

Brazilian editor visits counterparts at CMAJ

Dr. Alfredo J. Mansur, editor of *Arquivos Brasileiros de Cardiologia* (*Brazilian Archives of Cardiology*), recently spent a week at CMAJ, where he participated in all aspects of the editorial process. He talked with CMAJ's Patrick Sullivan about his work and his country.

Why did you decide to visit CMAJ?

Your journal has some very interesting characteristics, such as your bilingual nature and the fact you have a fellowship in medical editing. The Brazilian Society of Cardiology is currently reshaping its journal, so I wanted to learn from your experience. I got in touch with Dr. Hoey, who raised the possibility of a visit — and here I am. He also introduced me to Dr. [Vladimir] Hachinski, the editor of *Stroke*, and I was able to visit his editorial office in London, Ont.

Are there many journals in Brazil?

There are some general journals, and most medical specialties have a journal. The most important ones are in a scientific electronic library at www.scielo.br that gives free access to the full content of articles. My own journal was launched in 1948 and is published monthly. We recently moved to publish articles in both Portuguese and English.

What is the state of health care in Brazil?

There is a public system, involving federal, provincial and municipal policies, as well as a private system that includes

health maintenance organizations. In some areas we have enjoyed success — we recently gained international recognition for the way we have dealt with AIDS. But there is room for improvement in the way health care is delivered. Recently there has been an effort to encourage physicians to work in distant and rural communities that need better care.

I work at the Heart Institute of the Hospital das Clinicas, University of São Paulo Medical School. The institute has around 300 beds, a predominantly full-time clinical staff, and delivers several levels of care — it includes a heart-transplantation program and complex surgery. The hospital pursues excellence in medical care, teaching and research, and is involved in several multicentre trials and research projects. It is a public university hospital that has a ward for private patients.

What is your medical background?

I graduated from University of São Paulo Medical School in 1975. I spent 6 years in medical school, including an internship during the last 2 years. Residency training included 1 year in internal medicine and 2 years in cardiology. Since then I have been working at the University Hospital, where I am director of the General Outpatient Clinic; we see around 3000 patients a month.

What is medical education like in Brazil?

There are around 80 medical schools in



Steven Wharry photo

Dr. Alfredo Mansur: emerging culture, emerging country

Brazil, roughly 30 of which are public. Access is through an entrance examination, and there is very tough competition for positions in the best schools, which are usually the public ones.

What is the payment system like for physicians?

Some doctors work entirely within the public system and receive a salary. Others work entirely in the private system, and others do a mix of both.

What's São Paulo like?

It is a very large city — 12 million inhabitants — that is very cosmopolitan, and very active economically and culturally. It used to be mainly an industrial city, but more recently there has been a trend toward service delivery.

Overall, I am very optimistic about Brazil's future. We are a young and emerging culture in a large country — we are roughly the size of the United States and have around 180 million inhabitants, and we have an active economy. On the one hand we were able to develop high-tech skills in areas such as genetics research and airplane manufacture, but on the other hand there is still poverty and social and regional inequalities, and there is room for improvement in the standard of living. It may be one of our strengths that we are still pushing toward the future, toward solving these problems.

Companies moving to market nicotine's medicinal qualities

Nicotine in a pill? Maybe, but not as a smoking-cessation tool. Today a handful of research companies are looking at nicotine-based pills as a potential therapy for people with Alzheimer's disease, ulcerative colitis and other disorders.

Leading the pack in North America is Targacept, a company founded by the R.J. Reynolds Tobacco Company, one of the world's largest cigarette manufacturers. Dr. Geoffrey Dunbar, Targacept's vice-president of clinical development, says their first product, aimed at patients with ulcerative colitis, may be available by 2005.

Dunbar emphasized that the new therapies have nothing to do with tobacco plants, because the nicotine used will be synthetic. Why, then, is R.J. Reynolds involved? Dunbar isn't sure. "R.J. Reynolds spent a lot of money, for whatever reason, in developing this science," he says. — CMAJ