

## Cardiac cases trigger advisory about smallpox vaccination

The Centers for Disease Control and Prevention (CDC, [www.cdc.gov](http://www.cdc.gov)) is advising that people diagnosed with heart disease temporarily defer vaccination with smallpox vaccine.

The move comes after 7 American health care workers experienced cardiac problems after being vaccinated, and 2 of them died. Three of the workers had myocardial infarctions and there were 2 cases each of angina and myopericarditis. By the end of March, 25 645 health care workers had been vaccinated as part of US preparations for a potential terrorist attack.

The US government had hoped to vaccinate up to 439 000 doctors, nurses and emergency workers by the end of March, but participation in the voluntary program has been far lower than expected.

Cardiologists say a connection between the vaccine and different types of heart problems is biologically plausible because a smallpox vaccination results in a low-grade infection caused by the vaccinia virus, a relative of smallpox used to produce antibodies against that disease.

The infection can cause widespread inflammation, which in rare cases can involve the heart, even in healthy people; 10 cases have been reported among 350 000 American military recruits who have been given the vaccine.

The CDC says similar cases were reported in the 1960s and '70s when smallpox vaccinations were still common, but reports then did not indicate who might be at higher risk.

The CDC's deferral advisory applies to anyone with a history of cardiomy-

eCMAJ and SARS	1168
Alberta nixes data mining	1169
CMA presidency a hot commodity	1170
Montreal's superhospitals	1171
Biohazard training yet to begin	1172
"Hillbilly heroin" arrives in NS	1172
BC boosts rural recruiting	1173
Demystifying DNA	1173
Pulse: MDs' family lives	1174

opathy, previous heart attack or history of angina, or other evidence of coronary artery disease.

Dr. Julie Gerberding, director of the CDC, says a decision about making the temporary deferral permanent will be made as soon as evidence is available. In the meantime, "we believe it is important and necessary to vaccinate health care workers to prepare our nation in the event we have to respond to a smallpox outbreak." — *Patrick Sullivan, CMAJ*

## "Yuppie scans" unethical marketing ploy, radiologist says

Canadian radiologists have started debating the ethics and efficacy of using full-body computed tomography (CT) scanning as a screening tool.

In the February issue of the *Canadian Association of Radiologists Journal (CARJ)*, [www.cma.ca/carj](http://www.cma.ca/carj), Dr. Harald Stolberg of McMaster University questions the utility, ethics and cost-effectiveness of the scans, and raises safety concerns. Drs. Bruce Forster of the University of British Columbia and John Mayo of the Vancouver Hospital present the counter-argument.

In "Yuppie scans from head to toe: unethical entrepreneurship" (*CARJ* 2003;54[1]:10-3), Stolberg says potential harm far outweighs potential benefit in most cases.

"The only known benefit of this marketing ploy is the financial advantage to the radiologist or the organization providing the CT screening," says Stolberg.

And even though the scans are purchased without public funds, he argues that the publicly funded health care system will be left to deal with any false-positive results. Stolberg con-

cludes that "extolling the possible benefits of computed-tomography screening without knowing the potential for harm exploits people's trust and is unworthy of any physician."

In their response, Forster and Mayo contend (*CARJ* 2003;54 [1]:14-7) that the scans are acceptable if done in a "scientifically principled, ethically based and patient-focused manner, with clear disclosure of the limitations of our current knowledge."

*CARJ* Editor Craig Coblentz praised the authors "for going mano-a-mano" on the topic. "Open and frank discussion such as this is necessary," he wrote.

Full-body screening is already offered throughout the US and is available at a handful of private Canadian clinics. In the US, online advertisements include invitations to "bring a friend and receive \$50 off both scans."

In March, 1 American company was offering \$50 discounts for "virtual colonoscopies," which are "just as accurate as conventional colonoscopy ... without passing an endoscope through the colon."

Normand Laberge, CEO of the



Canadian Association of Radiologists, says most of the clinics are operated by "entrepreneurs," not physicians.

Dr. Dale Vellet of Canada Diagnostic Centres, one of the few Canadian companies that still offer full-body scanning, says his patients must be more than 40 years old and have a physician's referral. The company also offers heart, lung, colon and bone scans, with costs ranging from \$800 to \$1200.

Laberge says there are no regulations governing full-body screening here, and American companies are lining up to access what they consider an untapped market. — *Jim Donnelly, CMAJ*