

Our violent workplaces

I enjoyed Barbara Sibbald's recent article, which reflected efforts to raise our consciousness about violence in the medical workplace, but I noticed an error.

Even though some British Columbia physicians have been reluctant to take training in workplace security against violence, all our psychiatry residents have enthusiastically participated in annual training workshops since these were first offered in 1992. These residents now have the most extensive training in this area, but most psychiatrists in our teaching hospitals have taken 1-day workshops, which were first offered in 1995. In June 1996 emergency physicians at the Vancouver General and University of British Columbia hospitals began to attend such workshops.

Although denial may be the psychological defence of choice for some physicians when it comes to workplace violence, our experience suggests that physicians, especially younger ones, are becoming keenly involved in aggression management training. The time may be ripe for provincial medical associations and the the CMA to support such training for their members. Stay safe.

Joseph A. Noone

Chair, Workplace Violence Prevention Committee

Vancouver Hospital & Health Science Centre

Chair, Committee on Violence Council of Health Prevention, BCMA

Reference

 Sibbald B. Physician, protect thyself. CMAJ 1998;159(8):987-9.

Ciguatera fish poisoning

S ince my retirement 15 years ago, I have been running the Mississauga Maritime Mobile Net for small vessels at sea. Over that period, I have provided assistance by short-wave radio in 2 cases of ciguatera fish poisoning in the Polynesias. In early March of this year a report was transmitted over the net of 9 crew members of a Philippine merchant ship who were transferred to hospital in the Virgin Islands, apparently suffering from ciguatera poisoning after eating barracuda.

It is said that people from regions where this type of poisoning is common use dogs as "taste testers." The general consensus among sailors is to avoid reef-feeding fish and the large fish who prey upon them. Many find that surface-feeding fish are safe.

Our maritime mobile net operates at 14.121 MHz at 7:45 Eastern Standard Time each morning and averages about 7000 vessel check-ins each year. We are linked to the Transatlantic Net in Barbados, the Triple D Net in Victoria and the Triple WWW Net in Cornwall, UK, and we can link to specialty clinics in the Toronto area if needed. Your article¹ has made our wide-coverage net aware of the situation. Many thanks from our mariners.

Ernest G. Meyer, MD

Mississauga Maritime Mobile Net Mississauga, Ont.

Reference

 Caplan CE. Ciguatera fish poisoning. CMAJ 1998;159(11):1394.

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Dr. Caplan's article on ciguatera fish poisoning¹ misses several important points. First, the distribution of the poisoned fish is very spotty. Fish from one side of a coral reef can be harmless and fish from the other side deadly. To eat "mystery" fish from a coral reef is to play Russian roulette. Always follow local wisdom when eating any fish in the Caribbean. Also remember that the fresher the fish, the more deadly it is!

Death from ciguatera poisoning can result from respiratory failure. I know of one commercial fisherman who was on a respirator for 6 weeks while he recovered. Many cases go undiagnosed and, because of the late bizarre symptoms, often end up being referred to psychiatric care. A colorimetric test is being developed (with my involvement) to verify the poison, since otherwise there is no proof of diagnosis.

Raymond O. Heimbecker, MD Hope Town, Bahamas

Reference

 Caplan CE. Ciguatera fish poisoning. CMAJ 1998;159(11):1394.

I was intrigued by your article on ciguatera fish poisoning. I have had a home in the Caribbean for many years, and the locals in Grand Cayman have told me that they lay a fish down on the sand to see if ants are attracted to it. If the ants are attracted, the fish is considered safe to eat; if they stay away, the locals worry about possible ciguatera poisoning.

A.M. Irving, MB, BS, BSc Pincher Creek, Alta.

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 Caplan CE. Ciguatera fish poisoning. CMAJ 1998;159(11):1394.

Your very informative article on ciguatera poisoning¹ mentions that new methods for detection are under investigation. In fact a test kit recently developed at the University of Hawaii is commercially available under the name Cigua-Check from our company, Oceanit Test Systems, Inc. The technical details of the kit have recently been published (7 Assoc Off Anal Chem



1998;81:727-35). More information can be obtained at our Web site (www .oceanit.com).

Joanne Ebesu, PhD

Research Director Oceanit Test Systems, Inc. Honolulu, Hawaii

Reference

 Caplan CE. Ciguatera fish poisoning. CMAJ 1998;159(11):1394.

They should be ashamed

The spectacle of right-wing Americans doing battle with the editor of a medical journal editor is disheartening to those who espouse editorial independence.¹ My concern is with a right-wing body, the American Medical

Association, and its summary dismissal of Dr. George Lundberg, the respected and long-serving editor of *JAMA*.

During his 17 years with that journal, Lundberg helped it become a first-rank scientific publication. He rigorously adhered to a policy of editorial independence,² a principle endorsed on several occasions by the AMA Board of Trustees.^{3,4} Yet the publication of an unsolicited, peer-reviewed paper,⁵ tangentially relevant to the Clinton affair, was sufficient cause for the AMA's conservative ideologues to dismiss this accomplished editor. They should be ashamed.

S.E.D. Shortt, MD, PhD

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References

- Hoey J, Caplan CE, Elmslie T, Flegel KM, Joseph KS, Palepu A, et al. Science, sex and semantics: the firing of George Lundberg. CMAJ 1999;160(4):507-8.
- Lundberg GD. Editorial freedom and integrity. 7AMA 1988;281:2563.
- American Medical Association. JAMA editorial freedom. Board resolution 904, I-92, adopted by House of Delegates June 1993.
- Lundberg GD. House of Delegates reaffirms JAMA's editorial independence. JAMA 1993; 270:1248-9.
- 5. Sanders SA, Reinisch JM. Would you say you had sex if ... *JAMA* 1999;281:275-7.

Reproducibility of results with homeopathic remedies

I have been told by several physicians that the question of whether homeopathy works has now been settled — in favour of homeopathy — by a meta-analysis.¹

I had thought that a major problem