

Canadian Institute for Health Information (CIHI) in December show that the number of physicians dropped to 54 958 in 1996 from 55 006 in 1995. The decrease is consistent with declines that occurred in 1994 and 1995. (The total includes only active civilian physicians. Medical students, residents and retired and military physicians are not included.) Although the number of physicians dropped, there were 350 more specialists in Canada in 1996 than in 1995; the 26 737 specialists practising in 1996 accounted for 49% of the total. The 51%-49% split with family physicians has remained relatively constant for the last 20 years.

CIHI also reported that the national physician–patient ratio moved from 1:542 in 1995 to 1:548 in 1996; this compares with ratios of 1:395 in the US and 1:554 in the United Kingdom.

Newfoundland's unending attempts to solve MD shortages

Memorial University's Faculty of Medicine takes the problems of physician shortages in rural areas seriously, because it has sponsored annual rural health forums in each of the past 7 years in an attempt to find solutions.

Many of the issues discussed at Rural Health Forum '97 this fall were familiar, but some new initiatives were unveiled to deal with the ongoing problem of physician recruitment and retention. For instance, a new program to assess and upgrade family physicians was announced by the province's minister of health, and in the past year the province has increased salaries for rural doctors by 20% to 50%. Still, isolated areas continue to face severe shortages.

"While money is important, it's only part of the issue," said Joan Marie Aylward, Newfoundland's minister of health. "We have grave difficulty attracting sole practitioners and we have to build models of care that cluster

professionals in practice centres."

She said pilot projects to establish primary care service and teaching units are being put in place in Twillingate and Port aux Basques, and services at the existing unit in Happy Valley-Goose Bay are being enhanced.

Although Rural Health Forum '97 allowed for discussion of problems and solutions in rural medicine, the men and women who actually do the job had issues of their own to discuss. When the forum ended, rural family medicine preceptors spent a long

AMA reveals inflation's bite

The Alberta Medical Association (AMA) says that not only are the province's physicians being "devalued" by low fees for physician services but also inflation is eating away at their income. Fees in Alberta have fallen 5% since 1993–94 and the AMA claims that the "significant gap" between fees and the cost of living continues to grow. In preparing for fee negotiations, the AMA

recently produced a detailed list of the 100 services physicians provide most frequently. It compares current fees with those of 10 years ago, and factors in annual adjustments for inflation. The fee information was released as part of the AMA's Care to know how much doctors are paid? campaign to educate Albertans on how much physicians receive for each service provided.

Service	Jan. '87 fee	Jan. '97 fee	'97 fee if adjusted for inflation
Office visit (family physician)	\$ 21.25	\$ 21.54	\$ 28.24
Chest x-ray	\$ 20.50	\$ 21.64	\$ 27.24
Major consultation (psychiatry)	\$ 98.40	\$108.92	\$130.76
Osteoporosis examination	\$154.00	\$162.19	\$204.64
Cataract removal with			
insertion of lens	\$572.00	\$505.13	\$760.10



McMaster University student Christopher Andrews took this photo of skulls and femurs in Murambi, one of the many sites where genocide occurred in Rwanda in 1994. It is estimated to have claimed 500 000 to 1 million lives. Andrews, who described his chilling visit to Murambi in an Experience article in the Jan. 13, 1998, issue of *CMAJ*, had been completing an elective in nearby Uganda when he visited Rwanda. He says the bodies, bones and body parts that have been gathered in an unfinished school at Murambi offer mute testimony to mass murder.