Screening program lets Alberta test newborns' hearing

Alberta is spending $1 million to implement a province-wide hearing screening program this fall. "For the first time, there is large-scale recognition that this is an important problem," says Dr. Joseph Dort, associate professor of surgery at the University of Calgary, who created the Universal Newborn Hearing Program.

About 6 of every 1000 infants born in North America have some form of hearing loss, which means that more than 2000 Canadian babies are born annually with the problem. It can range from fluid in the ear, which disappears quickly, to severe deafness. About 50% of these infants experience permanent hearing loss, says Dort, but only about one-third of these cases are detected.

Dort says hearing loss is often a "silent problem," and solid research data have only recently become available. Dort says the problem has been neglected in Canada, but about 22 American states now have universal screening programs in place. Research already indicates that if hearing loss is treated before babies reach 6 months of age, their speech and language often develop normally. Currently, says Dort, most of the children he sees are older than 2.

Frontlines photo

Dr. Joseph Dort looks on as Dr. David Brown performs a hearing test on Hayden Weber, who is being held by his mother, Denise.

Epidemiologic management of Dort's project is more daunting than the medical challenges. He is now working on data management and the logistics of implementing the program throughout Alberta's health districts, which have differing needs.

His initial goal is to test 85% of the province's newborns. The test takes only a few minutes and can be administered by nurses, audiologists and trained volunteers. Positive tests will be followed up with repeat tests, and auditory brain stem response tests if needed. — *Heather Kent*, Vancouver

New Brunswick's limits on physician resources ruled constitutional

It took 7 years for New Brunswick doctors to get their day in court but only 10 days for a judge to determine that the provincial government did not infringe upon the constitutional rights of physicians when it introduced a physicians' resource management plan in 1992. Just 10 days after hearing the evidence — and 2 months before a decision was expected — Court of Queen's Bench Justice Hugh McLellan ruled that the "legislature may on its own initiative take drastic action to change medicare."

The Professional Association of Residents in the Maritime Provinces (PARI-MP) and 4 New Brunswick physicians had accused the government of violating Canada's Charter of Rights and Freedoms in 4 ways: restricting doctors' mobility, infringing on the concept of liberty as described in the charter, not allowing for free association and discriminating on the basis of sex.

Under the province's 1992 physician resource plan, New Brunswick was divided into 7 health regions, each with a cap on the number of doctors allowed to practise (see *CMAJ* 2000;162[8]:1186). Since it was introduced, the province has experienced one of Canada's most severe physician shortages. At present there are about 50 unfilled positions; simply to reach the national per capita average, New Brunswick would need to attract another 300 doctors.

PARI-MP has already announced that it will appeal McLellan's ruling. "It's a matter of fighting legislation that we feel is unjust," says PARI-MP Executive Director Sandy Carew Flemming. "We'll take it as far as we can [because] this has such national significance for all physicians in practice."

Although McLellan did find that the New Brunswick government's plan "has sharply reduced the rate of growth of the number of physicians in the province and makes it very difficult for hospitals to recruit physicians in new specialties," he concluded that there were no charter violations.

Carew Flemming says the judge may have misunderstood the issue of mobility, the primary concern. "We feel the judge missed the point. It wasn't new physicians inside New Brunswick versus new physicians outside New Brunswick. The discrimination exists between all new physicians and those physicians currently practising in New Brunswick. He's comparing the wrong groups."

Clearly, though, the judge was saying that the government has the right to make policy and implement programs, even though they may be restrictive. "Judges," McLellan noted in his 18-page written decision, "do not make the difficult choices on taxation levels, public spending, public policies or legal reform. Those matters are all within the respective jurisdictions of the legislature and Parliament."— *Donalee Moulton*, Halifax