mations. We seldom use intra-arterial thrombolysis for acute ischemic stroke and do not perform angioplasty and stenting for carotid or vertebrobasilar occlusive disease, because of persisting uncertainty about the efficacy of these interventions.

We hope that this letter helps to clarify the role that our radiologists play in the management of stroke patients.

## Gordon J. Gubitz Stephen J. Phillips

Division of Neurology Department of Medicine Dalhousie University and Queen Elizabeth II Health Sciences Centre Halifax, NS

#### Reference

 Phillips SJ, Eskes GA, Gubitz GJ, on behalf of the Queen Elizabeth II Health Sciences Centre Acute Stroke Team. Description and evaluation of an acute stroke unit. CMAJ 2002;167(6):655-60.

# Pharmacists helping physicians

he report by Catherine Lemière and colleagues1 raising concerns about Health Canada's approval of a new indication for Advair (a combination of fluticasone propionate and salmeterol) contains the following important sentence: "In a health care system that is already struggling with the increasing cost of medication, it is our responsibility to avoid prescribing expensive drugs without evidence of their superiority over the standard treatment." If every physician hung that sentence on his or her wall and looked at it before pulling out a prescription pad, would prescribing behaviour necessarily change?

I believe that doctors in practice should not be getting all or most of their information from drug manufacturers and their representatives. There is an opportunity for community pharmacists to take a much greater role in training groups of physicians about the appropriate use of new drugs and in discussing issues such as determining when old drugs should be "retired."

Most physicians have poor knowledge of the costs of the drugs they prescribe, and pharmacists could be a valuable resource for more information in this area as well. This enhanced role for community pharmacists has already been suggested in some models of primary care reform.<sup>2</sup>

#### **Denise Bowes**

Family Physician (Retired) Athens, Ont.

#### References

- Lemière C, Becker A, Boulet LP, Bowie D, Cartier A, Cockroft D, et al, for the Asthma Committee of the Canadian Thoracic Society. Should combination therapy with inhaled corticosteroids and long-acting β2-agoists be prescribed as initial maintenance treatment for asthma? [editoria] CMAJ 2002;167(9):1008-9.
- Rachlis M, Kushner C. Strong medicine: how to save Canada's health care system. Toronto: Harper Collins Canada; 1995.

# Dr. Farmer deserved better

I read your recent death notice for Dr. Alfred Farmer<sup>1</sup> with dismay and incredulity. There are no inaccuracies in your report, only regrettable omissions.

"Farm," who graduated from the University of Toronto in 1927, was a founder of plastic surgery in both Canada and the US and a member of the American Association of Plastic Surgery, the oldest organized body of its type in the world. He was also a founding member of the Canadian Society of Plastic Surgeons and is considered the father of Canadian hand surgery — now a sophisticated subspecialty.

As surgeon-in-chief at the Hospital for Sick Children for 10 years, he reorganized the department into the 7 divisions we are familiar with today. In World War II he was chief surgical consultant with the Royal Canadian Air Force. His work was recognized by his appointment to the Order of Canada and as an honorary surgeon to the Queen. He was also awarded Member of the Order of the British Empire.

As must be evident, your brief paragraph concerning this great man was regrettably inadequate, and I cannot allow it to pass without comment.

### **Barry Shandling**

Professor of Surgery (Emeritus) University of Toronto Toronto, Ont.

#### Reference

1. Deaths. CMAJ 2002;167(11):1312.

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