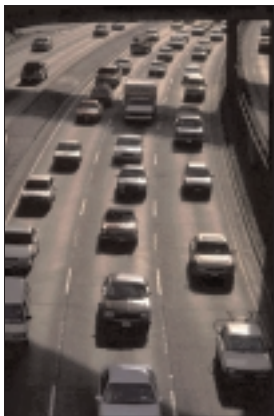


*Pulse*

## Driving: How old is too old?

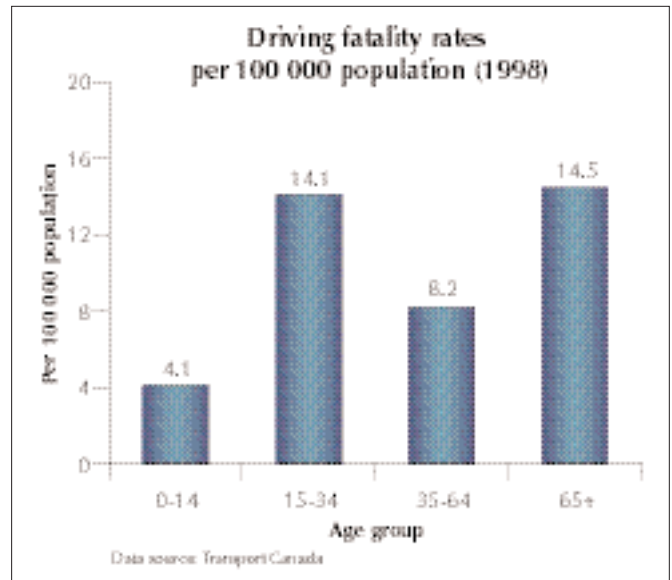
The CMA's new guide for physicians, *Determining Medical Fitness to Drive*, recognizes that while the rate of decline in physical and mental function varies from person to person as they age, these changes eventually affect everyone's ability to drive. The guide states that "slowed reaction time, lack of attentiveness, poor judgement and faulty attitudes are responsible for many crashes at all ages. These factors assume an increasing importance with advancing years."



Transport Canada statistics ([www.tc.gc.ca/secure/routiere/stats/stats98/en/st98agee.htm](http://www.tc.gc.ca/secure/routiere/stats/stats98/en/st98agee.htm)) show that Canadians over the age of 65 have a much higher annual fatality rate per 100 000 population (14.5) than those in their middle years (35–64), whose rate is rate is 8.2 deaths per 100 000. Young Canadians (15–34) come close to matching the fatality rate of seniors (14.1 per 100 000). The rate of injury, however, declines with age.

A May 16, 2000, Gallup poll revealed that Canadians appear to favour mandatory testing of elderly drivers. Eighty-five percent of respondents agreed that elderly drivers should be

tested; people aged 30 to 39 years were most likely to agree (92%) compared with 68% of those 65 years of age or older.



Over a third (36%) thought mandatory testing should begin at age 65, but only 3% thought testing should only be mandatory for those over 80. Respondents from Atlantic Canada were the least likely to agree to mandatory testing (76%) but had the highest proportion of respondents (44%) who felt testing should begin at 65. — *Lynda Buske, buskel@cma.ca*

## Hike med school fees, NS business federation says

A proposal to raise medical school fees at Dalhousie University and then offer bursaries to students who agree to stay and practise in Nova Scotia is "simplistic," a spokesperson for the medical school says.

In a recent presentation to the 3 political parties represented in the provincial legislature, Canadian Federation of Independent Business Vice-President (Atlantic) Peter O'Brien said taxpayers need a "reasonable return" on the money they invest in the only medical school in the Maritimes. Getting physicians to practise in underserved areas would be one such return.

O'Brien says the federation, which represents 94 000 businesses across the

country, recommends hiking tuition fees at Dalhousie and then offering "significant" bursaries to offset this to students willing to practise in an underserved area after graduation. "We have to look at ways to encourage those young physicians to go into rural areas, even for 3 or 4 years," says O'Brien. He adds that physician shortages have a direct impact on businesses and communities.

But Dr. Micheline Ste-Marie, associate dean of undergraduate medical education and student affairs at Dalhousie, says the federation plan is simplistic. The main problem, she says, is that there are no checks and balances to determine who is sent to work in

under-represented, primarily rural, areas. "Do you selectively apply this to people who volunteer?" she asked. "There are people who will not do well in an underserved area. One has to be realistic about the value of what you get."

Dalhousie accepts approximately 90 new medical students each year, more than 80% of whom are from the Maritimes; it is not known how many of the students remain in the Maritimes to practise. Tuition at Dalhousie's medical school is \$7670 a year; the country's highest fees are at the University of Toronto — \$14 000 annually for first-year students. — *Donalee Moulton, Halifax*