

been in a persistent vegetative state since March 1996. Doctors recommended a DNR order be placed on the boy's chart against the wishes of the natural parents. But the child's legal guardian, Child and Family Services of Winnipeg, agreed with the DNR order and subsequently was sued by the parents.

Schafer said that intervention could only serve the parents, who may be charged with murder if the child dies. He said the court ruling does not absolve doctors of legal responsibility for the decisions they make. "If a physician's failure to provide a service is negligent or incompetent, then there still can be adverse consequences for the physician under the law."

Dr. Mark Heywood, a gynecologic oncologist at the Manitoba Cancer Treatment and Research Foundation, said the decision is important because it underscores and

supports the Manitoba Medical Association's (MMA) newly developed position on futile therapy. "The gist of our position is that patients have a legal right to refuse treatment, but they don't have a right to demand treatment," he explained.

For example, he said patients don't have the right to demand antibiotics for a viral infection or to request a brain scan for a headache. "It is unethical to waste resources on a futile case when the same resources may help to save the life of another patient. Wasted drugs and therapies may not be available when they are really needed."

Heywood said the MMA is working with the College of Physicians and Surgeons of Manitoba to draft a Code of Conduct. Manitoba physicians could apply the guideline when using the CMA's Code of Ethics, he said. — © David Square

Quebec latest to face obstetricians' anger

Quebec has become the latest province to face off with its obstetricians over malpractice fees and other issues. In December the province's obstetricians began refusing to accept new patients until they had negotiated a new agreement with the Ministry of Health and Social Services. A \$5000 increase in malpractice insurance dues, which brought the cost of coverage to \$29 000 a year, was the "straw that broke the camel's back," says Dr. Vyta Senikas, president of the Association of Obstetricians and Gynecologists of Quebec.

They launched their pressure tactics Dec. 16 by refusing to accept new patients; 2 days later they agreed with the ministry and Federation of Medical Specialists to begin intensive negotiations this month. Although they

Malaria may be on move to "tropical" Canada

The recent confirmation of a case of malaria involving a Toronto woman was hardly unique, given that several hundred cases are confirmed in Canada every year, but Dr. Kevin Kain says this one stands out because it was probably caused by a Canadian mosquito. Although this has been a very rare occurrence in recent times, it may be a harbinger because global warming is expanding malaria's reach.

Canada had 744 confirmed malaria cases in 1996 and an estimated 2000 unreported cases, which involved people returning from regions where the disease is endemic. Today, rapid transportation means that no doctor's office is immune from seeing patients with malaria. Kain, director of the Tropical Disease Unit at the Toronto Hospital, finds it frustrating that

many physicians continue to ignore the possibility. He said it usually takes 6 to 8 days for the parasite to be identified, and this is far too long for a disease that can kill quickly.

He says that if physicians asked a straightforward question — "Have you travelled outside of Canada to a region where malaria is present?" — and ordered a blood test if there was a positive answer, lost treatment time would be substantially reduced.

Canada has 3 of the 4 factors necessary for an outbreak of malaria: *Anopheles* mosquitoes, standing water and a climate that is warm for at least 3 months of the year. The missing element is a large concentration of people carrying the parasite.

Canadian history indicates that these elements have come together



in the past, most notably during construction of the Rideau Canal. A large portion of the labour was provided by British troops who had recently returned from India, many of whom were infected with the parasite. An outbreak occurred, and construction had to be halted until it subsided.

The message for Canada's physicians is that, given global warming, rapid transportation and the mosquito breeding grounds available here, it might be time to consider malaria as something more than a tropical disease. — © Peter Wilton