



Cardiovascular imaging techniques

I read with interest Esteban Escolar and colleagues' article on new tomographic cardiovascular imaging techniques.¹ In my opinion, the greatest diagnostic advantage of multiple-slice spiral computed tomography (CT) angiography is in investigations of patients at high risk of coronary artery disease, contrary to the view of the authors. They do not point out the excessive radiation dosage to which the patient is exposed by multiple-slice spiral CT angiography: a scan requires a minimum of 850 mA of current and the radiation dose varies from 18 mSv to 22 mSv.² Are we sure that conventional noninvasive cardiac tests (such as dobutamine stress echography) are not adequate to identify myocardial ischemia in patients at low risk of coronary artery disease? What are the advantages of using coronary CT angiography for such patients, usually aged 45 years or younger, and exposing them to excessive radiation?

Massimo De Filippo
Maurizio Zompatori
 Department of Clinical Science
 Section of Radiological Science
 University of Parma
 Parma, Italy

REFERENCES

1. Escolar E, Weigold G, Fuisz A, et al. New imaging techniques for diagnosing coronary artery disease. *CMAJ* 2006;174(4):487-95.
2. Budoff MJ, Cohen MC, Garcia MJ, et al. ACCF/AHA clinical competence statement on cardiac imaging

with computed tomography and magnetic resonance. *Circulation* 2005;112(4):598-617.

DOI:10.1503/cmaj.1060155

Industrial health research in Canada

In his commentary on the pharmaceutical industry, Henry Mintzberg recommends several measures that are already in place in Canada.¹ He recommends firmer regulation of pricing, but Canada is unique in that it has 2 levels of price control, at the federal and provincial levels. He also recommends independent clearing houses for information on health products, but Canada already has a plethora of these at the federal and provincial levels, in addition to scientific bodies and journals. In addition, he suggests that direct-to-consumer advertising should be stopped, but it is currently forbidden in Canada.

A more important issue, in my opinion, is the unimpressive condition of industrial health research in Canada. Although we have the third-largest number of biotechnology companies in the world after the United States and the United Kingdom, our country is at the bottom of the Organisation for Economic Co-operation and Development's ranking for industrial health research and development.

Unfortunately, Canadian discoveries are often developed elsewhere. Instead of blaming the pharmaceutical industry for developing and commercializing health products discovered by biotechnology companies, we should establish conditions that will convince them to do this work in Canada. Instead of finding fault with intellectual property regulations as they apply to novel health products, we should see that they are strengthened in Canada. Instead of taking issue with the pharmaceutical industry's research priorities (saying, for example, that industry should study the causes of breast cancer and not its cures), we should make sure that the environment in Canada encourages industrial research and de-

velopment. Instead of lamenting the increasing numbers of health researchers in industry, we should boost the inappropriately small number of people doing industrial health research in Canada.

Mintzberg is world-renowned for his studies in management and strategic planning. He should now focus on developing a genuine pharmaceutical strategy for Canada: this must be a priority for our health care delivery system.

Yves Morin
 Chair
 Rx&D Health Research Foundation
 Board
 Québec, Que.

REFERENCE

1. Mintzberg H. Patent nonsense: Evidence tells of an industry out of social control. *CMAJ* 2006;175(4):374-6.

DOI:10.1503/cmaj.1060190

[The author responds:]

Yves Morin's comments in response to my *CMAJ* article¹ are true and not true. We control pharmaceutical prices, but do we do so adequately? We control the content of advertising, but certainly not the promotion of brand names. In any event, I was writing about the problem in general, because *CMAJ* is a respected journal outside Canada as well as within this country. With this in mind, my concern in the article was with abuses in the pharmaceutical industry, not with how we as Canadians can cash in on them.

Henry Mintzberg
 Cleghorn Professor of Management
 Studies
 McGill University
 Montréal, Que.

REFERENCE

1. Mintzberg H. Patent nonsense: Evidence tells of an industry out of social control. *CMAJ* 2006;175(4):374-6.

DOI:10.1503/cmaj.1060235