

education process and our public health system. These systems will be put to the test by this discovery. If doctors do not rapidly begin screening for and treating vitamin D deficiency, if this message is not broadcast over the airwaves until people are tired of hearing it, then our health care system will have done Canadians a grave disservice.

Many of the studies referred to in Dr Schwalfenberg's article have also been reviewed in the *New England Journal of Medicine*; those interested should get a copy of that excellent article.²

—Richard Nahas MD CCFP
Ottawa, Ont
by e-mail

References

1. Schwalfenberg G. Not enough vitamin D. Health consequences for Canadians. *Can Fam Physician* 2007;53:841-54.
2. Holick MF. Vitamin D deficiency. *N Engl J Med* 2007;357:266-81.

Corrections

An error was introduced in the competing interests statement in the article "Canadian Quality Circle pilot project in osteoporosis" (*Can Fam Physician* 2007;53:1694-1700). The statement of Dr Katz's competing interests should have read as follows: "Dr Katz was the director of the Primary Health Research Unit commissioned to perform this pilot study. The unit was paid to perform this work; the contract specifically limited the sponsor's input into research findings and their interpretation. Dr Katz did not receive any personal benefit or payment for performing this work."

Canadian Family Physician apologizes for this error and any confusion or embarrassment it might have caused.

Une erreur s'est glissée dans la conclusion et les points de repères du rédacteur pour l'article intitulé «Evidence-based approach to abscess management», publié dans le numéro d'octobre (*Can Fam Physician* 2007;53:1680-4). La conclusion aurait dû se lire: «Chez un patient immunocompétent sans facteur de risque de confusion, l'incision avec drainage sous anesthésie locale est généralement suffisante comme traitement des abcès. Il n'y a pas de preuve convaincante en faveur d'une culture ou d'une antibiothérapie empirique. D'autres études seront nécessaires.»

Le deuxième point devrait se lire comme suit: «Il n'y a pas de preuve en faveur d'une antibiothérapie après un drainage chirurgical. L'écouvillonnage pour culture chez les sujets immunocompétents n'est pas recommandé.»

Le Médecin de famille canadienne s'excuse de cette erreur et de tout malentendu qui aurait pu en découler.

Retraction

Carlisle MA. Did we make a mistake? *Can Fam Physician* 2007;53:1062-3.

I would like to request that *Canadian Family Physician* retract this paper because it is a work of fiction rather than an accurate description of a clinical case that I had encountered.

—Maxine Alexis Carlisle MD MSc
Thunder Bay, Ont

—* * *