

## Briefly

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**Consulting scandal:** Cancer Care Ontario broke its own rules regarding contract management, according to a government audit released Oct. 7 ([www.cancercare.on.ca/common/pages/UserFile.aspx?fileId=53453](http://www.cancercare.on.ca/common/pages/UserFile.aspx?fileId=53453)). The provincial agency, responsible for improving cancer services in Ontario, was found to have awarded a consulting firm an excessive number of “follow-on” contracts, which aren’t open for tender. From 2006 to 2009, the agency paid \$18.7 million for follow-on contracts to the consulting firm Courtyard Group. It also approved \$128 000 in expenses to the firm without receipts and, in conflict with agency policy, failed to preapprove the firm’s expenses.

**Out of pocket:** The average American will shell out US\$4023 in 2010 for health care premiums and out-of-pocket medical expenses, a 10% increase over this year, according to the global human resources consulting firm Hewitt Associates. Individuals can expect to pay US\$2085 in health care insurance premiums, as well as US\$1938 in copayments, coinsurance and deductibles, ([www.hewittassociates.com/Intl/NA/en-US/AboutHewitt/Newsroom/PressReleaseDetail.aspx?cid=7360](http://www.hewittassociates.com/Intl/NA/en-US/AboutHewitt/Newsroom/PressReleaseDetail.aspx?cid=7360)).

**Tracking side effects:** The United States is putting in place a large-scale system to track side effects of the pandemic (H1N1) 2009 vaccine. In addition to its regular tracking of flu vaccine side effects, the government has sponsored projects at Harvard Medical School in Massachusetts (to link insurance databases to vaccine registries), at Johns Hopkins University in Maryland (to email health questions to vaccine recipients) and at the Centers for Disease Control and Prevention (to produce take-home cards for vaccine recipients informing them how to report side effects).

**Cost of failure:** Within a decade, the number of Americans without health insurance may increase by at least 10% in every state and by more than 30% in some states if the United States fails to reform its health care system, according to a report from the Urban Institute, a nonprofit agency in Washington, DC ([www.rwjf.org/files/research/49148.pdf](http://www.rwjf.org/files/research/49148.pdf)). The institute used current coverage and cost trends to predict the state of health care in 2019. It also predicted, under a worst-case scenario, that health care premiums for businesses would more than double in 27 states, that spending on Medicaid would rise by more than 75% and that the amount of uncompensated care would more than double in 45 states.

**Fewer spots for foreign-trained docs:** The number of residency spaces for foreign-trained doctors in Alberta will drop to as low as 40 in 2010 from 66 this year. The Alberta International Medical Graduate Program attributes the reduction to budget cuts and a shortage of trainers. The Alberta International Medical Graduate Association says this is a blow to international medical graduates and to the province of Alberta, which is in desperate need of more doctors. Alberta Health says the province is simply returning to normal levels, after an exceptional year when it was able to find additional residency positions for foreign-trained physicians.

**Deadly incidents in the United Kingdom:** Serious patient safety incidents reported at the National Health Service in the United Kingdom resulted in severe harm or death to more than 5700 patients over a six-month period, according to figures released by the National Patient Safety Agency. In total, there were 459 500 patient safety incidents between October 2008 and March 2009, a 12% increase from the previous six months. A breakdown showed that 66% of the incidents caused no harm, 27% caused low harm,

6% caused moderate harm and 1% resulted in death or severe harm. The safety agency attributes the rise in incidents to better reporting, not to an actual increase in errors.

**Drug usage patterns:** The use of “discretionary” drugs by people in British Columbia varies according to cultural background, income, lifestyle and whether they live in urban or rural areas, according to a study released by the University of British Columbia Centre for Health Services and Policy Research ([www.chspr.ubc.ca/rxatlas/bc/2009](http://www.chspr.ubc.ca/rxatlas/bc/2009)). The use of potentially life-saving drugs, such as medicine to treat high blood pressure, varied little. Much more variation in usage was found for antidepressants and drugs for erectile dysfunction. The study used 2006 data from 79 local health areas.

**Reactor fix:** Atomic Energy of Canada Ltd. will need an additional \$70 million to repair its National Research Universal reactor, Senior Vice-President Bill Pilkington told the House of Commons natural resources committee. Pilkington also indicated that the 52-year-old reactor will not resume operations until the first quarter of 2010, at the earliest. The reactor, in Chalk River, Ontario, was shut down on May 14 because of a heavy water leak resulting from corrosion at the base of the aluminum vessel that houses the reactor’s core (*CMAJ* 2009. DOI:10.1503/cmaj.091007). Pilkington also said the agency believes the reactor can be operated beyond 2016. “There is no defined end date that the NRU would be taken out of service. And that will be determined as we continue to gather data on the aging over the years ahead.”

**Euthanasia ethics:** Roughly 75% of Quebec medical specialists favour legalized, regulated euthanasia, according to a poll conducted by Ipsos Descarie on behalf of the Fédération

des médecins spécialistes du Québec. Of the 2025 of 8717 active medical specialists who responded to the survey, roughly 52% said euthanasia is often or sometimes used within the province, while 29% said it was rarely employed ([www.fmsq.org/e/centrede presse/communiqués/coms/20091013.html](http://www.fmsq.org/e/centrede presse/communiqués/coms/20091013.html)). The survey also indicated that 49% of specialists believed euthanasia was a question of ethics, while 24% believed it an issue of morality and

13% a question of law. About 83% of the specialists said that a patient's religious beliefs should be taken into account when the decision is made.

**Labour agreement:** An eight-month labour dispute which featured threats of legal action on the part of New Brunswick's 1500 doctors ended when the New Brunswick Medical Society announced that it had reached a wage agreement with the provincial govern-

ment that will see doctors receive a 3.75% pay hike in each of the next four years, followed by a two-year wage freeze. The society threatened to sue the government after it introduced legislation that proposed freezing doctors' wages for two years. The labour agreement applies to both salaried and fee-for-service physicians. — Roger Collier and Wayne Kondro, *CMAJ*

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