Briefly

Eurocare: The European Parliament has passed legislation providing cross-border access to health care services for residents of European Union nations. The directive, which is expected to take effect in 2013, precludes countries from refusing treatment to a foreign patient unless it was readily available in his country (www.europarl.europa.eu/sides/getDoc.do?pubRef=-//EP//TEXT+TA+P7-TA-2011-0007+0+DOC+XML+V0//EN). But in a bid to prevent patients and health insurers from health tourism, the directive limits reimbursements to patients to the level of that provided in their home country. The directive has been at the core of a debate over a framework for patients' rights in the wake of a series of lawsuits brought before the European Court of Justice (www.cmaj.ca/cgi/doi/10.1503/cmaj.109-3290).

Northern exposures: The nationwide shortage of doctors is even more pronounced in northerly regions of Canada and residents of those areas often have limited access to what few doctors are available, according to a report from the Conference Board of Canada. The fewest number of doctors per 10 000 population in Canada can be found in northern Saskatchewan (3), Nunavut (5), northern Newfoundland and Labrador (8), northern Alberta (10) and northern Manitoba (11), according to the study, *Somebody Call a Doctor* (www.centreforthenorth.ca/download/attachments/HTN-SomebodyCallADoctor.pdf). "It's no secret that Canada suffers from a doctor shortage. But the pain is not felt evenly across the country," Derrick Hynes, director of the board's Centre for the North, said in a press release (www.conferenceboard.ca/press/newsrelease/11-01-20/Doctor_Shortage_Much_More_Severe_In_Canada_s_North.aspx).

Suicidal ideation: Nearly 6.3% of American surgeons contemplated suicide over the course of a year, as did nearly 16% of surgeons who made a medical error, according to a survey of

nearly 8000 members of the American College of Surgeons. But the survey did not establish a direct link between medical error and suicidal ideation, although it did conclude there was a strong relationship between recent suicidal ideation and "symptoms of depression and a surgeon's degree of burnout" (*Arch Surg.* 2011;146[1]:54-62). Of surgeons who did contemplate suicide, only 26% sought psychiatric or psychologic help, while 60% indicated they were reluctant to do so because of fear they'd lose their licence to practise.

Avoiding bad press: The United Kingdom's General Medical Council (GMC) has launched consultations on a proposal to allow doctors to avoid public hearings on their fitness to practise if they accept sanctions such as suspension or erasure of their licences. "Public hearings often result in a great deal of stress and anxiety for both the doctors involved and the witnesses. In some cases, allegations are reported in the press which later turn out to be unfounded. Hearings are also extremely costly and, even with careful case management, it takes several months to bring a case to a hearing. We believe our approach to fitness to practise cases should prioritise public protection and fairness for doctors. We also need to ensure that we deliver value for money. It is therefore questionable whether cases should be referred for a public hearing if we can deliver fast and effective public protection without the need for one. Where a doctor is willing to accept the GMC's proposed sanction — for example, the removal of their name from the register — the case for a public hearing is hard to make. Accordingly, we believe a new phase of reform is now needed — one that ensures our procedures deliver fast and effective public protection in a way that is fair and sensitive to all involved, and which at the same time delivers value for money," states the proposal (www.gmc-uk.org/FTP_reforms_consultation_paper.pdf_38085201.pdf).

Health drivers: Chronic conditions have a greater impact on the use of health resources by seniors than age, according to a new study by the Canadian Institute for Health Information. Roughly "24% of seniors who reported living with three or more chronic conditions were responsible for 40% of health care use among Canadian seniors," says the study, *Seniors and the Health Care System: What Is the Impact of Multiple Chronic Condition*, (http://secure.cihi.ca/cihiweb/products/air-chronic_disease_aib_en.pdf). "Seniors who are taking a large number of drugs face not only the risk of side effects from negative drug interactions but also the possibility of not taking their medications as directed," Dr. Bill Hogg, research director of the C. T. Lamont Primary Healthcare Research Centre at the Élisabeth Bruyère Research Institute at the University of Ottawa in Ontario, said in a press release (www.cihi.ca/CIHI-external/internet/en/Document/types+of+care/primary+health/RELEASE_27_JAN11). "Strategies to reduce the number of medications a senior is prescribed, when possible, can result in better compliance with medication regimens and lead to a better quality of life."

Disability forms: The Canadian Life and Health Insurance Association has unveiled standardized group short and ongoing long-term disability claim forms in a bid to reduce paperwork for physicians. "Our industry wanted to find a way to make the claims process simpler and less time consuming for doctors, so that we could help them spend more time on patient care. This represents a positive step towards improving Canada's health care system." Frank Swedlove, the association's president, said in a press release (www.clhia.ca/domino/html/news_releases/Public_News_Releases.nsf/web_en_PublicNews/8525759A005D051A8525782900491A2F). Roughly 93% of disability plans in Canada fall under group coverage.

Efficient use of isotopes: The Canadian Agency for Drugs and Technologies in Health (CADTH) will launch a \$3 million research project to determine the most efficient and effective means by which the health care system can use the medical isotope technetium-99m. The aim is to develop “guidance on how to prioritize the use of the isotope, CADTH said. “The goal is to provide decision-makers in the Canadian health care system with evidence-based guidance on policies, protocols, and standards related to 99mTc that help support access to appropriate medical imaging for Canadians” (www.cadth.ca/media/miimac/Isotopes_Project_Backgrounder_e.pdf).

Junk food summit: The World Health Organization (WHO) says participants at next fall’s global summit on non-communicable diseases will be asked to adopt recommendations aimed at limiting the marketing of foods high in fat, sugar or salt to children. “Data shows that 43 million pre-school children worldwide are obese or overweight. Scientific reviews have also shown that a significant portion of television advertising that children are exposed to promotes ‘noncore’ food products which are low in nutritional value,” the WHO states in a press release (www.who.int/chp/media/news/releases/2011_1_marketing/en/index.html). The United Nations General Assembly High-level Meeting on the Prevention and Control of Noncommunicable Diseases will be held Sept. 19–20 in New York City, New York.

Canine scent detection: Researchers in Japan have discovered that dogs can detect the presence of cancer in breath and stool samples with remarkable efficiency. The study found that a trained Labrador retriever was able to correctly identify cancer samples in 33 out of 36 breath tests and 37 out of 38 stool tests. The results show that “a specific cancer scent does indeed exist and that cancer-specific chemical compounds may be circulating throughout the body. These odour materials may become effective tools in CRC [colorectal cancer] screen-

ing,” concludes the study, published online in the journal *Gut* (http://gut.bmj.com/content/early/2011/01/17/gut.2010.218305.short?q=w_gut_ahead_tab).

Drug wars: Roughly \$2.8 billion would be added to the national drug bill if the pharmaceutical provisions proposed in the trade agreement between Canada and the European Union are adopted, according to a study commissioned by the Canadian Generic Pharmaceutical Association. “EU proposals will considerably lengthen the period of exclusivity for innovative drugs in Canada, so that Canada would have the most extensive structural protection of innovative drugs of any country in the world,” according to the study, *The Canada-European Union Comprehensive Economic & Trade Agreement: An Economic Impact Assessment of Proposed Pharmaceutical Intellectual Property Provisions*. The study argues that exclusivity for brand-name drugs will be extended by five years for drugs that are caught up in the regulatory process, while data exclusivity will be extended by two or more years (from eight), which would prevent generic terms from accessing clinical trial data used in creating knock-offs (www.canadiangenerics.ca/en/news/docs/02.07.11CETAEconomicImpactAssessment-FinalEnglish.pdf).

Clear as mud: The Health Council of Canada has developed a guide to help Canadians sift through the tea leaves of health indicators, which often appear as if they are designed to disguise, rather than reveal, information about the performance of the health care system. Or as *A Citizen’s Guide to Health Indicators* deftly notes, “they raise questions, but not usually provide direct answers” (www.healthcouncilcanada.ca/docs/rpts/2011/ind/indJan2011.pdf). Nevertheless, the guide “will help Canadians better understand the bases of these statistics and how to interpret them,” John Abbott, CEO of the council, said in a press release. “We are bombarded by health statistics daily, and they can become overwhelming and confusing.”

Product recall: Fort Erie, Ontario-

based Pharmetics Inc. has recalled six over-the-counter drugs that it manufactures after failing a Health Canada inspection at one of its production facilities. “Pharmetics Inc.’s recall comes as a result of Health Canada’s Good Manufacturing Practices inspection at the company’s Laval [Quebec] manufacturing site where deficiencies related to the production line were detected, including possible contamination between the product lines and some products labelled with the wrong expiry dates,” Health Canada stated in a press release announcing the recall (www.hc-sc.gc.ca/ahc-asc/media/advisories-avis/_2011/2011_22-eng.php). Some or all of the six products — Acetaminophen 500mg Tablets Extra Strength; Acetaminophen, Caffeine & 8mg Codeine Phosphate Tablets; Muscle and Back Pain Relief Extra Strength Tablets; Sinus Medication Night Tablets; Day-time Sinus Relief Extra Strength Tablets; and Allergy & Sinus Relief Extra Strength Tablets — are variously sold as the store brands of retailers Shoppers, Loblaws, Rexall, Procurity, Federated Coop, Proxim, Jean Coutu, Safeway, Uniprix, and Value Drug Mart.

Willful neglect: Doctors who provide inadequate care to patients within the United Kingdom’s National Health Service should be subject to a criminal charge of “willful neglect,” as is currently the case with those who provide care to children or to the mentally ill and incapacitated, ethicists from the University of Manchester argue. “Just as a parent, or a mental health professional, or person entrusted with responsibilities under the Mental Capacity Act has assumed a fiduciary obligation towards a vulnerable individual, so have healthcare professionals and managers who admit patients into their care. Patients who cannot get themselves to the lavatory and/or eat without help are of necessity vulnerable,” says the study, *Healthcare scandals in the NHS: crime and punishment* (<http://press.psprings.co.uk/jme/january/jme38737.pdf>). — Wayne Kondro, *CMAJ*

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