

Montreal physicians protest poverty

Some Montreal-area physicians are staging protests to raise awareness among their colleagues about the link between poverty and poor health.

The Coalition of Physicians for Social Justice was formed 5 years ago after the physicians were galvanized by the introduction of Quebec's universal drug insurance plan. They wanted to highlight what they considered punitive features, including plans to limit access to medication among vulnerable groups such as seniors, single parents and welfare recipients.

Five years ago the coalition's first petition, which protested the introduction of drug copayments for poor Quebecers under the province's new universal pharmacare plan, was signed by more than 100 family physicians. "We have an obligation according to our Hippocratic oath to keep patients from being harmed," says Dr. Paul Saba, the coalition's head. "If there is social injustice, patients are being harmed. When I found out about the implementation of the plan and the copayments that it required, I instantly thought it would limit access."

Saba, a Montreal FP who had worked on medical projects in Africa, says his experience abroad "reinforced my belief in values of the Canadian health care system, such as universality and comprehensiveness of care."

During public consultations involving

the Clair Commission, which eventually produced a report that recommended an overhaul of Quebec's health care system, the coalition held its own consultations, "The Good Samaritan Commission," to express its dissatisfaction.

"The recommendations were leaning toward privatization of the system and two-tier health care," says Saba. "This made a statement about our support of publicly funded care."

In addition to protests, petitions and other social activism, the coalition has also organized annual accredited CME courses on nutrition and the elderly since 1997. Saba says physicians have to be enlightened about the prevalence of poor nutrition among seniors. "About 1 in 4 elderly people has poor nutritional status. The effect of malnutrition is that patients are weaker, more prone to fractures and don't heal well if they sustain an injury, which costs money if they must have an extended stay in hospital. It's a vicious cycle. Part of health is illness prevention, and illness prevention involves housing, good nutrition and sufficient income."

The coalition's latest effort is a Health Canada-financed program that teams high school students with elderly people. The students help seniors shop for food and prepare meals.

The coalition is not the only group of its type in Canada. Dr. Joel Lexchin, a



Government, can you spare a dime?

member of Ontario's Medical Reform Group, says his organization is more academic in nature than the coalition and concentrates on appearances before government committees or media interviews.

"We don't actively organize demonstrations or hold public forums, and we tend to focus on national issues more than Ontario concerns. The coalition focuses on issues particular to Quebec." — Louise Gagnon, Montreal

White coats and ties, please

Male, female, young, old, white, black — when it comes to their doctor, most people just don't care. But they do care what their doctor wears, a new study indicates (*Archives of Dermatology* 2002;138[4]:463-8).

In a survey of 275 patients at 2 dermatology practices, more than half of respondents wanted their physicians to dress conservatively: jeans and sandals were out, while white coats, dress pants and name badges were in.

Lead author Dr. Matt Kanzler was surprised that the findings were virtually identical over all age groups, races and socioeconomic classes. "I would have expected that physicians' appearance would have been more important to older patients, but this was not the case," he said.

Kanzler says that patients may perceive a well-dressed physician as being more meticulous and serious than one who dresses casually. — *CMAJ*



Calling all translators

Translators Without Borders (Traducteurs Sans Frontières, TSF), a spinoff of Nobel Prize-winning Doctors Without Borders (Médecins Sans Frontières, MSF), is seeking specialized medical translators to take some of the pressure off MSF volunteers in the field, who currently have to add medical translation to their other duties. Marni Cochrane, coordinator of translators at Eurotexte, says TSF was founded in the 1990s by translators who agreed to do pro bono work for MSF, and it now needs specialists experienced in medical translation. MSF will pay a small fee for the translations "but this may be lower than normal rates." Canadian translators interested in the project can contact Cochrane at EuroTexte@compuserve.com. — *CMAJ*