

## News @ a glance

**Vaccine centre:** The new International Vaccine Centre (InterVac) at the University of Saskatchewan will develop and test vaccines that protect Canadians from emerging diseases, including avian influenza, West Nile virus and SARS. The federal government announced in March it will invest \$24 million over 4 years to establish InterVac; the Canada Foundation for Innovation has already contributed \$19.2 million. The \$61.8 million InterVac facility, which is due to open in 2009, is part of the university's nonprofit Vaccine and Infectious Disease Organization.

**Polio reinfection:** Indonesia is the 16th previously polio-free country to report new infections in the past 2 years, reports the World Health Organization. Global eradication efforts have reduced the number of polio cases from 350 000 annually in 1988, to 1267 cases in 2004, up from 784 the previous year. Most new cases are in Nigeria, where vaccinations were temporarily banned in some areas. A type 1 poliovirus outbreak in Yemen had infected 22 children as of Apr. 29. WHO states that it is concerned that the ongoing outbreak in Africa might lead to outbreaks in more countries in the polio-free Horn of Africa and the Middle East. There is an urgent need for US\$50 million by July to finance intensive immunizations campaigns. In May, 6 million doses of vaccine were shipped to Yemen. WHO will immunize all children under age 5.



CDC

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**Pollution kills:** An estimated 5900 Canadians in 8 major cities die every year because of air pollution, reports Health Canada. The figure is based on health studies and statistical models correlating air pollution and mortality data from Quebec City, Montréal, Ottawa, Toronto, Hamilton, Windsor, Calgary and Vancouver. Previously, the federal government estimated the number of deaths related to air pollution at 5000. The higher number corrects a "statistical glitch" that Health Canada researchers and scientists at Johns Hopkins University in the United States discovered when reviewing the data, Health Canada said in a news release. Children, seniors and people suffering from asthma and other cardio-respiratory problems are most at risk.

**Tsunami lessons:** The World Health Organization should coordinate the response to future natural disasters, concluded attendees at an international conference. Some 400 health practitioners from more than 130 countries, organizations and the military met in Phuket, Thailand May 4–6 to discuss the response to the Tsunami. They called on WHO to play a stronger role, including directing volunteer doctors and nurses, distributing donated equipment and medicines, and monitoring the health of affected communities. WHO should also help military and civilian agencies work together and set up a pool of forensic pathologists. "The



Art Explosion

world must be prepared to deal more effectively with psychological trauma, the health needs of women and mass fatalities," concluded Dr. David Nabarro, Special Representative of the WHO Director-General. The recommendations were scheduled for consideration at the World Health Assembly in Geneva in late May.

**Abortion coverage challenged:** Health Minister Ujjal Dosanjh has formally invoked a dispute resolution mechanism set up by federal and provincial health ministers and is taking New Brunswick to task for not funding abortion services at a private clinic. Doctors at the clinic perform about 600 abortions annually. Dosanjh wrote to New Brunswick Health Minister Elvy Robichaud in late April, saying he believes the province is violating the Canada Health Act. If the dispute mechanism comes to that conclusion, Ottawa could penalize the province by withholding federal transfer payments. Dosanjh also wrote to health ministers in Nova Scotia, Quebec, Alberta and British Columbia asking them to clarify the status of private diagnostic clinics operating in their provinces. — Compiled by *Laura Eggertson, CMAJ*