, BC MDs warned

British Columbia has joined some other provinces in recommending rabies postexposure prophylaxis (RPEP) when direct patient contact with a bat cannot be ruled out. The US Centers for Disease Control and Prevention (CDC) recommends the same action.

Dr. Danuta Skowronski, physician epidemiologist at the BC Centre for Disease Control, says that such action should be taken when people awaken to find a bat in the room, or when unattended children and mentally handicapped or impaired persons are found in the presence of a bat (see *CMAT* 1997;157[1]:55). In such cases, she says,

RPEP should be offered even if a bite or scratch is not obvious. "All bat contact should be assessed very cautiously," says Skowronski says. "We're beginning to recognize that cases we couldn't specify previously were actually bat rabies."

A check with some other provinces showed that CDC guidelines are also being followed in Alberta and Ontario, but not in New Brunswick.

Although the last rabies death in Canada occurred in 1985, there have been 36 such deaths in the US since 1980, and 21 were due to bat-variant rabies. More troubling is that "a bite was identified in only 1 or 2 of them."

Experts aren't certain why the contact has been so hard to pin down, but there are several possibilities. Bat teeth are thin and needle-like and it's possible individuals are bitten without

realizing it. Bats are also inclined to lick their claws and wings, and may deposit infected saliva there that can be transferred through a scratch or by touching an existing wound rather than by biting. (Aerosol transmission is not a con-

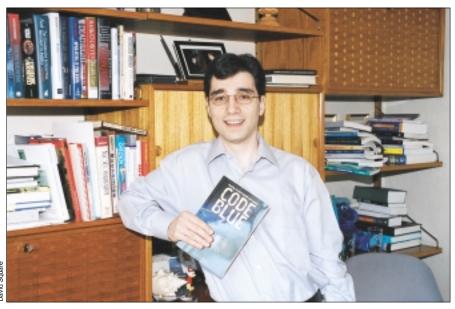
Fourth-year medical student takes Donner Prize

When the winner of the Donner Prize for the best book on public policy was announced prematurely last month, many people couldn't believe who had won — including the author himself. It took a call from a Toronto reporter to convince 25-year-old David Gratzer, who graduated from the University of Manitoba's medical school this spring, that he had won the \$25 000 first prize. His competition included 6 professors, 1 of them a federal cabinet minister.

Gratzer's book, *Code Blue: Reviving Canada's Health Care System*, takes an insider's look at problems besetting that system: hallway medicine, long waiting lists for cancer treatment, a shortage of high-tech equipment, the movement of Canadian doctors to the US. Gratzer's brother, a psychiatrist, has already relocated to the US.

Gratzer said family discussions about the poor state of medicine in Canada and his own rotations in medical departments prompted him to write the book. His articles on health care in Canada have already appeared in several newspapers.

A major theme in his book is the need to improve health care in Canada by improving the doctor–patient relationship. "The way we've structured medicare has corrupted this relationship by allowing patients to overconsume health services, doctors to overprovide services and health administrators to be accountable to no one," Gratzer says.



Dr. David Gratzer: patients overconsume, doctors overprovide

To resuscitate this "very bureaucratic, very expensive system," he suggests a system of individual medical savings accounts that is already in use in parts of China, Singapore, parts of the US, and South Africa. "In Canada, instead of spending \$700 per year on health services for a young, healthy male, the Canadian government would give me that money to put into a savings account. Out of this account I would pay for minor day-to-day expenses such as seeing my family doctor or getting an x-ray."

Gratzer said there would then be incentive to spend the money wisely: at the end of the year, money left in the account might be rolled over into a retirement savings plan that would continue to grow. People would also be required to purchase catastrophic health insurance to cover extraordinary medical expenses.

Gratzer plans to spend part of his \$25 000 prize on gifts and birthday parties for his niece and nephew; the rest will go toward covering costs during his psychiatry residency at Mount Sinai Hospital in Toronto. — *David Square*, Winnipeg

cern, except for individuals who receive extended or severe exposure, perhaps by spending time in a cave filled with bats.)

But while the method of transmission may be up for debate, the response is clear. Once exposure has been verified, patients should be offered the standard prophylaxis even if it is many days after the exposure, because the incubation period for rabies varies.

Although bats are not the only carriers of rabies in Canada — skunks,

foxes and, more recently, raccoons in Ontario are all vectors for the disease — their ability to get into homes and cottages makes them a special concern. Although the prevalence of rabies in bats is less than 1% in random surveys, it is somewhere between 5% and 10% in bats submitted for testing, probably because sick bats are more likely to come into human contact.

Still, the message is not always getting through to physicians. Last year, an 11-year-old BC girl was bitten on

the lip by a bat when it flew in her bedroom via an open skylight. Two hospitals failed to advise the girl's parents that she should receive immediate RPEP. Fortunately, the parents contacted their local health unit and the girl received prophylaxis. The bat tested positive for rabies.

"We clearly need to get the information out to more health care workers," Skowronski says of the case. "Rabies is not a disease you take chances with." — Daphne Gray-Grant, Vancouver