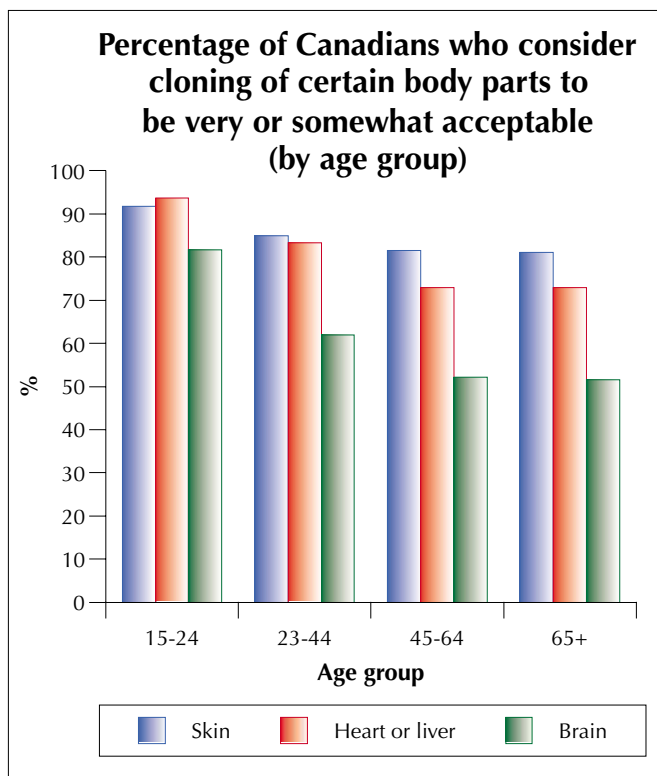


Pulse

Most Canadians welcome genetic testing

A recent survey by the financial and managerial firm PricewaterhouseCoopers (*HealthInsider*, Spring 2000) found that most Canadians favour the use of genetic testing for specific medical purposes.

The survey, which tracked attitudes toward a number of



biotechnological advances in medicine, found that 93% of those surveyed felt genetic testing would be very or somewhat acceptable if used to diagnose illnesses earlier. Almost as many respondents (91.3%) said it was very or somewhat acceptable to use genetic testing to determine the risk of transmitting a disease to one's children. Using the testing to determine an individual's future risk of acquiring a medical condition was deemed very or somewhat acceptable by 90.6% of respondents. Interestingly, 91.6% of respondents would give their own doctors access to their genetic information, while only 13.6% would grant the same access to government agencies.

Respondents tended to favour genetic engineering if used for specific medical reasons, with 71.2% viewing it as very or somewhat acceptable if used to cure an inherited medical condition, and 81.2% saying it was very or somewhat acceptable when used to decrease the risk of acquiring a specific condition. Canadians view genetic engineering less favourably if it is used for nonmedical reasons: 24.3% said it would be acceptable if used to improve a child's esthetic or physical features, and 17.8% thought it would be acceptable to use it to determine the sex of a child.

Although Canadians generally feel that the cloning of humans is not very or not at all acceptable (88.3%), they are more receptive to the possibility of cloning human parts for specific medical reasons. Eighty-seven percent of respondents felt that cloning skin for accident victims was very or somewhat acceptable, 84.4% supported cloning a heart or liver for transplantation, while 66.4% would accept the cloning of the human brain for victims of severe brain damage. Younger Canadians were more likely to support the cloning of human parts. — *Shelley Martin*, martis@cma.ca

AMA warns Alberta surgeons about going it alone

The president of the Alberta Medical Association has warned 18 cardiovascular and thoracic surgeons that it will continue to represent all of the province's doctors in negotiations with the province. A May 30 letter from President David Bond was sent to all members after the AMA received resignation letters from the 18 members of its Section of Cardiovascular and Thoracic Surgery. The association was also notified that the surgeons wanted

to continue receiving all benefits available to AMA members; although the surgeons would be eligible to pay a nonmember administrative fee that would make them eligible to receive CME and CMPA reimbursements, Bond warned that they would lose benefits such as AMA insurance and the right to invest in MD Management. Dr. Dennis Modry, president of the section, said the resignations were prompted by AMA opposition to Al-

berta's Bill 11, which would lead to more private surgical services in the province. The request to dissolve the section will be considered by the AMA's Representative Forum Sept. 16. In the meantime, Bond has issued a call for unity. "The profession of medicine, and our cherished autonomy and clinical independence, are best protected and ensured through unity of all physicians, speaking with one voice," he said. — *Patrick Sullivan*, CMAJ