

ON THE NET

MDs' "No Nukes" movement moves online

Social activists of all stripes thrive on the connective power of the Internet, and the No Nukes movement is no exception. Take, for instance, Physicians for Global Survival, the Canadian affiliate of International Physicians for the Prevention of Nuclear War (IPPNW). With the help of 3 medical students, it recently launched www.bombsaway.ca, a funky site whose target audience is Web users aged 17 to 30. Sarah Kelly, a medical student at UBC, says many peo-

ple in that age group are unaware of these issues because they are too young to remember the Cold War or the Cuban missile crisis.

Specifically, the site was set up to help youth protest the proposed US national missile defence program (see page 1477) by providing a fax protest link to Canada's foreign affairs minister, John Manley.

"It's a site that lets one 'do something' without taking up a lot of time," says Kelly. The site had 278 000 page views its first month, and 2000 faxes were sent to Manley. Paris-Ann Gfeller, another UBC student, was amazed by the response: "The generations before us worked so hard to end the Cold War it would be a true failure to let their work fail and see the arms race start again."

Bombsaway is the latest among dozens of sites opposed to nuclear weapons. The IPPNW site, www.ippnw.org, provides a public health perspective on nuclear war and tells physicians what they can do to prevent it. IPPNW, a nonpartisan global federation of 60 medical organizations that won the Nobel Peace Prize in 1995,

provides the latest on the abolition of nuclear weapons, landmines, debt and health at its site. It's linked to the dynamic www.wesaidnonukes.org site launched by IPPNW in 1998. Another doctor-oriented resource, Physicians for Social Responsibility (www.psr.org), is a thorough source for news on the proposed US missile defence program.

Peacewire (www.peacewire.org/), a cooperative effort between the Public Education for Peace Society and End the Arms Race, offers multiple reports as well as a compelling photo gallery with horrific images from Hiroshima.

Finally, Project Ploughshares (www.ploughshares.ca) meticulously documents Canada's political response to the nuclear weapons issue. — *Barbara Sibbald, CMAJ*



Canada ranks in middle in child-injury mortality rate, report indicates

Canada's mortality rate from childhood injury is significantly higher than the rate in several other industrialized nations, a UNICEF report indicates (www.unicef-icdc.org/publications/pdf/repcard2e.pdf), but it is significantly lower than the rate south of the border.

The Canadian rate of 9.7 deaths per 100 000 children aged 1 to 14 is almost twice the Swedish rate (5.2) and much higher than the rate in the United Kingdom (6.1) — the OECD (Organization of Economic Cooperation and Development) countries with the lowest rates.

The UNICEF report, *Child Deaths by Injury in Rich Nations*, contains the first standardized ranking for injury-related mortality rates for children. The report covers 26 of the world's richest

nations and ranks Canada 10th, with an "average record of child deaths"; the US ranked 23rd, with 14.1 deaths per 100 000 children.

The rankings were created from World Health Organization mortality data compiled from 1991 to 1995. More than 125 000 children died of injuries among OECD member states during that period. The report says that between 1971 and 1975, Canada and the US had similar rates of injury-related childhood mortality (24.8 and 27.8 per 100 000, respectively) but by the 1990s Canada had reduced its rate to 9.7 while the US "languished" at 14.1. Despite the improvement, Safe Kids, a national prevention and awareness organization affiliated with the Hospital for Sick Chil-

Nasal dilators have no impact in sport: study

Nasal dilators do not enhance athletic performance, the journal of the American College of Sports Medicine says. The dilators, Band Aid-like strips placed on the nose, are used by athletes to increase airflow. However, a team of researchers from Florida "found no significant differences between placebo and the active nasal dilator regarding the total work of breathing," the college's journal reports (*Med Sci Sports Exerc* 2001;33[3]:454). Previous studies showed that dilators increased airflow, but this one indicates that the energy expended during breathing remains constant. — *CMAJ*

dren in Toronto, says injury prevention receives disproportionately low funding.

The UNICEF report says injury is now the leading killer of children in every industrialized country, claiming more than 20 000 lives annually. The most prevalent cause of death is traffic accidents (41%), followed by other unintentional accidents (16%) and drowning (15%). — *Barbara Sibbald, CMAJ*