

sionals I would expect a more serious examination of the situation and more enlightened solutions.

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Reference

1. Reasonable control: gun registration in Canada [editorial]. *CMAJ* 2003;168(4):389.

The *CMAJ* editorial on gun registration¹ seems to be based more on emotion than on solid evidence that registering guns has any measurable impact on their misuse.

In the United States, there has been a steady drop in homicide rates following the introduction of laws (in some 34 states) allowing citizens with no criminal record to carry concealed firearms.² An epidemiologic comparison of firearms homicide rates in Canada and US states adjacent to the Canadian border showed no differences in homicide rates outside of large cities, despite a 10-fold greater number of pistols in the US states.³

My understanding of medicine is that any intervention should be based on the results of appropriate controlled experiments and that physicians should be prepared to change their patterns of practice according to the results. The editorial¹ cited no controlled studies, just poor correlational studies, and — as every first-year medical student should know — correlation doesn't equal causation.

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References

1. Reasonable control: gun registration in Canada [editorial]. *CMAJ* 2003;168(4):389.
2. Lott J Jr. *More guns, less crime. Understanding crime and gun control laws*. Chicago: University of Chicago Press; 2000.
3. Centerwall B. Homicide and the prevalence of handguns: Canada and the United States, 1976 to 1980. *Am J Epidemiol* 1991;134(11):1245-65.

If physicians are to establish any credibility on "gun issues," as it appears *CMAJ*'s editors would like to do,¹ we'd better bring some facts and objectivity to the table. Otherwise we're toying with

patients' lives just to flatter our own egos and to further political agendas that may be dangerously counterproductive.

Terrorism has replaced childhood accidents and criminal homicide as the newest justification for gun control laws, yet even combining these causes of death with suicide, the tally is dwarfed by the number of innocent lives lost to genocide, the murder of individuals by their own police and military forces.

Genocide kills 5 to 10 times more innocents than the criminal use of firearms,² and genocides have always been preceded by the seemingly innocuous step of gun registration.³ Against all the carnage caused by genocide, no offsetting beneficial effect of gun control laws has been documented. In fact, Lott⁴ has pointed out some compelling evidence that gun control laws may actually increase domestic crime rates, and others support that conclusion.⁵

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References

1. Reasonable control: gun registration in Canada [editorial]. *CMAJ* 2003;168(4):389.
2. Rummel RJ. Freedom, democracy, peace, power, democide, and war [personal Web site]. Available: www.hawaii.edu/powerkills/welcome.html (accessed 2003 Apr 15).
3. Simkin J, Zelman AS, Rice AM. *Letbal laws: "gun control" is the key to genocide*. Hartford (WI): Jews for the Preservation of Firearms Ownership; 1994.
4. Lott J Jr. *More guns, less crime. Understanding crime and gun control laws*. Chicago: University of Chicago Press; 2000.
5. Kopel DB. Peril or protection? The risks and benefits of handgun prohibition. *Saint Louis Univ Public Law Rev* 1993;12:285. Available: www.constitution.org/2ll/2ndschol/63perilo.htm (accessed 2003 Apr 15).

Congratulations on your cogent and reasonable defence of public health as it pertains to the issue of gun control in Canada.¹ Surely reasonable people will agree that to argue otherwise or — worse — to act otherwise would endanger the life of every citizen across this land.

As an emergency physician who did his specialty training in the United States (Los Angeles) and who, over the course of 15 years in that country, was chief of emergency medical services for 2 major cities (Los Angeles and Pittsburgh),

I can readily attest to the devastating effects of unfettered gun ownership.

Surely our country, with its contrasting values and social forces, will not go the way of the society south of the border, where the individual's right to life and health is jeopardized by unrestricted gun ownership.

Ronald D. Stewart

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Reference

1. Reasonable control: gun registration in Canada [editorial]. *CMAJ* 2003;168(4):389.

Corrections

The National Association of Pharmacy Regulatory Authorities is a Canadian organization. Because of an editing error, incorrect information appeared in a recent article.¹

Reference

1. Whittham B. Dispute over Canada's online pharmacies heating up. *CMAJ* 2003;168(6):759.

In Table 3 of the Apr. 1, 2003, article on diabetic ketoacidosis (DKA) and the hyperglycemic hyperosmolar state (HHS),¹ the line for growth hormone should have specified normal ranges for men (< 5 mg/L) and women (< 10 mg/L). (Separate values for men and women of the mean growth hormone levels in DKA and HHS are not included in the table because this information was not available in the original study that reported them.²)

Also, the last line of Table 3 should have shown values for norepinephrine, as follows: normal range 0.65–4.14 nmol/L, mean value in DKA 6.96 (standard deviation [SD] 2.36) nmol/L and mean value in HHS 1.66 (SD 0.53) nmol/L.

References

1. Chiasson JL, Aris-Jilwan N, Bélanger R, Bertrand S, Beauregard H, Ékoé JM, et al. Diagnosis and treatment of diabetic ketoacidosis and the hyperglycemic hyperosmolar state. *CMAJ* 2003;168(7):859-66.
2. Ennis ED, Stahl E, Kreisberg RA. The hyperosmolar hyperglycemic syndrome. *Diabetes Rev* 1994;2:115-26.