## Residency crisis in offing, provinces warned

A crisis appears to be brewing in Canada's postgraduate medical training system.

According to the Canadian Resident Matching Service (CaRMS), the 2004 match will provide no more than a 1-to-1 ratio between the number of graduates of Canadian schools and the number of residency positions. "We are expecting the lowest ratio ever," says Sandra Banner, executive director of CaRMS.

This is bad news not only for graduates of the Canadian schools, who can expect intense competition in the 2004 match, but also for Canadian and other graduates of foreign schools who have traditionally applied for unfilled positions in the second round of the CaRMS match. This year, they can expect slim pickings.

According to CaRMS, there were 143 more residency slots than participants in the 2002 match, but only 65 last year. It expects 2004 will provide the tightest match ever. The problem has developed because the impact of increased undergraduate enrolment at

Canada's medical schools is now filtering through to the postgraduate system, which has not received enough new positions to deal with the influx.

Banner says the main concern of program directors is that Canadian students may be lost to the US match, which in 2004 is being held earlier than Canada's for the first time. This means that Canadian students who used to use the US match only as a back-up plan may instead make it their first choice.

In October, the CMA, the Canadian Federation of Medical Students and the Canadian Association of Internes and Residents asked the country's ministers of health to move immediately toward a 1.2-to-1 ratio of residency positions to graduates of Canadian schools. Without this breathing space, says CMA President Sunil Patel, graduates of foreign schools and practising Canadian doctors seeking retraining would have "virtually no chance" of obtaining a match.

"We're shocked at the lack of foresight," says CFMS President Sayeh Minoosepehr. "Why would they increase

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undergraduate enrolment without looking at the postgraduate level?"

Although Banner isn't sure what Match Day will bring next March, she remains "cautiously optimistic that the situation will resolve itself because health ministries will realize the wisdom of funding more positions."

Minoosepehr, who hopes to become a cardiologist, says enrolment in her Class of 2005 at the University of Ottawa is 124 students, compared with 84 in the Class of 2004. She says this points to tough competition for almost all residency positions when she graduates. "I'm scared," she says. "And as medical students, we really don't need the stress." — Patrick Sullivan, CMAJ

## Drive thru, prevent flu

Flu shots have joined the ranks of drive-through services available in Canada. Ontario's Middlesex–London Health Unit made this possible Oct. 18 by offering a drive-in clinic in its parking lot. It allowed people of any age who are frail or immunocompromised, or use wheelchairs, walkers or canes, to



Lynne Swanson receives her drive-in flu shot from nurse Lynn McTavish.

receive their flu shot without leaving their vehicle.

Mary Anne Simpson, the unit's manager of vaccine-preventable diseases, says the service was offered because previous in-office clinics attracted few people who used assistive devices such as wheelchairs, even though all locations were wheelchair accessible.

The drive-through clinic proved popular. One elderly couple, who arrived in a cab, haven't been able to find a new family physician since theirs closed his practice 2 years ago, and last year they missed their injection. Public health nurse Kaylene McKinnon says the couple was "so grateful" for the drive-through option.

Appointments were required for the service, with 4 vehicles scheduled every 15 minutes. Of the 76 appointments available, 66 were filled. A total of 119 people were immunized, including caregivers and drivers.

Although this type of clinic has yet to

make major inroads in Canada, it has been part of flu-fighting efforts in the US since at least 1995, when the Veterans Medical Center in Dallas first offered the service. In London, those arriving on the cool, damp day parked under a tent-like covering, which provided shelter from the drizzle and wind. After reading an information sheet, signing a consent form and being assessed by a public health nurse, visitors received their injection. A 15-minute wait was required before leaving.

Injections were usually given through a rolled-down window or open door, but in some cases the nurse entered the vehicle. Twice, they had to stand on the running boards of large trucks.

Simpson says the nurses had no difficulty adapting to the drive-through concept. "Everybody wants to do it again next year," she says. "They really loved the day. And we've had nothing but positive comments from the public." — Lynne Swanson, London, Ont.