forceable policy in 2008 that required a safety warning advising against off-label usage to be added to ceftiofur packages.

"Based on the available scientific data, including results from CIPARS," department spokesman Stéphane Shank explains, Health Canada "concluded that certain uses of ceftiofur in certain food producing animals have increased the potential for antimicrobial resistance."

Hutchinson calls the new label warning a tepid response. "In the scale of possible regulatory actions, a label change is a very soft step. I don't think a label change is enough."

Hatchery veterinarians in Quebec, Ontario, Alberta and BC confirm that routine off-label usage of ceftiofur now continues in nonemergency situations.

Even so, Shank defends his department's response. "The practice of medicine including veterinary medicine, and hence the use of drugs, is under the authority of the provinces," he says. "Therefore, Health Canada does not have authority over extra-label drug use."

But in the event a drug is found to raise safety issues — which Health Canada acknowledges is why warnings against off-label usage were added to ceftiofur packages — Shank confirms that "Health Canada could introduce regulations to ban the sale of certain drugs for use in food animals and prohibit the sale of animals treated with these drugs for food. These regulations are enforceable."

With no indication from Health Canada that such restrictions are even being contemplated, Hutchinson laments the inaction. "We've been crying from the rafters that we need a whole lot more oversight of antimicrobials," he says. "Antimicrobial resistance is one of the biggest health problems confronting the planet. There is need for federal oversight on this. But the overriding interest seems not to be in human health. And that is a problem for Canadians." — Paul Webster, Toronto, Ont, with files from Aruna Handa, Toronto, Ont.

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For the record

CMA Secretary-General

The search may have been nationwide but the solution was in-house as the Canadian Medical Association concluded its hunt for a new secretary-general and chief executive officer by appointing Paul-Émile Cloutier to the position.

Cloutier will set aside his current duties as assistant secretary-general for advocacy, communications and public affairs on Jul. 20 to assume the helm of the association's operational arm.

"I think there's 2 challenges," Cloutier says. "One is to keep the doctors together under one voice, especially in light of some of the major debates that we have within CMA, and debates outside CMA. The next one is to find ways to bring CMA to members and find a value or define what value we bring to PTMAs, the provincial-territorial associations. It's our time to start thinking of how we best respond to their needs."

It's important that CMA always speaks on behalf of its 70 000 members, particularly with respect to transformation of the health care system, he says. "You don't want to be perceived out there as being an organization to which there are different camps. You want to speak to everyone, at least from a public point of view, that we are one force."

Mark Holleron

Paul-Émile Cloutier

At their core, all doctors desire "to look at what are some of the better ways of doing the business that they are in, which is patient care."

Among immediate priorities are expanding the membership base; meeting provincial and territorial medical associations to discuss how the national association might better serve their needs; and implementing CMA's new governance structure (*CMAJ* 2008;179 [6]:520).

If there are extant concerns about governance, "we must find solutions to ensure that none of our divisions, and none of our members, feel disconnect from CMA."

Asked what possessed him to throw his hat in the secretary-general's ring, Cloutier replied that he has a "passion for what we do and I believe in what we do, for both the profession and for patients, for Canadians. … CMA needs to lead that debate in health care transformation or health care reform and my whole career has been outreach and advocacy and I felt there was something I could bring to the table."

Cloutier joined CMA in 2002 after stints in the Ontario ministry of intergovernmental affairs; the federal departments of Indian affairs, immigration and foreign affairs; and Via Rail Canada.

Cloutier replaces interim secretary-general Barbara Drew, who assumed the position when William Tholl resigned after more than 7 years in the job (*CMAJ* 2008;179[10]:994).

Cloutier is married to Dr. Jocelyne Lalonde, a family physician in Gatineau, Quebec. The couple have a 9-year-old son, Pierre-Alexandre.

Transparency task force

The United States Food and Drug Administration (FDA) has created a transparency task force to ascertain whether the agency can more readily reveal information about the risks associated with drugs and medical devices without compromising trade secrecy.

Established in response to directives from US President Barack Obama to promote more transparency and openness in government, the task force, to be headed by FDA Principal Deputy Commissioner Dr. Joshua Sharfstein, is charged with developing recommendations "for making useful and understandable information about FDA activities and decision making more readily available to the public in a timely manner and in a user-friendly format, in a manner compatible with the agency's goal of protecting confidential information, as appropriate" (www.fda.gov).

The FDA has held up trade secrecy as the reason it could not reveal such information as unpublished clinical trials data or its reasons for rejecting marketing applications. But it has come under heavy fire in recent years for delays in disclosing safety concerns about since-withdrawn drugs such as the painkiller rofecoxib [Vioxx] and the antidiabetic troglitazone [Rezulin], or drugs that now require warning labels, such as several antidepressants.

The task force is expected to submit its written recommendations to FDA Commissioner Dr. Margaret A. Hamburg this fall.

The daily isotope show

Hollywood could likely not have crafted a script as surreal as that of Canada's ongoing medical isotope crisis. Since the 52-year-old National Research Universal reactor was shut down on May 14 because of a heavy water leak resulting from corrosion at the base of the aluminum vessel that houses the reactor's core, events have included politicians misplacing documents, the firing of a political aide, extensive Parliamentary theatrics, isotope price hikes, extended repair schedules, startling financial projections and even demands to resuscitate plans to build replacement reactors that were deemed to have irreparable design flaws (*CMAJ* 2008;178[13]:1648 and *CMAJ* 2008;178[7]813-4).

Among the developments was an indication from Atomic Energy of Canada Ltd. that the duration of repairs to the reactor would increase to at least 3 months from 1 month (as of Jun. 2, www.aecl.ca). Agency President Hugh MacDiarmid added that it may take even longer.

Meanwhile, Natural Resources Minister Lisa Raitt insisted that Canada is taking a lead role in ensuring a global isotope supply system, an irony given that lack of contingency planning and Canadian isotope distributor MDS Nordion's disdain for international efforts aimed at developing a global isotope contingency plan highlighted last year's shut down (*CMAJ* 2008;178[5]:536-8 and *CMAJ* 2008;178[6]:668). Raitt offered to resign as minister after leaving briefing notes on the isotope crisis at CTV's Ottawa bureau. Prime Minister Stephen Harper did not accept the resignation and the fallout landed on Raitt's now-former director of communications, Jasmine MacDonnell. The misplaced documents indicated that the federal government has already funnelled $351 million this year into the Chalk River, Ontario, site of the 52-year-old National Research Universal reactor and $1.7 billion since 2006.

Other developments included notice from distributors GE Healthcare (a surcharge of 32-cents-per-millicurie) and Covidien Ltd. that they will hike prices for deliveries of isotopes to Canadian nuclear medicine clinics. As well, MDS Nordion President Steve West pitched for resurrection of the discredited Multipurpose Applied Physics Lattice Experiment reactors. "The infrastructure is in place, and with the assistance of an international consortium of nuclear experts, the MAPLE facilities could be producing medical isotopes to the benefit of patients worldwide," West stated (www.mds.nordion.com).

But Harper kiboshed that notion, telling reporters that Canada "will get out of the business" of isotope production by 2016 . — Wayne Kondro, *CMAJ*

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