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Gender bias in knee surgery referrals

Women with osteoarthritis are far less likely to be referred for necessary knee replacement surgery than men with the identical problem, an Ontario research study has shown. The study, headed by Cornelia Borkhoff (PhD) from The Hospital for Sick Children in Toronto, used trained actors with moderate arthritis of the knee posing as patients to test what advice would be given by family physicians and orthopedic surgeons. A total of 38 family physicians and 29 orthopedic surgeons participated in the study. The research found that physicians were far more likely to recommend total knee replacement to a male patient than to a female patient. This suggests that a degree of discrimination against female patients exists, even though, when surveyed, doctors reported gender has no effect on their decision making. This attempt to duplicate real-world circumstances may help explain why the underuse of total joint replacement in suitable candidates is three times greater among women than men. In a related commentary, Chris Herrera (PhD), an assistant professor of philosophy at Montclair State University, Montclair, NJ, states bluntly that the study shows that “a female patient who trusted her doctor to treat her knee problems the same as a male patient’s would, in many instances, have been naive.”

Safe drinking water

Much more needs to be done to ensure all Canadians are guaranteed a supply of safe drinking water. In a hard-hitting editorial, Alberta public health expert Steve Hruddy (PhD) and *CMAJ* editors call for everyone to do more to bridge the two-tier system of water supply between urban and rural areas that exists in much of the country. They point to the contaminated water tragedy in Walkerton, Ont., and ongoing problems with water supplies in many First Nations communities as examples of systemic failures with the public water supply. “By ignoring the systemic flaws and avoiding the logical steps needed to improve municipal water systems, we promote a divide between those who rely on municipal supplies and those with the resources to buy home water-treatment equipment or bottled water...,” wrote Hruddy, who is professor emeritus at the School of Public Health at the University of Alberta, Edmonton. He suggests that individuals should assess the competency of their local drinking water utility and also pressure politicians to invest properly in safe water systems.



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Asthma control can still be subpar

Managing asthma continues to be less than ideal in many cases, a province-wide analysis suggests. This, despite the existence of effective treatments, guidelines and numerous resources to assist patients with asthma. A team headed by researchers from the Saskatchewan Healthy Quality Council looked at a number of measures of the quality of care received by the more than 24,000 people in the province with asthma. The researchers found that 18% of these patients were observed to have poor control of their symptoms. Many of these patients were not receiving inhaled corticosteroids or were receiving potentially inadequate doses. They also found many were relying unduly on short-acting bronchodilators to control their symptoms, while others were not receiving recommended additional medications. In commenting on these findings, a leading Canadian asthma expert, Dr. Kenneth Chapman, said the findings suggest that even though deaths attributable to asthma have decreased in Canada over the past two decades, much can still be done to provide the best possible care.

A caution about drug warnings

Drug warnings issued by regulatory authorities such as Health Canada can have unanticipated negative effects. That's why patients should always talk to their doctors before stopping taking medication. They should also not let media coverage of such warnings dissuade them from seeking help or treatment. Manitoba researchers headed by University of Manitoba psychiatrist Dr. Laurence Katz evaluated the impact of a 2004 Health Canada warning about the danger of prescribing certain antidepressants to children and adolescents. By reviewing prescription drug use and physician visits in the province for two years after the warning, they found that the rate of prescribing antidepressants decreased. But they also found that the number of doctor visits by young adults with anxiety disorders dropped significantly, while the number of suicides rose significantly. These unanticipated findings suggested a possible spillover effect to drugs and conditions not named in the warning. They noted this could be due, in part, to patients and their families being hesitant to seek help and treatment because of media coverage of the warning. They conclude that because of the potentially "devastating consequences" of such alerts, more attention needs to be paid to how such advisories are issued.



Newer antibiotics no better for sinusitis

When it comes to treating acute sinusitis, older antibiotics are just as effective as newer, more powerful antibiotics. As such, this older class of antibiotics known as beta-lactams should continue to be the first choice when treating this condition. That conclusion comes from Greek researchers who conducted a review of all studies comparing beta-lactams against the new class of antibiotics known as fluoroquinolones for the treatment of acute bacterial sinusitis. The researchers from the Alfa Institute of Biomedical Sciences in Athens found 11 high-quality studies to include in their analysis. Their analysis found that when it came to curing the sinusitis, the newer drugs were no more effective and, in some cases, caused more side effects. Dr. Nicole Le Saux, an infectious diseases expert at the Children's Hospital of Eastern Ontario in Ottawa, wrote a commentary on these findings. She said because sinusitis can be effectively treated and cured with many effective and cheaper drugs, the newer antibiotics should be reserved for when treatment fails with other antibiotics or for other special circumstances.

