New program will target 45 million TB patients in next decade

Nearly 2 million people die from TB each year, and the incidence is increasing. In 1999, 8 million people had the disease, and by last year 8.4 million were sick. Unfortunately, more than 90% of TB patients live in developing countries that have few resources for treating them, and that is the reason behind a new comprehensive global campaign aimed at treating 45 million tuberculosis patients during the next decade.

Canada was the first country to ante up when Canadian International Development Agency (CIDA) kick-started funding for the Global TB Drug Facility with a \$15-million contribution this spring. The money is already being used to treat patients in Africa, Asia and Eastern Europe. (Despite the contribution, critics say Canada's foreign-aid record is far from exemplary. We contribute 0.26% of our GDP to foreign aid, a far cry from the 0.7% pledged by the Liberals in 1993.)

The new facility, which is housed by WHO and managed by the Stop TB (www.stoptb.org/) partnership of the 20 nations that are hit hardest by the disease, needs at least US\$50 million a year for the next 5 years to provide drugs to 10 million patients.

Currently, the WHO-sponsored DOTS (directly observed treatment, short course) program reaches just 23% of people with TB. Its limited success is due mainly to drug shortages, even though a 6- to 8-month course of treat-

Health4Kids

There is plenty of health information on the Web, but until recently quality resources created specifically for people aged 10 to 15 were hard to find. As Doug MacDonald, a senior Web writer at Health Canada, explains, most of the health information available for members of this age group is written about, not for, them.

"There are lots of consumer health sites," he says, "but if they have any information about youth health it is usually in the family section and is aimed at the parents, not the youths themselves."

That led MacDonald and others to create a Web site aimed specifically at young Canadians. Health4Kids (**www.hcsc.gc.ca/english/health4kids/**) is designed to answer some of the most pressing questions young people have regarding health matters.

MacDonald said the designers first went to the source and asked youths what they wanted in a health information site. They discovered the most pressing need was for

help in doing homework assignments related to health care, so the first option available to visitors is Homework Central. The other options are the REAL Health Magazine and Hot (and Cool) Health News. The information is written for an adolescent audience but maintains the quality expected from Health Canada.

MacDonald said testing involving students from the Ottawa area showed that visitors use the site not only to answer their immediate questions but also to search for answers to more personal questions about their own health. Topics like alcohol and drug use, smoking, suicide and sex are covered.

Another site worth pointing young patients toward is the Yahooligans health page (www.yahooligans.com/Science_and_Nature/Health_and_Safety/), which is similar to the main Yahoo site because of its structured directories of information. However, this information is aimed at a younger audience. The quality of the health content found at Yahooligans is not as high as that at Health4Kids, but there is a wider range of links. — *Michael OReilly*, mike@oreilly.net



ment costs as little as US\$10. With the new cash, Stop TB hopes to reduce the burden of TB (deaths and prevalence) by 50% (compared with 2000 levels) by 2010. CIDA says investment in the new facility is not just a humanitarian responsibility for developed nations. "Microbes know no borders," says Ernest Loevinsohn, director general of CIDA's Food Aid Centre. "We have to work overseas to protect Canadian health as well." — Barbara Sibbald, CMAJ

Winnipeg couple sues over "wrongful pregnancy" case

A Winnipeg couple is suing a doctor for failing to warn them adequately about the possibility of pregnancy following tubal ligation.

The middle-aged couple is seeking general damages and child-rearing costs to help raise a child conceived after the woman underwent the procedure in February 1999. They allege that their doctor did not use proper surgical techniques or discuss with them the procedure's failure rate. The obstetrician/gynecologist named in the suit performed the operation after delivering the couple's third child.

In their statement of claim, the husband and wife say they have suffered emotional stress as a result of the failed procedure and cannot afford to raise the unplanned child, who was born last summer.

Dr. Guylaine Lefebvre, chair of the clinical practice committee for the Society of Obstetricians and Gynaecologists of Canada, says failed tubal ligations are a recurrent theme in malpractice complaints, but the couple's lawyer, Martin Pollock, thinks the case is the first of its kind in Manitoba. He says the "door was left open" because of a similar suit in British Columbia, which was overturned after it was shown the couple could afford to raise a child born after a failed tubal ligation.

In his statement of defence, the physician named in the suit says the woman was advised of all special, material and unusual risks, including the risk that she might become pregnant after surgery. — *Greg Basky*, Saskatoon