

tronic publishing bearing down upon them. Despite the parody in Lindsay's letter, the vision of a public informed and active in health matters is a good one. Lindsay and Tagg neglect the key point in my article: there is a terrible inequality in medical knowledge around the world, and we need to find innovative ways to remedy this in the interests of global peace and justice.

Peter A. Singer

University of Toronto Joint Centre for Bioethics
Toronto, Ont.

Reference

1. Singer PA. Medical journals are dead. Long live medical journals. *CMAJ* 2000;162(4):517-8.

Do the right thing

Charlotte Gray's report on Canada's hospital emergency department crisis¹ showed that we must take off our blinkers. As Gray reported, this was done in major hospitals in Alberta and Saskatchewan, where staff anticipated the arrival of the annual flu season in order to avoid emergency department overcrowding. Far too often, planning like this is anathema to solo practitioners, both specialists and FPs, who act as if they are running a corner store.

Surely medicine is not only a business but also a public service. That, and the responsibility to care for individual patients, should lead to 24/7 service. Why is this not the universal standard? Why is it not a moral as well as a legal requirement of medical practice? The hospital emergency department is not a substitute for continuity of practice, and it is the next best thing to a cop-out to use emergency departments as an alternative to the doctor's office.

As a pathologist, I was part of a group that provided such service at night and on weekends. I am sure that evening and weekend coverage by a physician as part of a formal or informal group is the least the public can ex-

pect. Being on call once in 7 nights or weekends is all that would be required in most cases.

Communication systems can now be used to route calls to the person on call without redialing, to provide at least a triage consultation. Medical bodies, such as the provincial colleges, should consider making such coverage obligatory and subject to disciplinary action. Come on, colleagues. Let's do the right thing for our patients!

J.V. Frei

Pathologist (retired)
Toronto, Ont.

Reference

1. Gray C. Hospital crisis? What crisis? *CMAJ* 2000;162(7):1043.

We protest!

You recently published an article regarding Paras Naik and reported that "at age 22 he will become the youngest Canadian to hold a medical degree."¹

I wish to report that Pamela Veale graduated from the University of Calgary Faculty of Medicine in 1993 at the age of 21. I am certain of these facts because I was a classmate of hers and am now her husband. By the way, another classmate of mine, Earl Campbell, obtained his MD at age 22.

Alan C. Tiessen

Anesthesiologist
Calgary, Alta.

Reference

1. Sullivan P. Paras Naik, MD: how Scotland produced Canada's youngest physician. *CMAJ* 2000;162(6):870.

Paras Naik is a remarkable young man but he is not the youngest Canadian to hold a medical degree.¹ He may hold that honour in the year 2000, but not historically.

My father, Douglas J. Patchell, graduated from the University of

Toronto in 1946 at age 20 and began practising in Hillsdale, Ont., at age 21. Bette Stephenson, a past president of the CMA, also graduated from medical school at age 20, if my memory serves.

Paul Patchell

Coldwater, Ont.

Reference

1. Sullivan P. Paras Naik, MD: how Scotland produced Canada's youngest physician. *CMAJ* 2000;162(6):870.

As I am rapidly sliding into advancing middle age, I must protest about an issue dear to my heart. I graduated from the University of Toronto in 1968 at age 21, 4 months shy of my 22nd birthday. I can't claim to be the youngest U of T graduate, but I'm sure there were also others younger than 22. So I must take exception to hearing Paras Naik¹ described as Canada's youngest doctor, because he isn't!

Compulsively yours,

Irena C. Szparaga

Family physician
Weston, Ont.

Reference

1. Sullivan P. Paras Naik, MD: how Scotland produced Canada's youngest physician. *CMAJ* 2000;162(6):870.

[The news and features editor responds:]

The article was meant to refer to Paras Naik's status in the year 2000 only. We were well aware, for instance, that during the war years the compressed medical curriculum meant that Canada was producing many doctors who were barely out of their teens. However, these letters did raise another question among *CMAJ's* aging editors. Does anyone know how old Canada's oldest medical graduate was when he or she graduated?

Patrick Sullivan