

The exhibit aims to “bring attention to the plight of millions of people worldwide who do not have access to affordable medicines,” says MSF-Canada President Dr. Joanne Liu.

If it’s successful, a cross-Canada tour may take place next year. — Barbara Sibbald, *CMAJ*

DOI:10.1503/cmaj.060682

News @ a glance

Fitness failure: Canada’s children got a “D” for the second year running on the annual report card on physical activity from Active Health Kids Canada. The charitable advocacy group is calling for more information about the importance of: unstructured physical activity and play time; cutting back on TV and computer time; and, establishing quality health and phys-ed classes. Chair, Dr. Mark Tremblay says parents and caregivers can set a good example by being active themselves, but only 36% do so.

Record spending: The estimated total health spending among Canada’s provinces and territories for 2006–07 is expected to reach \$84.7 billion, a \$5.7 billion or 6.4% increase from the year before. If current rates continue, health spending is expected to exceed \$100 billion next year. Ontario had the biggest outlay — \$35.4 billion.

CMAJ Interim report: The *CMAJ* Governance Review Panel released an Interim Progress Report on May 23 highlighting progress to date. The 6-member panel, led by Montréal lawyer, Richard Pound and *CMAJ* Ombudsman Dr. John Dossetor, has met 3 times, received 109 submissions and solicited feedback from 111 medical, editorial, publishing and educational organizations. The Panel has also commissioned a research report from Prof. Gilles Paquet on editorial governance structures at other leading journals. Paquet is a senior research fellow at the Centre on Governance at the University of Ottawa. The panel was created earlier this year to recommend a new governance plan for *CMAJ* and its publisher, CMA Media Inc. Its report is due July 14.

Food fight: The US and European Union have decided not to impose new regulations on the food industry to fight obesity. “The government can’t tell someone what to eat,” Deputy US Health Secretary Alex Azar told Reuters. Both the US and EU have asked companies, health experts and consumer groups to find other ways to combat obesity. The soft drinks industry on both sides of the Atlantic has agreed to a voluntary ban on ads aimed at children. — Compiled by Barbara Sibbald, *CMAJ*

DOI:10.1503/cmaj.060680

PULSE

Drug spending hits \$24.8 billion

Total spending on drugs in Canada increased by 11% last year to \$24.8 billion (see Fig. 1), according to the Canadian Institute for Health Information’s annual drug expenditures report.

Drug spending consumed 17.5% of the health care dollar in 2005, up

from the 9.5% share it claimed in 1985 when drug outlays tallied \$3.8 billion.

CIHI surmised the explosive growth in drug spending was attributable to a wide range of factors, including: higher prices for both brand-name and generic drugs, particularly new products, which are typically introduced to the market at very high levels; aggressive marketing of drugs to physicians and direct-to-consumer advertising by industry; changes in prescription and dispensing practices; inflation; the advent of new drug therapies for once untreatable or under-treated diseases, or for disorders once treated by surgery; and demographic changes, ranging from growth and aging of the population to epidemics or emerging new diseases.

With drugs commandeering an ever larger slice of health spending, the system continues to spend a smaller share of its health care dollar on physicians and hospitals. Spending on physicians rose to \$18.2 billion in 2005 from \$6 billion in 1985 but dropped from 15.2% of total spending to 12.8%. Hospital spending dropped to 29.9% from 40.8%. — Wayne Kondro, *CMAJ*

DOI:10.1503/cmaj.060659

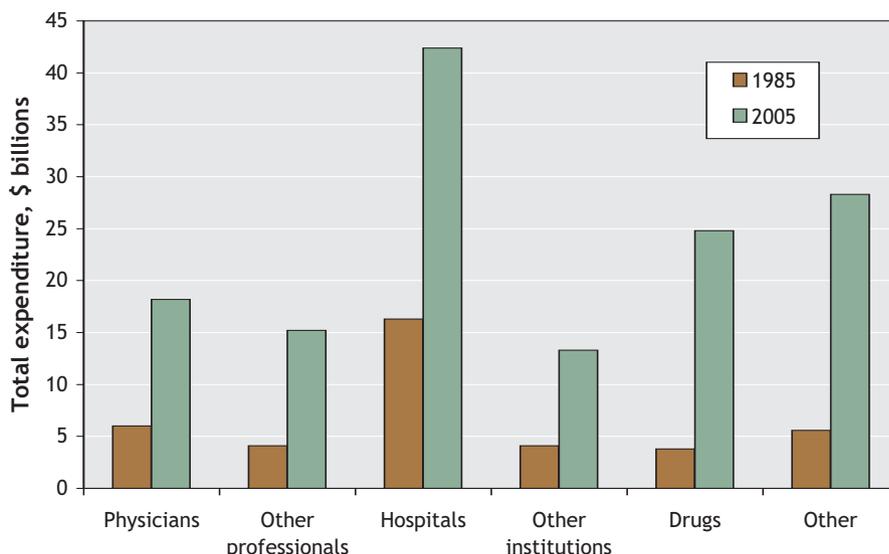


Fig. 1: Change in total health expenditures by use of funds in Canada, 1985 and 2005. The category “other” includes public health, administration, capital and other health spending. Source: Canadian Institute for Health Information