

of the Canadian Association of Transplantation, which represents front-line health care professionals like nurses and organ procurement coordinators.

There must be far more physician awareness of their role in organ donation, adds Dave Smith, president of the Canadian Transplant Association, which represents organ recipients. “Are doctors saying: ‘you know what, we have an organ donor here,’ or do they just steer clear of it? Why don’t we make ‘the ask’ a mandatory thing in a doctor’s routine?” — Wayne Kondro, *CMAJ*

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## Cardiologist’s privileges restored after 4 years

**A** Nova Scotia bylaw ensures that when a physician’s privileges are suddenly varied the review process takes no more than 30 days. For Halifax cardiologist Dr. Gabrielle Horne that process has taken 4 long years.

On Oct. 8, 2006, the Capital Health board of directors reinstated all Horne’s privileges, which were suspended in October 2002 amid accusations that she endangered patients, conducted unethical research and failed to be collegial. That reinstatement, says Acting CEO John Malcom, turned solely on a procedural issue.

The 8-member board determined that Capital Health jumped the gun in using the emergency privileges variation in the provincial Medical Staff disciplinary Bylaws.

“The decision reinforces that [district health authorities] must enforce fairly and use procedures effectively,” Malcom notes.

The decision also states that “Dr. Horne has a considerable history of difficult relationships with doctors in a supervisory position to her. Further, the Panel readily accepts that the Administration had reason to ... try to correct Dr. Horne’s behaviour.”

That conclusion is uncalled for, unsupported by evidence, and outside the scope of the board’s decision, say Horne and her lawyer. Ron Pizzo.

The board ended the hearing on the grounds that the largest district health authority on the East Coast had overstepped its bounds and that is all that should have addressed in its decision, says Pizzo.

“The board said there were some problems with collegiality. ... In legal terms, those are gratuitous comments.”

Those comments are especially unfair to Horne, he adds, because she doesn’t get to answer the charges by calling witnesses in a formal hearing.

Horne says she will be taking the health authority to court. “I have to have compensation for what I have been through, and I would like the research project restored,” she says.

She also wants the courts to send a strong message. “You can’t just end a physician’s career with the stroke of a pen and not give them due process,” says Horne. “You can’t hold people hostage for 4 years.”

Horne’s research, which was approved by the QEII ethics board, focused on new ways to repair heart muscle damaged by myocardial infarction. In October 2002, Horne, the assistant professor of medicine and biomedical engineering at Dalhousie University and staff cardiologist at the Queen Elizabeth II Health Sciences Centre (QEII), was accused by a colleague of endangering patients, unethical research and a lack of collegiality.

The QEII responded by blocking her access to patients and charts and she was informed she could not continue with her research project until those concerns were addressed. The source and specifics of those concerns were never publicly revealed.

For her part, the award-winning clinician-researcher is glad the ordeal is almost over. “I’m thrilled that I have my privileges back finally,” she says, “[but] I did not like the way that the board went about it.”

That feeling is shared — vehemently — by the Canadian Association of University Teachers (CAUT), which went so far as to establish an independent inquiry into Horne’s case 2 years ago.

“We are appalled by what the Capital District Health Authority board has done,” says James Turk, CAUT’s executive director. “It’s good news for Dr.



Courtesy G. Horne

Horne wants her day in court.

Horne on the one hand, but rather than apologizing to her and entering into discussions as to how they can compensate her, instead they condemn her.”

As a Dalhousie Clinical Research Scholar, 70% of Horne’s time was protected for research. Despite subsequent clearance from an internal medical committee at the QEII and a signed settlement agreement with the health authority’s former CEO, Horne has not been able to carry out her work since being suspended. She had to shut down her research lab and let her staff go.

Fortunately, says Horne, she has not been alone. “I just would not have my privileges back today if it were not for the work of the medical staff, the university, the faculty association and CAUT.”

In 2004, 120 doctors from Capital Health walked for 15 minutes in the rain to a meeting at Dalhousie University (the health authority would not let them meet in the hospital) to discuss Horne’s situation. That meeting ultimately led to a new medical staff association and a meeting with the minister of health to express concerns about what was happening to the Halifax cardiologist. Staff doctors launched their own investigation and recommended, in December 2005, that Horne regain her full privileges.

For its part, CAUT launched an independent investigation into what it saw as issues of academic freedom and research interference related to Horne. — Donalee Moulton, Halifax

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