

## Briefly

**Mercury convention:** By ultimately reducing mercury emissions, the newly approved Minamata Convention on Mercury should eventually result in a substantial reduction in the incidence of brain, neurological, kidney and digestive system damage, as well as memory loss and language impairment, resulting from exposure to the element, the World Health Organization (WHO) says. Among the provisions of the convention are a vow to phase out production, export and import of several mercury containing products, including thermometers and, blood pressure devices, as well as cold cathode and external electrode fluorescent lights, by 2020 ([http://unep.org/hazardoussubstances/Portals/9/Mercury/Documents/INC5/5\\_3\\_e\\_text.pdf](http://unep.org/hazardoussubstances/Portals/9/Mercury/Documents/INC5/5_3_e_text.pdf)). The convention also proposes to phase out the use of a dental amalgam composed of mercury and silver-based alloys. “An important exception that was strongly supported in the negotiations was the use of thiomersal (ethyl-mercury) as a preservative in human and animal vaccines. WHO has closely monitored scientific evidence relating to the use of thiomersal as a vaccine preservative for more than 10 years, through its Global Advisory Committee on Vaccine Safety, and the Committee has consistently concluded that there is no evidence to suggest that the amount of thiomersal used in vaccines poses a health risk,” WHO states in a press release ([www.who.int/media/centre/news/statements/2013/mercury\\_20130119/en/](http://www.who.int/media/centre/news/statements/2013/mercury_20130119/en/)).

**Supercharged admissions:** The number of Americans needing treatment in hospital emergency departments for consumption of energy drinks or more concentrated “energy shots” more than doubled to 20 783 between 2007 and 2011, according to the United States Substance Abuse and Mental Health Services Administration. The majority of those visits “involved either adverse reactions or misuse or abuse of drugs”

and most commonly involved people aged 18 to 25, the administration states in an *Update on Emergency Department Visits Involving Energy Drinks: A Continuing Public Health Concern* ([www.samhsa.gov/data/2k13/DAWN126/sr126-energy-drinks-use.pdf](http://www.samhsa.gov/data/2k13/DAWN126/sr126-energy-drinks-use.pdf)). “Of the 20,783 ED visits involving energy drinks in 2011, more than half involved energy drinks only (58 percent), and the remaining 42 percent involved other drugs. Pharmaceuticals were most commonly combined with energy drinks (27 percent), with 9 percent involving energy drinks and central nervous system stimulants (e.g., Adderall®, Ritalin®). About 13 percent of visits involved energy drinks and alcohol and one tenth of visits (10 percent) involved energy drinks and illicit drugs, with 5 percent involving energy drinks and marijuana.” In another energy drink development, researchers reported in *CMAJ Open* that a survey indicates that roughly 20% of Canadian high school students consume alcohol mixed with energy drinks ([www.cmajopen.ca/content/1/1/E19.full](http://www.cmajopen.ca/content/1/1/E19.full)).

**Your tax dollars at work:** Health Canada has issued an advisory to “older adults” to modify their diets because their age makes it harder for their immune systems “to fight off harmful bacteria.” The agency adds that “this means that older adults can come down with a serious illness if they eat contaminated food” ([www.hc-sc.gc.ca/aahc-asc/media/advisories-avis/\\_2013/2013\\_13-eng.php](http://www.hc-sc.gc.ca/aahc-asc/media/advisories-avis/_2013/2013_13-eng.php)). What follows are dining tips to help the elderly avoid food-borne illness, to wit: “Avoid non-dried deli meats, such as bologna, roast beef, and turkey breast unless they are fully cooked. Avoid hot dogs straight out of the package. Make sure to cook hot dogs until they are steaming hot before eating them. Don’t eat raw or undercooked meat, poultry, fish or seafood. Avoid refrigerated smoked fish or seafood. Avoid unpasteurized juice,

cider and milk. Avoid all soft and semi-soft cheeses made from raw or unpasteurized milk. Avoid refrigerated pâtés and meat spreads. Avoid uncooked foods made from raw or unpasteurized eggs. Avoid raw sprouts such as alfalfa and mung beans.”

**Vaccine safety:** There is no “high quality evidence” to support parent safety concerns that children’s vaccines can be “linked to autoimmune diseases, asthma, hypersensitivity, seizures, child developmental disorders, learning disorders or developmental disorders, or attention deficit or disruptive behavior disorders,” according to a review conducted by the United States Institute of Medicine. Nor is there any evidence that the immunization schedule now being used to vaccinate children against 14 pathogens poses a hazard, although the schedule is not re-evaluated when a new vaccine is added, an institute panel states in *Childhood Immunization Schedule and Safety: Stakeholder Concerns, Scientific Evidence, and Future Studies* ([www.iom.edu/Reports/2013/The-Childhood-Immunization-Schedule-and-Safety.aspx](http://www.iom.edu/Reports/2013/The-Childhood-Immunization-Schedule-and-Safety.aspx)). “Thus, key elements of the entire schedule — the number, frequency, timing, order, and age at administration of vaccines have not been systematically examined in research studies.” As well, the committee noted there’s some uncertainty over whether all possible health outcomes and safety concerns surrounding vaccines have been studied and whether etiologies of the immunological, neurologic and development problems linked to vaccination are “well understood.”

**Heart challenges for Aboriginal patients:** First Nations people are more frequently diagnosed with having suffered heart attacks than non-Aboriginal peoples and are more likely to be admitted to an acute care hospital for a heart attack but less likely to receive cardiac procedures, according to the

Canadian Institute for Health Information (CIHI). Inuit peoples are less likely to be admitted to an acute care hospital but when they are, receive cardiac procedures at a rate similar to that of non-Aboriginal peoples, CIHI states in a report, *Hospital Care for Heart Attacks Among First Nations, Inuit and Métis* ([https://secure.cihi.ca/free\\_products/HeartAttacksFirstNationsEn-Web.pdf](https://secure.cihi.ca/free_products/HeartAttacksFirstNationsEn-Web.pdf)). But there is little difference in ultimate health outcomes between population groups. First Nations people “tend to present at hospital with more comorbid conditions, yet they are less likely to undergo coronary angiography and revascularization procedures (in particular percutaneous coronary intervention) during their episode of care, even after controlling for factors such as age, sex, comorbidities and urban/rural residence. However, despite higher rates of heart attacks and comorbidities and lower rates of cardiac procedures, hospital outcomes for heart attack patients, such as 30-day in-hospital mortality, are similar for patients from high-First Nations and low-Aboriginal areas.”

**Recession-free spending:** The more than \$200.5 billion that Canada spent on health care in 2011 generated a direct benefit to the economy of \$119.8 billion in the form of salaries and benefits for 1.6 million health workers and “an indirect economic footprint” of \$43.5 billion in the form of jobs for other workers in physician’s offices, banks and the oil and gas industry, according to the Conference Board of Canada. In total, “in 2011, health care delivery in Canada contributed \$163.4 billion to the domestic GDP [gross domestic product], which represents 10.1 per cent of national GDP,” states the study, *Health Care in Canada: An Economic Growth Engine* ([www.conferenceboard.ca/e-library/abstract.aspx?did=5253](http://www.conferenceboard.ca/e-library/abstract.aspx?did=5253)). Doctors’ offices are credited with contributing \$21.9 billion, and 180 000 jobs, directly to GDP, and \$3.5 billion and 31 473 jobs, in indirect contributions. The health sector’s indirect contribution to GDP also includes \$2.74 billion as “lessors of real estate” and \$1.74 billion

toward “oil and gas extraction.” The study also notes that “the tremendous size of the health care sector yields one often-overlooked benefit. Unlike most other sectors of the economy, the demand for health care does not fall during a recession.”

**Salt consumption:** Add more beans, peas, nuts, spinach, parsley, bananas, papayas and dates to the grocery list. Adults should consume less than 2000 mg of salt and at least 3510 mg of potassium daily, according to new guidance from the World Health Organization (WHO). “The recommended maximum level of intake of 2 g/day sodium in adults should be adjusted downward based on the energy requirements of children relative to those of adults,” WHO states in the salt guidelines ([http://apps.who.int/iris/bitstream/10665/77985/1/9789241504836\\_eng.pdf](http://apps.who.int/iris/bitstream/10665/77985/1/9789241504836_eng.pdf)). “Addressing the optimal ratio of intake of sodium to potassium was outside the scope of this guideline; however, if an individual consumes sodium at the levels recommended in the WHO guideline on sodium intake, and potassium as recommended in the current guideline, the ratio of sodium to potassium would be approximately one to one, which is considered beneficial for health. However, most populations around the world consume less than the recommended levels of potassium, and consume a ratio of sodium to potassium of two to one or more. The successful implementation of these recommendations would have an important public health impact through reductions in morbidity and mortality, improvement in the quality of life for millions of people, and substantial reductions in health-care costs,” states the potassium guidelines ([http://apps.who.int/iris/bitstream/10665/77986/1/9789241504829\\_eng.pdf](http://apps.who.int/iris/bitstream/10665/77986/1/9789241504829_eng.pdf)).

**Local suicide strategies:** Public health authorities in the United Kingdom should be compelled to develop local suicide prevention plans, a Parliamentary committee urges. With data indicating that the incidence of suicide, particularly among men, is rising as a result of the underperforming economy and one-quarter of local authorities cur-

rently without a local suicide prevention plan, there’s a need to make such strategies mandatory, the All-Party Parliamentary Group for Suicide and Self-Harm Prevention, states in a report, *The Future of Local Suicide Prevention Plans in England* ([www.madeleine-moonmp.com/uploads/bf200e97-2730-2ad4-cd7f-b3817588be6d.pdf](http://www.madeleine-moonmp.com/uploads/bf200e97-2730-2ad4-cd7f-b3817588be6d.pdf)). The future “of local suicide prevention plans through this period of transition depend upon several inter-connected factors; leadership and local champions, identification of suicide prevention as a priority, availability of resources and the long-term survival of suicide prevention groups,” the report states. “The future of local suicide prevention plans is fragile; often relying upon the commitment of dedicated individuals. The fact that local suicide prevention plans are not a statutory requirement of the new national suicide prevention strategy is a major barrier to their survival.”

**Creative writing workshops:** *CMAJ* Deputy Editor (Analysis and Humanities) Barbara Sibbald has been named recipient of the Barbara Moon editorial fellowship for 2013. Sponsored by the Moon estate and the Faculty of Medicine at the University of Toronto in Ontario, the fellowship will see Sibbald established as the Moon-Ars Medica Editor in Residence at Massey College from September through December. She will offer 12 “storytelling” workshops to 12 students selected from 11 health disciplines at the university, including dentistry, medical radiation science, medicine, nursing, occupational therapy, pharmacy, physiotherapy, physician assistants, and social work speech pathology. Guidelines for enrolment in the workshop can be found at: <http://health-humanities.com/blog/2013/01/29/773/>. The application deadline is May 31. Sibbald is the author of two novels, *The Book of Love: Guidance in Affairs of the Heart* and *Regarding Wanda*, which was shortlisted for the Ottawa Book Award. — Wayne Kondro, *CMAJ*

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