

Cochrane also plans to rev up its Francophone Network in the hope of increasing the level of involvement among French-speaking countries. The network, which is led by a Swiss physician, includes several countries with French-speaking citizens including Canada, France, Belgium and countries in North Africa. Grimshaw said the Canadian Cochrane Centre based in Ottawa will serve as a link for these countries to the broader Cochrane Network. They also hope to begin translating their reviews into French. — Brad Mackay, Ottawa

DOI:10.1503/cmaj.070295

Long road home: 15 Calgary physicians return to Sudan

After more than 20 years, 3 countries and thousands of kilometres, Daniel Madit Thon Duop is on the verge of realizing his dream of returning to southern Sudan to practise medicine thanks to the intervention of a Canadian relief agency and Canadian doctors.

Duop is one of 15 Sudanese doctors, educated in Cuba, who took a skill upgrading program operated by the University of Calgary, Faculty of Medicine and Samaritan's Purse, an international Christian relief and evangelism organization with a long history of helping Sudan.

"I can't tell you how thankful we are to have had the opportunities in Canada," Duop said in an interview from a hospital near Nairobi, Kenya where he is completing an internship. "We always knew one day we would go back to Sudan, now we are close to completing our mission."

Duop's early life was rife with war and displacement. He fled Sudan in 1984 in the midst of one of the longest civil wars in African history, and spent 2 years working in a noncombative role at the Sudan People's Liberation Army headquarters in northern Ethiopia.

In 1986, leaders in the Sudan People's Liberation Army developed a strategic alliance with Cuba and a deal was struck to relocate several hundred young Sudanese to Cuba to be educated. Duop said that while the education they

received was first rate, there were few opportunities for the Sudanese students to practise medicine in Cuba. Beginning in the late 1990s, many applied for refugee status in Canada. However, once in Canada, they found they did not have the qualifications to practise medicine. Duop worked at a meat-packing plant.

When the Islamic government of Sudan signed a peace agreement with the Sudan People's Liberation Army in 2005, Duop said he focused on finding a way to return to Sudan and practise medicine. However, by that time he had been out of school for 8 years and didn't know how to make his dream a reality.

A chance meeting in May 2005 between Duop and John Clayton of Samaritan's Purse provided a spark of hope. Clayton was inspired, even though tracking down these Cuban-trained Sudanese doctors in Canada and then upgrading their skills seemed like an impossible task. "It was really by chance or divine providence that we got connected with all these guys in Calgary," says Clayton.

And when he approached Dr. Rod Crutcher at the University of Calgary he found they shared a similar sense of astonishment at the difficult journey the doctors had already made.

Crutcher, an associate professor in the Faculty of Medicine, realized it was going to be very difficult to find the staff and the financial resources to bring these doctors up to standards so they could practise medicine.



Samaritan's Purse

Dr. Daniel Madit Thon Duop is finally on his way to practising medicine in the Sudan.

Samaritan's Purse agreed to raise money to support 15 successful candidates, and the University of Calgary donated the facilities and the staff resources. Ultimately, more than 70 faculty would donate their time to train the Sudanese doctors.

"This is a very unique program," says Crutcher. "But this was about doing the right thing, and looking at the world as a global community."

In the end, Samaritan's Purse helped raise more than \$2 million, including support from organizations like the US Agency for International Development. It was possible to retrain the doctors and get them installed in internships in Kenya in little more than a year. The doctors are expected to graduate from the last stage of their training and return to Sudan to practise medicine in October 2007.

Clayton says the doctors have agreed to sign 2-year return-of-service contracts with a number of hospitals in Southern Sudan. With only an estimated 30 doctors now practising in the region, the addition of 15 more medical professionals will have a huge impact, he says.

Duop expects many of the new doctors will remain in Sudan for the remainder of their professional careers. "We will practise medicine anywhere in Sudan as long as we can help our people." — Dan Lett, Winnipeg

DOI:10.1503/cmaj.070271

News @ a glance

Donating days: Roughly 60 physicians and health practitioners were up to the challenge last year. Will more meet the test this April 7th? That's certainly the hope of organizers of the Canadian Physicians for Aid and Relief's second annual World Health Day Challenge, which asks physicians across the country to donate all or part of their day's income to support CPAR health and development projects in rural Africa (www.cpar.ca).

Microbicide trials scuttled: A pair of full-scale clinical trials of a topical microbicide to prevent HIV infection have

been halted after an independent scientific committee found that women using the chemical cellulose sulfate were at increased risk of HIV infection compared with those using a placebo. The higher incidence was discovered in a trial conducted by a Virginia-based health research organization involving 1333 participants in Benin, South Africa and Uganda. Given the adverse findings, the precise details of which are to be released this spring, a second trial of cellulose sulfate involving 1700 participants in Nigeria was also halted.

Influenza vaccines: Clinical trials of prototype pandemic influenza vaccines suggest that they can stimulate a protective immune response against strains of H5N1 virus, says the WHO Initiative for Vaccine Research and the WHO Global Influenza Programme. However, the world's manufacturing capacity remains woefully inadequate to handle potential vaccine demand. Current capacity is now less than 400 million doses annually of trivalent seasonal influenza vaccine.

Physician amnesty: In a bid to alleviate a physician shortage, South Africa's licensing body has issued a temporary blanket amnesty for doctors who return to the country between Feb. 1 and Apr. 30 after a stint of practice abroad. An estimated 1500 physicians who left for Canada, and thousands who moved to the UK, US, Australia and New Zealand, were subject to heavy financial penalties if they sought to re-register for practice in South Africa. During the amnesty, they'll be exempt from penalty. Dr. Isra Levy, a graduate of Witwatersrand University and former chief medical officer at the CMA, says the amnesty "speaks to 2 things: the desperate need to provide health care there, and a willingness to be creative at the policy level." — Pat Sullivan, Ottawa

Debt woes: The average debt of post-graduate medical trainees now stands at \$158 728, according to a Canadian Association of Internes and Residents survey of 5538 residents at 13 medical schools. The survey also indicated that debt load significantly affects choices of residency discipline and practice location, as the respondents indicated the financial burden was likely to cause them to reject

both a family medicine residency and positions in rural Canada. "It is very clear that people's financial situation will have an impact on career choice, and a negative impact on areas such as family and rural medicine," said CAIR president Dr. Devesh Varma.

Hasty retreats: Moving to separate themselves from predecessor Ralph Klein's controversial plans for reforming Alberta's health care system to allow more

involvement by the private sector, newly-minted Premier Ed Stelmach and Health Minister Dave Hancock have indicated they're abandoning the much-ballyhooed "Third Way," which would have allowed far more private delivery of health services within the province. Hancock told reporters that "Sustainability has got to be the focus." — Compiled by Wayne Kondro, *CMAJ*

DOI:10.1503/cmaj.070294