

I invite—I implore!—researchers to scrutinize and analyze the effects of every single remedy in the complementary and alternative medicine repertoire. If \$1 out of every \$10 spent on researching often trivial pharmaceutical products was devoted to good research on complementary and alternative medicine, there would be a tsunami of valuable studies, many of which would indicate new and useful therapeutic opportunities.

But I hope, just as fervently, that visible and decisive titles of articles like this are reworked carefully so that they reflect the radically more ambiguous content.

—Warren Bell MD

President,

Association of Complementary and

Integrative Physicians of BC

Salmon Arm, BC

by e-mail

### Reference

- Whittington C. Exacerbation of hemochromatosis by ingestion of milk thistle. *Can Fam Physician* 2007;53:1671-3.

## To be or not to be?

I would like to extend a heartfelt thanks to the authors of the study profiling students entering medical school.<sup>1</sup> Having just graduated from medical school, I feel that this study adequately and accurately reflects the main issues that medical students contend with when considering family medicine as a possible career choice.

I especially appreciate the articulation of the “prestige” factor when deciding on family medicine. While there is the pressure to “apply for something better,” I feel that the *type* of students that make up medical classes these days is drastically different from those that populated classrooms even just a few years ago. Because the process of gaining admission to medical school is that much more competitive, it tends to single out pupils that *thrive* on competition, prestige, and high esteem, things that are well entrenched in the Canadian Resident Matching Service’s process for subspecialty residencies.

I suggest that the selection process should somehow identify features that would predispose medical students to choose generalist specialties overall; some resilient element that persists despite over-represented exposure to subspecialty rotations during the clinical years. Admittedly, this would be a difficult task to undertake, but if we start with more family medicine-friendly students, in addition to all the other curriculum changes that need to occur (eg, family medicine rotations in urban centres as well as rural centres), then perhaps more FPs will make it out the other end.

—J. Marlinga MD

Calgary, Alta

by e-mail

**Reference**

1. Scott I, Wright B, Brenneis F, Brett-MacLean P, McCaffrey L. Why would I choose a career in family medicine? Reflections of medical students at 3 universities. *Can Fam Physician* 2007;53:1956-7, e1-8.

**A member's concern**

I am writing this letter to express my concern about a recent issue of *Canadian Family Physician* that opened with a letter from the Prime Minister of Canada (November 2007). The basis of my concern is as follows:

In 2005, a family physician from Nova Scotia, Dr John Hamm, successfully concluded a prolonged "Campaign for Fairness" on behalf of his province, and managed to get the federal government to finally live up to the terms of the Atlantic Accord. The document had originally been developed in 1985 and was to last 15 years once signed.

In 2007, the new Government of Canada passed a federal budget that would unilaterally alter this Accord. A recent study of the Atlantic Provinces Economic Council has calculated that changes in this budget will result in \$4.2 billion in revenue being removed from the budgets of Atlantic Canada, money that would have largely been budgeted for health care and education in those provinces.

Hence, it is with utmost concern that I witness letters from the Prime Minister of Canada being published in the journal.

It is also my humble opinion that unless *Canadian Family Physician* is committed to providing a balanced viewpoint of all Canadian political parties, they should remain a non-partisan voice on all matters that relate to health care of Canadians.

—Rob Miller MD CCFP(EM)  
Halifax, NS  
by e-mail

**Editor's response**

Thank you very much for your letter regarding "Greetings from the Prime Minister" in the November issue of *Canadian Family Physician*.<sup>1</sup> The November issue was a special issue on global health and development as part of a worldwide initiative organized by the Council of Science Editors to raise awareness of poverty and global health issues.

To honour those Canadian family physicians who contribute so much to improve global health and to acknowledge this special issue, we asked the Prime Minister to bring greetings. Opinions expressed in commentaries or greetings are those of the authors and do not imply endorsement by the College of Family Physicians of Canada or *Canadian Family Physician*.

Diane Kelsall MD MEd CCFP FCFP  
Editor  
Canadian Family Physician

**Reference**

1. Harper S. Greetings from the Prime Minister. *Can Fam Physician* 2007;53:1838 (Fr), 1839 (Eng).