article).1 The public release of this analysis by the CFPC could help to guide these Chapters, as well as other Canadian organizations.

Therefore, with the goal of adding to our understanding of this complex issue, and with our College's goal of maintaining trust, we ask that the College publicly release the analysis of complete dissociation from the HPI.

> —Sheryl M. Spithoff MD MHSc CCFP —Joel Lexchin MD CCFP(EM) FCFP —Carol Kitai MD CCFP FCFP Toronto, Ont

Competing interests

None declared

Reference

1. Lemire F. The CFPC's relationship with the health care and pharmaceutical industry. Can Fam Physician 2014;60:396 (Eng), 395 (Fr).

Response

thank Drs Spithoff, Lexchin, and Kitai for their thoughtful comments. Our relationship with the health care and pharmaceutical industry is a complex issue for the College of Family Physicians of Canada (CFPC), as I discussed in my April 2014 Cumulative Profile,1 and we have invested much time and thinking into how to best support the organization and meet the needs and expectations of our members.

We must prudently examine the financial, as well as reputational, consequences of how we manage our relationships. For example, Family Medicine Forum and our journal, Canadian Family Physician, are 2 key initiatives that would be strongly affected by a complete dissociation from the health care and pharmaceutical industry. We provided an update to the board in May 2015, and received important input from the board directors; hence, as we continue to gather feedback, our analysis is not completed.

Earlier this year, members enrolled in the CFPC's ePanel (www.cfpc.ca/CFPC_ePanel) commented on our relationship with the pharmaceutical industry and nearly half of respondents said that the CFPC should maintain relationships with the pharmaceutical industry with the current level of diligent management.2 About 30% said that we should have more stringent management in place, and 20% agreed with complete dissociation. While these survey responses should not be viewed with any scientific validity, most respondents support continued diligent management of relationships.

While we hoped to be closer to a firm position by now, we are examining further what the financial effects would be on continuing professional development, Family Medicine Forum, Canadian Family Physician,

and our operations as a whole. We are also exploring options for mitigating this influence.

I'd like to thank the letter writers once again for their communication. Rest assured that we are working toward a solution that supports the CFPC and our members.

> *—Francine Lemire* Executive Director and Chief Executive Officer College of Family Physicians of Canada

References

- 1. Lemire F. The CFPC's relationship with the health care and pharmaceutical industry. Can Fam Physician 2014;60:396 (Eng), 395 (Fr).
- 2. CFPC ePanel [website]. Mississauga, ON: College of Family Physicians of Canada; 2015. Available from: www.cfpc.ca/CFPC_ePanel. Accessed 2015 Jul 7.

Correction

In the letter "Time to think about how EMRs can evolve," which appeared in the July issue of Canadian Family Physician, the name of one of the authors was given incorrectly. The final author should have been listed as follows:

—Tina Sorensen MA

Canadian Family Physician apologizes for the error and any inconvenience it might have caused.

1. Allard M, Banewski C, Bermack B, Blignaut J, Chanel AM, Condon A, et al. Time to think about how EMRs can evolve [Letters]. Can Fam Physician 2015;61:593-5.

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