pre-qualification approval, which will ease its acceptance into many countries. — Ann Silversides, Toronto

Corruption in health care: Theft, bribery and extortion robs millions of health care dollars each year while deaths are caused by counterfeit drug use, drug-resistant disease and inability to pay bribes, finds the Global Corruption Report 2006. Transparency International (www.transparency.org), the German anticorruption body that released the report, states that each year at least 5% of the US\$3 trillion spent on health services worldwide are lost to corruption. In countries such as Ghana, surveys have found that up to 80% of nonsalary funds do not reach health facilities, with most leakage occurring between central government and the district. While in other countries such as Azerbaijan, informal payments from patients to doctors account for more than 80% of total health expenditure. The report also questions other spheres of influence such as pharmaceutical company lobbyists' impact on policy and doctors' decision-making. Measures to prevent corruption are possible: tighter control measures in the UK have saved US\$300 million since 1999 by preventing fraud and pricing gambits. — Sally Murray, Ottawa

DOI:10.1503/cmaj.060333

## **PULSE**

## **Happy doctors? Satisfaction** with professional life

**♦** he results of the 2004 CFPC/ CMA/RCPSC National Physician Survey regarding respondents' satisfaction with their current professional life held some surprises. For example, geriatricians surveyed were among the top 10 most satisfied specialist groups, and diagnostic radiologists were among the bottom 10 (Fig. 1). Still, many popular conceptions were found to be true: specialties that many might consider to have better lifestyles (i.e., better work hours and lighter on-call schedules), such as dermatology, physiatry and psychiatry,

were near the top of the list, whereas specialties with poorer lifestyles, such as family medicine and general surgery, were closer to the bottom.

These survey results might interest medical students as they try to decide which career path to follow. Furthermore, it might be worthwhile for the specialties closer to the bottom of the list to examine more closely the reasons for the lower satisfaction rates within their fields.

Despite previous reports that physicians are an unhappy group (CMAJ 2003;168[6]751-2), the results show that the majority of Canada's physicians are satisfied to some degree with their current professional life, with as many as 65.5% of physicians in the lowest ranked specialty (biochemistry) stating that they were at least "somewhat satisfied." — Mark O. Baerlocher, Toronto

DOI:10.1503/cmaj.051405

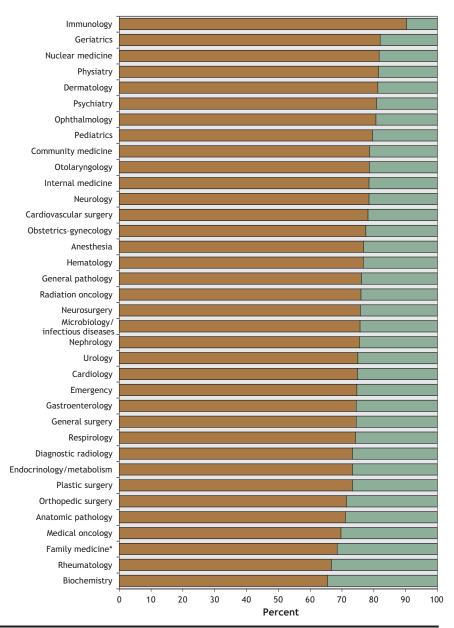


Fig. 1: Degree of satisfaction with current professional life. Brown bars represent physicians who were very or somewhat satisfied; green bars represent those who were neutral about or were somewhat or very dissatisfied with their current professional life. Source: 2004 CFPC/CMA/RCPSC National Physician Survey. \*Includes CCFP and non-CCFP family physicians.