

Correspondance

Questions of trust

On behalf of 53 000 members, from Quebec and from across Canada, the Canadian Medical Association considers that the editorial of September 17, 2002,¹ is seriously flawed.

- The editorial claims that physicians have broken the trust that underpins the patient–physician relationship. It specifically fails to provide evidence, from the main stakeholders in Shawinigan-Sud, to support the stark condemnation of the behaviour of these emergency physicians. In the absence of specific evidence to support this claim, it amounts to an unwarranted attack on the whole profession.
- Canada’s health system is being held together by the exceptional efforts of physicians and other health providers. This is especially so when it comes to caring for those in emergency situations. The editorial fails to recognize this fact.
- The editorial ascribes to physicians the responsibility for the severe inadequacy of the emergency services. This again fails to recognize the real-life experience of emergency physicians and their unique set of circumstances. This is further complicated by the specialty status of emergency medicine in Quebec.

Based on these serious flaws, the conclusion that physicians have betrayed a trust which we all hold at the very heart of medicine is repugnant. Our colleagues in Quebec deserve a retraction.

Dana W. Hanson
President
Canadian Medical Association
Ottawa, Ont.

Reference

1. Quebec’s Bill 114 [editorial]. *CMAJ* 2002;167(6):617.

Questions de confiance

Au nom de ses 53 000 membres du Québec et de partout au Canada, l’Association médicale canadienne estime que l’éditorial du 17 septembre 2002¹ comporte de graves failles.

- L’éditorial prétend que les médecins ont trahi la confiance qui sous-tend la relation patient–médecin. Il ne présente aucune preuve de la part des principaux intéressés de Shawinigan-Sud pour appuyer un jugement aussi sévère à l’endroit de ces urgentologues. En l’absence de preuves à l’appui, cette déclaration équivaut à une attaque gratuite contre l’ensemble de la profession médicale.
- Le système de santé du Canada est maintenu grâce aux efforts exceptionnels des médecins et des autres professionnels de la santé, ce qui est d’autant plus vrai dans le cas des soins d’urgence. L’éditorial néglige de reconnaître ce fait.
- L’éditorial fait porter aux médecins la responsabilité de la déficience grave au sein des urgences, négligeant une fois de plus de reconnaître la situation vécue par les urgentologues ainsi que leur situation particulière, qui se complique d’autant plus étant donné le statut de spécialité de la médecine d’urgence au Québec.

Conclure, malgré ces failles majeures, que les médecins ont trahi une confiance qui est au cœur même de la médecine, voilà qui est tout simplement sordide. Nos collègues du Québec méritent une rétractation.

Dana W. Hanson
Le président
Association médicale canadienne
Ottawa (Ont.)

Référence

1. La Loi 114 du Québec [éditorial]. *JAMC* 2002; 167(6):619.

CMAJ’s editorial on Quebec’s Bill 114 suggested that, “Physicians broke that trust by not staffing the ED [emergency department].”¹ You do not offer any evidence that individual physicians have failed to live up to their responsibilities. The government has long since taken over responsibility for managing the system. To place on each physician the responsibility for the community as a whole is unreasonable.

It is no secret that physicians are feeling overwhelmed with work and are struggling to keep up with their demands. Your comment was misdirected.

Stephen D. Chris
Physician
Toronto, Ont.

Reference

1. Quebec’s Bill 114 [editorial]. *CMAJ* 2002;167(6):617.

[The editors reply:]

It was not our intention to offer condemnation of physicians in Quebec or elsewhere, and we regret that our phrasing (and its translation) invited this interpretation. The case of Claude Dufresne in Shawinigan-Sud was a tragic demonstration of the untenable stresses on emergency services in Quebec. In referring to a “broken”¹ (not “betrayed”) trust, our purpose was not to pass judgement on individuals but to reflect on the damage done by such events to the relationship between physicians and society² — a relationship that, more and more, is being mediated by economic forces. Our editorial points to many factors that have contributed to the current difficulties in Quebec and is critical of the government’s legislative approach to a remedy. We welcome the open exchange of views on these issues by all stakeholders.