

family medicine or *general practice* is used, it has been recognized that this is not a debate about generalism versus specialism. Acknowledging our discipline as a specialty is but a single step in re-energizing our discipline and elevating it to the status that it deserves alongside all other medical specialties.

We are not acknowledging *generalism* as a specialty but rather *family medicine*. And it is not generalists that will become specialists in the discipline but those who have demonstrated their knowledge, skills, and attitudes in the discipline of family medicine.

A defining attribute of the family medicine specialist will be to have expertise in attending to any patient for any problem. Other specialties have long claimed generalist skills as important parts of their specialties as well, making it clear that we do not own the territory of generalism exclusively—and also demonstrating that generalism and specialism can and do coexist within the same the same skilled physician. For family physicians though, expertise in generalism is not just another skill—it is the most critical skill and will be promoted as the core element that defines us.

The world is changing and we must change with it. Our College and the discipline of family medicine in Canada have repeatedly been recognized both in Canada and globally for achievements that have served to lead the way in the education, training, life-long learning, and standards for practice for the physicians who are part of our discipline. Our challenge now is to strengthen the pride in our discipline, not only for the family doctors of today but also, especially, for those of tomorrow.

The specialty of family medicine looks forward to doing this and to helping to address the many challenges before us, including the important issues raised by Dr Dixon-Warren, such as our roles on emerging health care teams and ensuring appropriate remuneration for family physicians. Family doctors must be acknowledged as equals to their peers in the other specialties, as critical players in the delivery of health care services in Canada.

—Tom Bailey MD CCFP FCFP

Past President, College of Family Physicians of Canada
by e-mail

I welcome Dr Dixon-Warren into the discussion. His point that “service must be determined by the needs of the patient” confirms the need for the family doctor, as the primary access to the health system for most Canadians, to be a generalist.

I was told that a senior member of the Royal College of Physicians and Surgeons of Canada recently suggested to a group of family medicine residents that if family medicine was now a specialty we could join the Royal College. The residents reacted negatively. In supporting family physicians as specialists, why were they so surprised?

I have also watched a colleague, previously supportive of the view that we should remain generalists, become persuaded by the College of Family Physicians of Canada’s leaders that this debate was just a semantic one. When they say it isn’t about the money, it’s about the money. When they say it isn’t about what words mean, it’s about what words mean.

—Brian Hennen MD CCFP

Dartmouth, NS

by e-mail

Correction

An error was introduced in the article “Prescribing antidepressants to pregnant women. What is a family physician to do?” which appeared in the September issue of *Canadian Family Physician* on pages 1412-4. The new resource for health care professionals described in the sidebar of this Commentary is a joint project of Motherisk and the Centre for Addiction and Mental Health. Order forms for the print edition, along with a printable pdf file, will be available from www.camh.net.

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

Une erreur s’est glissée dans l’article «Prescrire des antidépresseurs aux femmes enceintes: Que doivent faire les médecins de famille?» qui a été publié dans le numéro de septembre du *Médecin de famille canadien* aux pages 1423-5. La nouvelle source d’information à l’intention des professionnels de la santé décrite dans ce commentaire est un projet conjoint regroupant Motherisk et le Centre de toxicomanie et de santé mentale. Les formulaires de commande de la version imprimée, ainsi qu’un fichier imprimable en pdfs seront accessibles à l’adresse www.camh.net.

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

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