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Parkinson's disease

Parkinson's disease affects nearly 100 000 Canadians. Although 90% of patients are over 60 years of age, recent high-profile cases, such as that of Canadian Michael J. Fox, have dispelled the myth that the disease is exclusive to old age. Patients with Parkinson's disease suffer greatly from their illness, have a higher mortality rate than age-matched controls and need more health resources. With shifting demographics, primary care physicians will find themselves managing more patients with Parkinson's disease than in the past. In a

comprehensive review, Mark Guttman and colleagues discuss the diagnosis of this disease, insights into its causes, and important concepts in its medical and surgical management.

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Stress, satisfaction and burnout among Dutch medical specialists

"Stress" and "burnout" have entered the daily lexicon of the modern medical practitioner as necessary occupational risks. A survey of 1435 Dutch medical specialists, carried out by Mechteld Visser and colleagues, measured levels and effects of, and contributing factors to, job-related stress and satisfaction. Although 55% of respondents reported high levels of stress, 81% were highly satisfied with their jobs. Surprisingly, personal and job characteristics contributed little to the variation in satisfaction, with working conditions explaining most. Burnout was explained best by both high stress and low satisfaction rather than high stress alone.

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Socioeconomic gradients in angiography use

Across a wide breadth of conditions, socioeconomic status is an independent predictor of disease. It is also a determinant of investigations, such as angiography after acute myocardial infarction (AMI). One of the most common explanations for this latter discrepancy is a disparity in resources between areas of low socioeconomic status and those of higher socioeconomic status. David Alter and coworkers examined physician payment claims, hospital discharge abstracts and vital status data for 47 000 patients with AMI and found that angiography rates rose progressively with increases in neighbourhood income, irrespective of hospital or geographic characteristics.

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Emergency department overcrowding and transport delays

Emergency departments throughout North America are becoming dangerously crowded, often so much so that ambulances need to be diverted from the nearest hospital to one that is less full, risking a clinically important increase in prehospital transport times. Michael Schull and coworkers examined demographic and transport data for patients with chest pain from two 4-month periods, one in 1997 and the other in 1999, representing times of low and high emergency department overcrowding respectively. They found that the ambulance transport time was significantly longer when there was an increase in overcrowding, irrespective of patient characteristics, severity of illness or dispatch priority. The authors estimate that the 2.8-minute delay in transport, on a population level, might translate into years of life lost.

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Out of the cold: management of hypothermia and frostbite

Although they often seem more severe in one's memory, Canada's winters remain frigid and long. During 1992–1996, there were 411 deaths from hypothermia, frostbite and other cold-induced injuries in Canada. Several case series that focused on cold-induced injury have shown strong associations with alcohol consumption, psychiatric illness, and motor vehicle accidents or breakdowns. Jay Biem and colleagues review the pathophysiology, diagnosis and management of 2 of the most unfortunate side effects of our northern winters, hypothermia and frostbite.

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