

Teacher takes helm of Nova Scotia's health care system

A former teacher has been named Nova Scotia's new minister of health. Angus MacIsaac of Antigonish will be taking the helm of the province's largest portfolio, which has a budget approaching \$2 billion. Many also consider it the most contentious portfolio, and it is likely to remain so as the newly elected Progressive Conservatives struggle to stay alive within a minority government.

MacIsaac, the former education minis-

ter, is expected to follow the planks laid out in the PC's election platform, including a promise to secure at least 100 more doctors and to streamline efforts to assess the qualifications of internationally trained specialists. There is also a commitment to train more new doctors at Dalhousie University and to set aside seats for students who agree to work where needed most.

Dr. Mary Doyle, president of the Medical Society of Nova Scotia, says access to health care remains a fundamental issue in the province. "Progress has been made in attracting doctors," says Doyle, "but many Nova Scotians are still unable to find a family doctor, and there continue to be

long waiting lists to see some specialists."

The recent election also provided a marked change in the issues that were debated. "For the first time in the history of this province, chronic illness prevention and health promotion were on the political agenda," says Jane Farquharson, executive director of the Heart and Stroke Foundation of Nova Scotia. "But we need to go beyond talking about these issues."

She says Nova Scotia "has the dubious distinction of being one of the unhealthiest provinces in Canada [and] simply hiring more doctors and nurses will not solve the underlying problems." — *Donalee Moulton, Halifax*

Nursing shortage more urgent than expected

Canada could face an unprecedented nursing shortage within 30 months, when between 13% and 28% of senior nurses will retire, a new report from the Canadian Institute for Health Information indicates.

Nearly a third (30.3%) of RNs working in Canada are 50 or older, and since most nurses retire between ages 56 and 58, an exodus looms. If RNs work until age 65, Canada will lose about 13% of its nurses by 2006. If they retire at age 55, it will lose 28%.

Many of the losses would be in the long-term-care sector, where about 19% of the RN workforce could retire by 2006.

"The reality of what could happen in just 2-and-a-half years from now was pretty shocking," said author Linda O'Brien-Pallas of the University of Toronto. "It highlighted the [urgent need] to do something."

The study predicted that meaningful retention strategies could induce 15 000 nurses to stay on the job. Increasing the number of full-time positions would have a huge effect on retention, says O'Brien-Pallas, because it would reduce the workload of senior nurses.

The most important retention strategy is perhaps the most nebulous. "Nurses need to be shown respect for their value," says O'Brien-Pallas. She points to the recent SARS epidemic as an example of the way "we are ignored and we are not included in the decision-making."

— *Barbara Sibbald, CMAJ*

OxyContin class-action suit to proceed

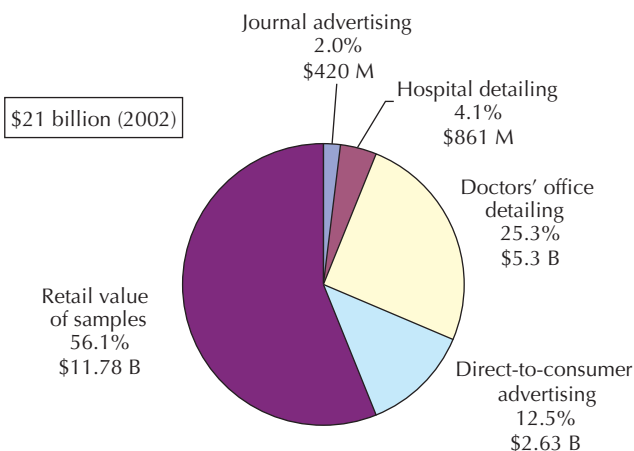
An Ohio appeals court has upheld a lower court decision that a statewide class action suit can proceed against Purdue Pharma, manufacturer of the controversial painkiller oxycodone (OxyContin). "The court of appeals clearly found ... evidence that OxyContin has ruined lives," said Stanley Chesley, counsel for the plaintiffs.

The company has been accused of aggressively promoting OxyContin even though it is highly addictive. Purdue Pharma's lawyers plan to appeal the decision, which they contend is "contrary to the facts." (See figure for amount spent on pharmaceutical promotions in the US.)

OxyContin has been named in lawsuits across the US, and about 30 have already been dismissed. The Ohio case is believed to be the first granted class-action status.

OxyContin has earned the nickname "hillbilly heroin" because of its popularity in poor regions of the US, where overdoses have claimed more than 100 lives. Although the pills operate on a controlled-release principle, drug abusers circumvent this by crushing them and then either injecting or "snorting" the resulting powder. — *CMAJ*

US promotional spending on prescription drugs, 2002*



* All amounts in US dollars

Source: IMS Health, Integrated Promotional Services and CMR, 2002 (12 months, ending Sept. 2002)