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JUST FOR C A N A D I A N DOCTORS Ife + leisure

MARCH/APRIL 2009

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COVER PHOTO: Take off for France, the quintessential spring destination in Europe. And when in Paris or Lyon (left), be sure to hop on one of the cities' public rental bikes to tour the narrow streets in style (see page 9).

CLOCKWISE FROM TOP LEFT: JANET GYENES; B.SLIGL; © MDLF/JEAN FRANÇOIS TRIPELON-JARRY

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FROM THE EDITOR

take a tour

t's time to come out of hibernation. Spring is a time to embrace everything with a "re": refresh, reenergize, renew, reflect, rediscover.

Do all of the above by taking a tour, one that may travel the path less taken, geographically and otherwise. Mothership Adventures on BC's coast takes you on a First Nations' cultural tour through spectacular scenery to remote villages once serviced by the very vessel you travel in, the historic hospital ship Columbia III (page 27).

That's not to say the well-travelled path isn't worth revisiting. The City of Lightbeloved Paris (pages 7, 8, 31)—makes the ideal spring or summer getaway and launch point for touring Provence and beyond (page 18). A villa, ancient walled villages, Roman ruins, fabulous French food, the blue Mediterranean...all part of the reason this European destination is a perennial favourite.

So, recharge and bon voyage!

Barb Sligl, BA, MPub feedback@InPrintPublications.com

Swaying Palms, Invigorating Adventures and Heartwarming Smiles



Blend lazy relaxation with island excitement

Here in Antigua and Barbuda, we're famous for hundreds of pink and white silky sand beaches. Find your own private cove for two or a lively spot for family fun. But our islands offer more than just sand and surf!

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Between the Louvre and place de la Concorde stretch the gravelled walkways of the gardens named after the tile factories—*tuileries*—that once stood here in medieval times. Since the 16th century the gardens have been a chic promenade and gathering spot. Lines of yew hedges fan out from the Arc de Triomphe du Carrousel toward the Terrasse des Tuileries. Here, scattered among the yews, are 20 sculptures by Aristide Maillol. It's a bit of the Louvre (just steps away) outdoors. The sculpture garden includes Maillol's *The Night* (above). Stroll the labyrinthine space and take in the art from all angles. Or find a spot to lounge on the green lawn under the foliage and amidst the figures. Only in Paris... *For more on Paris, see page 31; on where to stay in Paris, see page 8.*—*B. Sligl*

M X march/april

exhibit A TOUCH OF

It may be the closest you come to being inside an ancient Egyptian tomb. Discover the cult of the afterlife and its elaborate traditions as reflected in the 200 rare artifacts that have been preserved for millennia in the burial tombs of Egyptian nobles-from the reign of the first pharaoh in 3150 BCE to the Roman conquest in 31 BCE. Venture into a recreated chapel, passageway and burial chamber, complete with three human mummies. Then recite an ancient prayer (guided by The Epilogue, a unique feature of the exhibit). "Exploring Ancient Egypt and its timelessness forces us to confront our own mortality, our wish to be remembered, and our own connection to the hereafter," says exhibition curator Dr. Matthew Betts, And... likely appreciate life today all the more. -B.S. Tombs of Eternity: The Afterlife in Ancient Egypt is on display at the Canadian Museum of Civilization until August 16. civilization.ca



when in Paris... hotel

Mr and Mrs Smith, the creators of Britain's bestselling boutique hotel guides have come out with a new hotel collection for North Americans: *The Global Shortlist*. The *Mr & Mrs Smith Boutique Hotel Collection* is a cherry-picked selection of the most stylish and individual hotels in the world, with the Smiths' inside scoop on city slick, coastal cool and countryside chic. Open the coffee-table book to peruse fairytale Provençal châteaux, happening West Coast hotspots, secret Thai hideaways and an eco-friendly jungle lodge in Belize—each boutique hotel chosen for its unique look, atmosphere and all-important location.

The eponymous Mr & Mrs Smith—with their go-to black book of hotel addresses—have been around long before the film in which Brangelina came together. But the cheeky pseudonym is a wink to romantic escapes; the anonymous reviewers travel as couples. Pick a place and follow suit. . . perhaps something akin to a pied-à-terre in Paris? Like this sweet spot: the Hotel Daniel (above). Here's an excerpt from the review:

The Daniel is a classic example of that petite discovery you really don't want to tell anyone about. Well, there are only 26 rooms, including nine suites, and it would be very tiresome if your friends snapped them all up.

Tucked away in the well-heeled streets of the Eight, the hotel rises up over six floors, two of which offer rooms with balconies. It's part of the circuit which attracts guests who know they are assured of refined comforts and intelligent service, but a commendable panache is also much in evidence thanks to its Lebanese owners, who also own the elegant Hotel Albergo in Beirut. Adorned with colourful hand-painted wallpaper by de Gournay, the lift that takes us to our fifth-floor Paris Suite has to be the cheeriest in Europe. The Daniel's interiors were created by the London-based designer Tarfa Salam, and offer a sumptuous blaze of fanciful fabrics, oriental carpets and luxurious furnishings—a mood of tasteful exuberance that proves instantly uplifting.

So, when in Paris... or anywhere in Europe and around the world, follow the Smiths' tips. It's as if you're travelling with the savvy jet-set couple yourself...**1-866-610-3867; m rand m rssmitter**. **com**



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tour vive le VÉO

And when in Paris or Lyon (or Berlin, Barcelona, Luxembourg, Stockholm...to name just a few forward-thinking European cities), hop on a public rental bike. In Paris there are 1,450 stations (and some 20,000 bikes) in the program called Vélib (a cross between the French words for bike, *vélo*, and freedom, *liberté*). In Lyon, you'll find the signature silver-and-red Vélo'v bikes (below) at self-serve depots about every 300 metres—24 hours a day, 7 days a week. The rental schemes have caught on with locals and visitors alike. Starting at 1

euro/day, it may be the most efficient, savvy and fun way to get around and tour these fab French cities. It's, as the French are calling it, la Vélorution. LYON: velov. grandlyon. com; PARIS: velib.paris.fr



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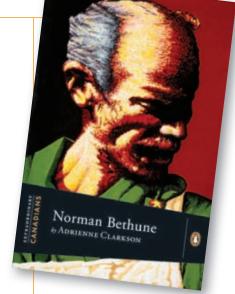
^{art} big on colour

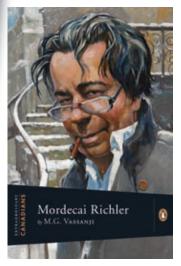
It's all about colour when you gaze at a Kees Van Dongen painting. Case in point: his painting *Le Châle de Manille (The Manila Shawl;* right).

On display at the Musée des beaux arts (Montreal Museum of Fine Arts) as part of the first North American survey of Van Dongen's artwork, the painting is evocative of his signature brand of Fauvism. *Van Dongen: Painting the Town* re-introduces this contemporary of Picasso et al. Although he's not a household name today like Picasso or that other seminal artist and Fauvist known for bold colour (*ahem*, Matisse), Van Dongen was highly celebrated in his lifetime and heyday in the 1920s and '30s.

Don't miss this opportunity to see the colourist's rarely seen works; some pieces, like *The Wrestlers*, a response to Picasso's groundbreaking *Les Demoiselles D'Avignon*, haven't been exhibited publicly for 50 years (much like Picasso's prostitutes, it's a depiction of a group of female wrestlers, an odd form of burlesque and performance art of that era). Drink in the striking hues and banish winter's monotony. —*B.S.*

Van Dongen: Painting the Town is on at the Montreal Museum of Fine Arts until April 19. **mmfa.qc.ca**





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icon like Dr. Norman Bethune. Penguin Canada launched the multi-part series "Extraordinary Canadians" last spring; all new biographies of iconic figures by the country's top writers, with specially commissioned covers by Canadian artists. Now, out this spring are the biographies on Dr. Bethune by former Governor General Adrienne Clarkson, and Richler by award-winning novelist M.G. Vassanji. And watch for an upcoming biography on Tommy Douglas by Dr. Vincent Lam. penguin.ca —B.S.



DOCTOR ON A SOAPBOX DR. CHRIS PENGILLY

An orphan illness

Mental health needs strong advocates

have some good news for you Kirsten, the tests are back and they show that you have Hodgkin's disease." This was the exact sentence which I was recently addressing to a 42-year-old woman in my office. It reflects the progress that has occurred since I graduated from medical school in 1969. Forty years ago this woman would have gone home to put her affairs in order and prepare to die within months or possibly a year. Now, in 2009, she has a 90% chance of a cure, and 100% chance of a very long remission.

Also in the 40 years since I left medical school, there have been advances in many other areas:

• Coronary bypass surgery and heart valve repair/replacement have become

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- Joint replacement has gone far beyond simply hips.
- Smallpox has been completely eliminated.
- Heart, lung, kidney and bone marrow transplants are realistic, almost routine, therapeutic options.
- The treatment of diabetes has been revolutionized with self testing and an array of effective medications.

I would think that most physicians who graduated even a decade ago would have no difficulty creating a list that would fill this entire essay.

Notably absent from these lists would be progress in treating mental health. There has been the introduction of Prozac, followed by a parade of "me too" drugs; these are no better at treating depression but do offer fewer side effects—at a significantly increased price. The same could be said for risperidone and other atypicals marginal increased efficacy, fewer side effects at an enhanced cost.

There have been some newly created diagnoses. An example is "social anxiety disorder" [commonly known as shyness] that comes, of course, with a medication to fix it.

The neglect of mental illness is occurring at all levels of society because of a fundamentally flawed attitude.

People readily accept and embrace "Cops for Cancer," "Run for the Cure," "The Terry Fox Run." I have yet to see a community come together in such a big way to raise money for mental health research and support. Could it be that everybody subconsciously feels that they could possibly develop cancer, and hence benefit from the research, while denying that they are likely to ever suffer from mental illness? In fact each year 1 in 10 people will suffer mental health problems, major or minor.

This fundamental flaw is reflected in the British Columbia fee schedule for family physicians. There is an enhanced annual fee for a full-time family physician to care for selected illnesses. For example, for



diabetes and congestive heart failure of any degree of severity the fee is \$125. For a patient who has both of these conditions there is an additional \$315 for a total of \$565. The fee for psychiatric care is just \$100—with a specification that 30 minutes must be spent with the patient drawing up a care plan, and, unlike the other fees, is not automatically annual. This fee was negotiated by physicians, and agreed by the government presumably as a result of both parties' disdain for mental health.

In British Columbia, although funding is available for chiropractors, physiotherapists, podiatrists and naturopaths, there has never been any medical coverage for clinical psychologists in the community.

Drug addiction and alcoholism are still widely regarded as social ills and the result of personal weakness. The concept of drug addiction being the consequence of selfmedication of mental pain, which rapidly becomes self-perpetuating, is slow to catch on. The result is that the drug addicted and mentally ill are abandoned to sleep on the streets.

Insite, Vancouver's safe injection site, is hanging on by a shoestring in spite of irrevocable proof of reduction of mortality and morbidity. A research project, North American Opiate Medication Initiative (NAOMI) is being studiously ignored. Though the final results are not yet available, the preliminary evidence is that providing controlled amount of narcotic substances to addicts significantly reduces mortality, medical complications and criminal activity—with consequent reduction of personal suffering, expensive health complications and policing costs. The big loser with acceptance of this project would be Organized Crime.

The problem is that the mentally ill have no strong advocates. Physicians could fill that role—physicians should fill that role. Don't you agree?

Dr. Chris Pengilly islust For Canadian Doctors' current affairs columnist. Please send your comments to him at peng2004@telus.net.

AQUEOUS HUMOUR DR. DARA BEHROOZ



A big pile of shells

What happens when we worship money

y wife's early morning shriek had me reaching for my trusty hockey stick, kept near the bed. My sleepy brain had already put together a storyline to go with the unexpected noise. She must have got up to make coffee and stumbled upon an intruder, and if I didn't rouse myself and my stick pronto, something very bad would happen. However, what followed proved that I was not only wrong but that the problem could not be solved with a simple swipe of a hockey stick.

"What happened to our RRSPs???," she screamed...at me, I suppose. I dropped the stick and went to investigate. She had opened the mail, that much was clear, and there were a stack of papers vibrating in her shaking hands. After the initial vocalization, she had been shocked into silence. I took the reports and had a look at them. I was stunned myself, and the best I could manage was..."Well, we are in a recession." "I know we are, but didn't we decide three months ago, TOGETHER, when we were ONLY down 25%, to move them into more conservative funds? Weren't YOU supposed to call the broker?" Dang, she was right. I was supposed to call. But it was a busy week and I kept putting it off, then the broker went on holiday and then...well...I forgot. Now here we were down another 25%. The last time my RRSP levels were this low, I had a lot more hair, and it was all the same colour.

"Well, I give up. I just hope you are happy working until you are 80." She said and walked away. The latter was a remark that had special significance for us. Just because I come home every night and tell her what a tough day I had, and how difficult the patients and the hospitals were, and when was Friday coming...it follows that somehow I don't enjoy my job. In truth, like any job, some days it's okay, some days it's tolerable and on other days, it's less painful having a root-canal without anesthesia. Of course, I often look with envy at my neighbour the dermatologist who sits there like a knowledgeable botanist calling out the species..."yes, you can tell from the danders and leaf formation that this is a form of erythema multiforme." No need to

hear about jobs lost, marriages wrecked, or the other miseries of life that are the daily

bread-and-butter of family docs and psychiatrists. Oh, to be a dermatologist or radiologist or pathologist.

But I digress from my main point. It should be apparent to even the most insulated individual that we are in the midst of a rip-roaring, humdinger, no-holds-barred recession. Of course, the consequences of this go well beyond shrinking investment accounts and delayed retirement. The bull of capitalism having gorged itself on greed and consumption for many

years has fallen down under its own weight. It is trying desperately to get up, however, despite the pleas and prayers of many, it is only just limping along and could keel over permanently at any moment.

The consequences of the bull's cardiac failure will be far-reaching and will no doubt affect the medical system. To put it bluntly we couldn't afford it before the implosion, but we certainly can't now. Yes, we could save money by preventing duplication and over-doctoring and over-medicating, but it is too late for tinkering like that. The kitty is empty and the medical beast would consume everything before it, if it could. Prepare yourselves for seismic changes.

Of course, money is an odd thing. My 12-year-old son is still amazed that he can exchange a few pieces of coloured paper and in return get an iPod Touch that does incredible things. "How is that Dad?" How does one explain the concept of money? "Well, every society picks something that is rare or that it values, and uses it as a common currency so people can exchange things they have for things they need. Over the centuries people have used many things. The BC Coastal Indians used seashells. In Africa they used ivory and beads and livestock. Others have used salt,

Once we think of money in the company of seashells it seems silly to toil so hard to accumulate mounds



pigs, gold, silver, copper and we use...well coloured paper." He didn't seem convinced. But paper is neither rare nor valuable. Of course, money is very much like religion. It only works because we have faith in it. Faith is a concept, which like religion, needs constant reinforcing. We have

taken our faith in money to such a religious proportion that in many cases there is no money—just ethereal numbers somewhere in cyberspace. When banks announce that they have lost billions of dollars, there is no huge bonfire of coloured paper, just a reduction in some numbers on a silicon chip somewhere. Where?

Once we think of money in the company of seashells or salt then it seems rather silly for us to strive and toil so hard to try and accumulate mounds of seashells, which all of a sudden can get blown away. Dang, we could have spent that time having fun with friends and loved ones, but then they were too busy trying to collect their own little pile of seashells. I am, of course, being facetious; of course we need seashells, but I am afraid that too many of us have become addicted to the process. That's what happens when we worship something ethereal—it is destined to disappoint.

Perhaps a benefit from this economic mess is that we will learn that we can be happy without needless material "stuff," and a big pile of shells.

Dr. Dara Behroozi islust For Canadian Doctors' humour columnist. He practises medicine, plays soccer and enjoys single-malt.











WORTH the WEIGHT

by Robert Crew

Carrying a shrine at a Japanese festival is a **load of fun**

ne of the lessons the habitual traveller learns is to be open to any and all possibilities. You may feel embarrassed or awkward in a certain situation but go ahead and give it a shot anyway. Otherwise you are liable to miss out on a whole heap of fun.

A case in point: Late last year I was invited to Tokyo with two other Canadian writers by the Japan National Tourism Organization (JNTO) and one of the items on the agenda was spending an evening at the home of Kaneyuki Ono, JNTO's Director of Corporate Planning, along with some of his young colleagues. This is unusual in itself. It's not often that a Japanese person will invite someone to their home for dinner. You are much more likely to eat out together. But Ono-san worked in Toronto for four years as executive director of JNTO Canada and his son attends York University. What gave the evening added spice, however, was that there was a Shinto festival in his district that night.

The Shi-i-na-machi Autumn Festival is typical of festivals held across Japan. It's a street party with stalls selling food and all sorts of goodies and knick-knacks. Come nightfall, a portable shrine or *mikoshi* is carried around the streets of the neighbourhood. Ono-san's home was not only on the route of Shi-i-na-machi festival but the participants would apparently pause for a moment to greet the Canadian "VIPs" and take some refreshments.

You can't beat a home-cooked meal and the food was delicious—very different from standard restaurant fare. And as the sake flowed freely, so did the stories. Our affable host became even more affable, his merry men and women even merrier. Then the festival arrived on the doorstep. Suddenly I realized that we were not only expected to watch but to take part. We were politely

invited to put on special, kimono-style robes and take a turn carrying the shrine a little way down the street. I thought it might be embarrassing and at first declined. But my colleague Will, a veteran of trips to Japan, seized the moment—and one of the poles of the shrine. What the heck. I followed suit.

Let me tell you, those shrines are heavy. And Will and I are both close to six foot, several inches taller than any other of our fellow porters. The result: between us, Will and I had most of the weight of the shrine on our shoulders. Everyone realized the problem. There was general laughter and much snapping of photos as we staggered down the street.

Finally relieved of their burden, the two *gaijin* staggered back to the party for a refreshing glass of sake. Then several of the younger folk decided it was time for a bath. Would Will and I like to join them? (There was, I should explain, a public bathhouse just across the street.) Will and I agreed enthusiastically. It would be my first experience of the Japanese tradition of public bathing, something that's not for the shy or modest. You are given the skimpiest of towels—little more than a facecloth. Someone offered a squeeze or two of shampoo. Then you strip off and shower—thoroughly. Then and only then are you allowed to luxuriate in a steaming hot bath. Glorious and a fitting end to an evening filled with new experiences.

Travel, it appears, not only broadens the mind but sometimes cleanses the body as well.

Robert Crew is a former Travel Editor of the Toronto Star. Photography by Mr. Yasumasa Shimizu

THE WINE DOCTOR DR. NEIL POLLOCK

Top-tier wine, eh/

French techniques, Canadian grapes

t's no coincidence that when wine writers proclaim their favourite wines from Canada, a few names repeatedly surface: Oculus (Mission Hill), Alliance (Blackwood Lane Winery), and Note Bene (Black Hills Estate Winery). Here's another one to add to the list: Osoyoos Larose.

It's the result of a partnership that marries the classical viticulture and winemaking practices of Bordeaux with the exceptional terroir of Canada's Okanagan Valley. In 1998, Groupe Taillan of France, with Vincor Canada, brought centuries-old French winemaking to one of the world's newest wine regions, BC's Okanagan Valley. The partners believed that the unique terroir of Canada's western winegrowing region, in particular the southern part of the Valley, was capable of producing fruit of the highest quality.

"Osoyoos" refers to the location of the vineyards in BC, which the partners started to plant in 1999. Lake Osoyoos lies within the southernmost part of the Okanagan Valley, located on the 49th latitude, just north of the US/Canada border. "Larose" refers to Château Gruaud-Larose, one of a number of prestigious estate wineries owned by Groupe Taillan in Bordeaux. Located in St-Julien, one of the top winemaking communities in Médoc, this château carries the revered second-growth ranking within the guality and pricing classification system that was established for Bordeaux wines in 1855.

Made from classic Bordeaux varietals, Osoyoos Larose has put red wines from the Okanagan Valley in line with some of the best from other New World producers and from Europe. Today, a decade after its inception, the Osoyoos Larose wines are coveted by collectors and aged in cellars across the globe.

The group set out to create outstanding wines using the classic Bordeaux varietals Merlot, Cabernet Sauvignon, Cabernet Franc, Petit Verdot and Malbec, using New World state-of-the-art equipment and technology while employing the centuries-old winemaking traditions of France. Talented Bordeauxbased winemaker, Pascal Madevon, formerly at Château La Tour Blanche in St. Christoly du Médoc, was hired to oversee the new winery. He moved to the Okanagan to become

Osoyoos Larose's resident winemaker and vineyard manager.

In April 2004 the inaugural wine, Osoyoos Larose Le Grand Vin 2001, was launched at a series of events in the US. Canada and Europe. Since then, subsequent vintages have received strong reviews and after seven harvests in the Okanagan Valley, Pascal Madevon feels he has captured the essence of the unique terroir of the site.

OSOTOOS LAROSE

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In keeping with Bordeaux traditions and with Osoyoos Larose's continued effort to produce wines that can stand proudly next to some of the finer red wines in the world, the winery introduced its second label "Pétales d'Osoyoos" in 2004. The creation of a second label for Osoyoos Larose supports the Bordeaux practice of retaining top-quality fruit and wine for the Grand Cru. Pétales d'Osoyoos is a wine that offers the signature style and characteristics of the Osoyoos Larose terroir yet is lighter than the Osoyoos Larose first wine Le Grand Vin.

Le Grand Vin 2005—one of my all time Canadian favourites—is a blend of the five classic Bordeaux varietals: Merlot (67%), Cabernet Sauvignon (23%), Cabernet Franc (4%), Petit Verdot (4%), and Malbec (2%). Aged 16 months in French oak barrels, and another six months in the bottle prior to release, it's characteristic Bordeaux with concentrated colour, hints of rich vanilla, coffee bean, and ripe red berry aromas and flavours (alcohol 13.8%). The wine displays powerful, velvety tannins, excellent balance and a long lingering finish. 20,950 cases of the 2005 vintage were produced.

The 2006 Le Grand Vin's followed suit with its own combination of classic Bordeaux varietals: Merlot (69%), Cabernet Sauvignon (20%), Cabernet Franc (4%), Petit Verdot (4%), and with this Malbec (3%). Released in BC in December 2008 at \$45, it hits Newfoundland in the spring of 2009 at \$40.



The remaining release schedule for Le Grand Vin in Canada is set for February in Ontario at \$45. Later this spring, the 2005 vintage will be released in Alberta, Manitoba, Saskatchewan, and Nova Scotia at \$45, and then Quebec at \$42. Get ready!

> I couldn't write an article that references top-tier wines made in Canada without circling back to the Mission Hill Family Estate Winery. Their new edition of Quatrain, part of their Legacy Series, is off the charts. My prediction: Quatrain will become one of Canada's most coveted and sought-after bottles, not only because of its great taste but its great value.

A *quatrain* is a poem or stanza that is always composed of four lines. The 2005 hallmark wine is similarly composed of four grape varieties: Merlot 57%, Syrah 28%, Cabernet Franc 10%, Cabernet Sauvignon 5%. John Simes, Mission Hill Family Estate's chief winemaker, crafted the inaugural vintage of this exquisite wine. The grapes were selected from the best blocks within estates in Oliver and Osoyoos. They were hand harvested, hand sorted, and fermented in small lots in French oak. The wine was aged in a selection of French oak barrels for 15 months.

The result: a vivid core of ripe berry fruit shaded by dusty mocha and gamey licorice notes. The texture is pure South Okanagan: rich and supple with some chalky tannins. The flavours pick up momentum and fan out in the finish, revealing extra dimension and depth. It's a delicious, plumy red wine with a hint of chocolate. At \$48 a bottle, buy as much as you can of this vintage and just lay it down for a few years—it will only get better.

Remember, if you're looking for a top-tier wine, you need look no further than your home country, eh!

Send feedback to drneil@pollockclinics.com; visit his website on wine at vinovancouver.com. Dr. Neil Pollock is a member of the Wine Writers' Circle of Canada. He practises no-scalpel, noneedle vasectomy and infant circumcision.

THE FOOD DOCTOR DR. HOLLY FONG



Do the roast Traditional Easter lamb is full of flavour

s a child, we didn't have a traditional Easter dinner but lamb and chocolate eggs were coveted by my brothers and me. The latter was easier to obtain; my mother never served lamb at her table.

neighbourhood, every Easter was marked by scenes of men digging spits, sitting outside turning lamb on a crank, and enticing smells of roasting meat over charcoal. Towards the end of roasting, the turning of

As children, we watched with fascination and envy as our neighbours roasted Easter lamb in homemade backyard spits. Living in a predominately Greek the meat was usually passed on to the young, including children. We never got to turn the roasting lamb, but one year our neighbours

roast lamb + green peppercorn crust SERVES 8 - 10

- 1 deboned leg of lamb, about 6 pounds 2 tablespoons crushed green peppercorns
- 2 tablespoons prepared Dijon mustard *marinade:*
- 3 tablespoons crushed dried green peppercorns
- 1½ tablespoons fresh rosemary leaves or 1 tablespoon dried
- 5 large garlic cloves, crushed
- 2/3 cup raspberry vinegar
- 1/3 cup soya sauce
- 2/3 cup dry red table wine (the least expensive, but drinkable wine, e.g., Cantina Tollo Rosso Terre di Chieti)

Combine marinade ingredients in a bowl that fits the lamb with room to spare. Untie the leg of lamb (if held together by a stretchy string net, wash and save it in the refrigerator to retie the lamb before roasting). Marinate lamb for 8 hours, turning occasionally.

Remove the roast from the marinade and pat dry. Strain the marinade into a roasting pan. Roll the roast and retie. Preheat the oven to 350F.

Spread mustard over the meat and pat 2 tablespoons of crushed peppercorns into the mustard. Set the roast on a rack over the marinade (marinade should not cover the roast). Bake for about 95 minutes in the middle of the oven, or 18 minutes per pound, for a medium-rare roast (or another 10 minutes for well-done meat). Baste with the pan juices. Let the roast stand for 20 minutes before carving. Serve the pan juices in a gravy boat along with the lamb.

See justforcanadiandoctors.com for side dish: sautéed broccolini with garlic + chili gave us some to taste. Since then, I have always liked lamb.

No, it didn't taste of wool, nor was it tough. And yes, lamb does have a slightly stronger meat flavour than beef, but with a tendency to be more tender.

Now, I often roast a leg of lamb for extended family at Easter dinner. It looks spectacular when brought to the table whole on a bed of greens and it's not difficult to carve if you buy a whole leg of lamb deboned and tied. I marinate it in a garlicky mixture of soy, raspberry vinegar and red wine. Then I roast it under a crust of mustard and crushed peppercorns. I use green (unripe) peppercorns that have a milder herb-like sweet spiciness. The marinade is cooked with the meat and served as pan gravy. The end result is a roast with a crisp and piquant crust that is juicy and succulent with a hint of garlic and berry.

Choosing a wine to accompany the lamb, pick something medium bodied so as to not overpower the meat. The hint of raspberry in the roasted lamb pairs well with wines made with the Sangiovese grape, such as the Maté 2003 Brunello di Montalcino. This wine has intense cherry notes with hints of chocolate, soft velvety tannins and a strong, long-lasting fruity finish. Open the wine about one hour before serving or decant at least 45 minutes before drinking.

Dr. Holly Fong is a practising speech-language pathologist with three young children who is always trying, adapting and creating dishes.



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Euro elite

Do American sports cars deliver or does European still reign?

s Detroit's "Big Three" collective future is contemplated, what better time to consider their sports cars? Car & Driver LIVE offers exotic driving experiences, and at their \$1,450 Scottsdale, Arizona event, I compared seven high-end sports cars. My experience there altered my included fighting urban traffic, speedy interstates, and mountainous B-roads—a good mix of conditions to sample the sports cars.

For me, the Lamborghini Gallardo is the class of this road-car field. It's the best looking, inside and out, with the best-sounding engine. And LIVE's version with titanium extion is anti-climatic.

Porsche makes great cars, but the Turbo's idiosyncrasies stand out in this back-to-back format (the cheaper Porsche 911 GT3 is a more exhilarating drive, and likely to hold its value better too).

The Noble M400 is celebrated by track-



It's America vs Europe for Dr. Kelly Silverthorn at the Car & Driver LIVE event in Scottsdale, Arizona. LEFT Dr. Silverthorn test drives the Dodge Viper, which doesn't quite meet his standards; and, RIGHT, the sleek Corvette, which is closing the gap to the Europeans...but not quite.

purchase plans; it decided whether or not a US-produced sports car was for me.

Historically, American sports cars have been renowned for affordability and big horsepower/torque numbers. My previous samplings had been from the late Vietnam War era. "Back in the day," GM's C3 Corvette and Ford's Pantera fit the above stereotype. And today's Corvettes, Dodge Vipers, and Ford GTs still feature horsepower and quasi-affordability, but had enough changed in America's sports cars to sway my Euro allegiance?

Driving competing cars back-to-back is the best way to determine strengths and weaknesses. Car & Driver LIVE's sevencar fleet featured the three key American protagonists, as well as a multi-national European team: Ferrari F430 and Lamborghini Gallardo from central Italia, Deutsch's Porsche 911 Turbo, and the Queen's Noble M400.

LIVE's half-day loop north of Scottsdale

terior, Callisto wheels, and saddle interior was exceptionally tasteful. I can't wait to sample the recently minted LP560/4 version Gallardo.

The Ferrari F430, with light-metallic-blue exterior, was also a refreshing change from the usual ticket-me-red paint colour. Price independent, the Ferrari is my second favourite here, with great steering feel and sightlines.

Both Italian mounts' available automatedmanual transmissions solve the mid-engine design's shifter compromises. And the clutchless full-automatic modes have much to recommend when mired in gridlock.

I expected a more tactile manual shifter and clutch feel from the rear-engined Porsche. Also disappointing was how the cockpit belies its 1963 Type 901 origins too narrow and tall, with a rather vertical windscreen. Between 4,500-6,500 rpm the Turbo's thrust is astonishing, but the engine soundtrack is so muted that such acceleraday addicts as the sharpest (and fastest) tool in the shed. For this privilege owners must tolerate the Noble's finicky ancillary systems, pedestrian interior trim, and narrow pedal box. The price of admission for Americans is about \$95,000, but the owner must orchestrate the final assembly of chassis to drive-train. The Noble is legal in the US as a "component car," but not in Canada's nanny state. The Rossion Q1 will debut shortly as an updated and improved Noble M400. Pricing will be around \$100,000. Rossion reports 20% of deposits on the Q1 are from US physicians.

So with my European benchmarks refreshed, how does the American Team do? The Ford GT is the most European in execution, including the high-tech, overhead cam, supercharged V8 engine, and mid-engine design. The car's bodylines are classically sleek, derived from Ford's mid-1960s glory years at Le Mans, but the '60s interior is much



LIVING WELL DR. SUSAN BIALI

less compelling, particularly the tacky 10-inch subwoofer between the seats.

Most of the Ford's driving sensations are great—ride, steering, engine sound. Unfortunately, most memorable of all was the shifter gate uncertainty...am I in reverse, first, or third gear? The GT's shifter and the odd interior constrain my passion for this admirable risk-taking effort from Ford. Regardless, all 340 of the \$184,995 (CDN) Ford GTs built for the Canadian market have been sold.

Poor Chrysler. Sure, the Viper puts up great stats—group-leading horsepower and fast lap times. Unfortunately LIVE's version had an insipid-sounding engine, long clutch and shifter throws, numb steering, ADD-like suspension, and an uninspired interior. (I've since driven the latest model, and there are improvements.) Chrysler's new owners must sacrifice models on the altar of fiscal rectitude. I trust they have not agonized at length over the Viper's fate.

"America's Sports Car," the Corvette, is the real reason I'm in Scottsdale. I'm driving the current top Z06 505hp model, but I have long been exploring the purchase of the more affordable 430hp base model. With a Z51 option package, the base Corvette is a legitimate track-day player. And unlike a Z06 owner, I'd still have a removable targa roof.

As the most affordable car in the LIVE event, the Z06 Corvette makes a compelling case for itself. Great performance statistics, rifle-bolt shifter, engine power everywhere, and fade-free brakes. That's the good news.

While Corvette has otherwise closed the gap to the Europeans, it's missing the final few nuances in communications with the driver's hands, feet, eyes, ears and tush. The great thumping engine has an unsophisticated soundtrack. My perch on the seat reminds me of looking out over the hood of a 1970 Ford LTD. Ouch.

I'm both disappointed and relieved that my LIVE experience has not consummated in a Corvette purchase. My sports-car hunt begins anew. But it's better to resolve up front that I continue to prefer import tactile poise over American brute horsepower. Still, I hope Detroit's Big Three find a way to continue in this marketplace.

Check out the varied exotic fleet driving experiences available—it's this due diligence that's fun and rewarding. You can find a date just about everywhere in the US. Go to **caranddriverlive.com**.

Dr. Kelly Silverthorn is a radiologist and Just For Canadian Doctors' automotive writer.



Be happy

The benefits of learned optimism

ow do you view the difficult events that show up in your life, or happen in the world around you? These days, the whole world seems to be in fear mode. I made the mistake of watching CNN (aka "Constantly Negative News") and had to turn it off so I could finish my sandwich. I know it's rough out there right now, but the media is so over-the-top obsessed with it that just watching the news can infect you with fear and paralyze you.

I once read a book by natural health MD, Andrew Weil, and one recommendation of his particularly struck me. It had nothing to do with strange herbs; rather, it was his recommendation to regularly partake in a "news fast." Weil claimed that the negative events described in a typical newspaper or newscast were excessively stressful, and could negatively impact your health. I thought it made sense, and cancelled my cable service for almost 10 years. I signed up for it again recently in order to follow a show that I regularly appear on.

Now that I'm "connected" again, it astounds me how pessimistic everyone seems to be. How pessimistic, or optimistic, are you? Are all the Chicken Littles running around out there starting to get to you?

I'm open about the fact that I was very depressed during my residency, and even before that it so often seemed that life's events were relentlessly unfair. Yet something has happened to me over the last few years, perhaps as a result of the extraordinarily positive experience of finding my right place in the world. Somehow, I've become an incurable optimist.

Living in Mexico played a big role in this. It's a very spiritual and optimistic place, despite the hardships faced by so many. I constantly heard the phrase: *"por algo pasan las cosas"* or "everything happens for a reason." Good or bad, it's all good. They see all life events as divinely ordained, no matter how difficult or painful they may appear on the surface.

I recently read an interview on eqtoday.com with the father of positive psychology, Martin Seligman, which made me feel very happy about having switched teams to join the optimists. When Seligman, a staggeringly prolific researcher, was asked to describe the one piece of information that he'd like every person to know, this is what he said:

"If you are a pessimist in the sense that when bad things happen you think they are going to last forever and undermine everything you do, then you are about eight times as likely to get depressed, you are less likely to succeed at work, your personal relationships are more likely to break up, and you are likely to have a shorter and more illness-filled life. That's the main discovery I associate with my lifetime."

This would be awful news if there was no way out of being pessimistic, but Seligman himself claims that he's a "born pessimist." Much of his work focuses on "learned optimism," and the first thing his optimism programs teach is to recognize the catastrophic things that we say to ourselves when things go wrong.

Pessimists think that they (or their usual bad luck) are responsible for the bad things that happen to them. They think that one bad thing happening means that more are on the way. Optimists, in contrast, see negative events as being external and unrelated to them, isolated negative incidents that have no relationship to other aspects of their lives, or things that might happen in the future. You can actually decide which attitude to have—who would you rather be?

Today, I thoroughly enjoy living with the attitude that "things will always work out." Whenever something challenging comes along, that's what I say. And if I forget, my Mexican husband reminds me. I may feel sorry for myself for a little while, but eventually I pull up my socks and start to look for the gift in the experience. I do what I need to deal with the situation, but trust that as a rule, things will work out well. And they always do, in some way.

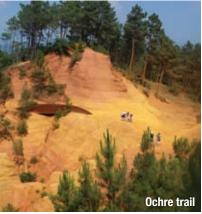
Dr. Susan Biali is a GP, freelance writer, inspirational speaker, life coach, and professional flamenco dancer. Contact: susanbiali@yahoo.com

a week in Provence

A physician takes a tour **en** France – from ancient Roman ruins and a Papal palace to thriving market days and the sparkling blue Mediterranean by Dr. Michael Simon

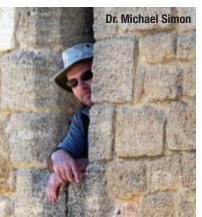
t's a modern form of from-scratch recipe. Start with 18 intrepid travellers and entice them to a foreign land, mix with plentiful wine, sunshine and history, and stir for 10 days. The result is a wonderful tour of southern France.

The notion of a group tour was conceived over a year earlier and explored through detailed planning and regular meetings. Once our destination was finalized—the picturesque Luberon Valley—an itinerary was carefully prepared. Our most experienced traveller became the point man, booking the local travel company and each day's ac-





Ochre trail



Pont du Gard



tivities (this way we eliminated the costly middle man and negotiated prices with individuals rather than companies).

Our group met in Paris and took the TGV high-speed train to Avignon. Enjoying a cold beer in the bar car while travelling at 300km/ hr is a dizzying experience. In less than two hours we were in Avignon, a gorgeous town on the bank of the Rhone. From there it was a onehour trip to our villa.

Travelling across the Luberon Valley is a trek through pristine air in a warm, comfortable climate. The journey took us back in time, to a land of tiny villages, farms and fields separated by old stone walls. The landscape is a contrast of colours, from the lush blue fields of lavender to the stunning yellow and red hues of the ochre cliffs. Medieval villages are sprinkled across the valley and old castles hover over the side of the mountains. One can almost hear whispers of centuries past radiating from the ancient stone.

Our base and villa was in the small village of Rustrel, perched on the side of the Luberon Mountains. The villa itself was a rustic, renovated house with 10 bedrooms of various sizes, a pool table, workout room and an outdoor pool. And thanks to the fine weather, any meals we had at the villa were served outdoors.

The formal tour began in the picturesque village of L'Isle sur la

Sorgue for Market Day. Despite the small size of this medieval village, there are literally hundreds of vendors on site, selling everything from rugs to lavender sachets to antique furniture. We admired turn-of-the-century china, local jewellery and French pastries. Stalls displayed a huge variety of cheese, bread and all types of food to satisfy the most discriminating of tastes. A short detour off the main thoroughfare leads into a maze of narrow streets, alleys and courtyards.

Lunch was in the small village of Fontaine de Vaucluse, built on the site of a Roman settlement at the mouth of the Sorgue River. We sampled Boscaiola (pizza) at an outdoor cafe next to an 11th-century church and surrounded by huge Sycamore trees planted during Napoleon's reign. From here we travelled to Gordes, an old hilltop village where the homes are built into the base of the cliffs and narrow streets wind up to a 12th-century castle at the top of the mountain. Small conical homes called bories, built entirely of stone, are scattered nearby.

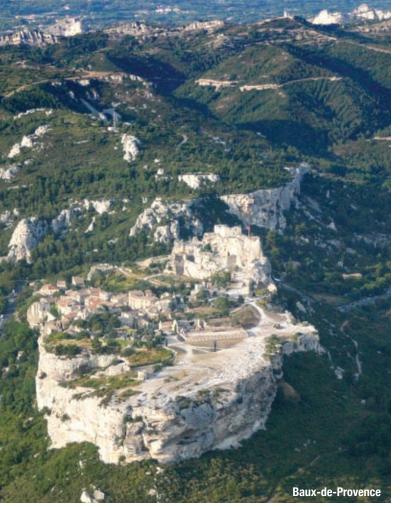
Our first day ended in Roussillon, a Provencal village famous for its colourful ochre trails and old quarries. Ochre stunning reds and yellows—was mined here in the 18th and 19th centuries and prized all over Europe (even shipped to England to stain the sails of the ships).

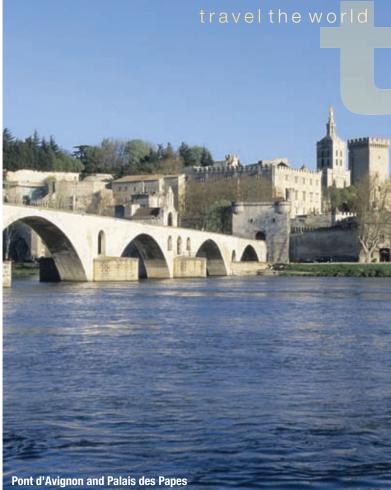
With several physicians in the group we naturally didn't want to discount the potential for continuing education, so we spent our second day being taught the finer points of wine tasting. Experts from several wineries instructed us on the proper way to sample the famous Châteauneuf-du-Pape wines, swirling and sniffing.

The next day we toured all things Roman. Our guides drove us see the spectacular Pont du Gard, a first-century

Roman aqueduct that spans the Gardon River near Uzes. Built to carry water to Nimes, it was and still is an impressive feat of engineering. On a day when the temperature reached 42 degrees, we took a dip in the cooling waters beneath the 2,000-year-old piece of history.

Moving across to Nimes we visited the stone coliseum and Maison Carree. We walked the narrow streets while our guides gave us a running history lesson of the numerous battles and wars that occurred in "French Rome." Following the Roman Road, the Via Domitia that was constructed in 118 BC and linked Hispania (Spain) to Italy, we drove to l'Orange to visit the Roman amphitheatre. Dinner was served at an adjacent outdoor cafe (savoured entrees of lamb or duck and crepes for dessert).









if you go

BOOKENDS One of the benefits of this type of trip was the opportunity for individuals to add on to the main tour. For example, several within the group arrived early and took a tour of the Normandy beaches. At the end of the trip, instead of flying home, some staved a few extra days in Paris. During our free time in the capital we visited the Louvre, the Eiffel tower, the Sacré-Coeur Basilica, Napoleon's tomb and the War Museum. We window shopped along the Champs de Lysée and walked beneath the Arc de Triomphe. (For more on Paris see page 31.)

EXPENSES The trip was planned with economics in mind. For the sum of \$948 CDN, each person was entitled to seven nights stay in our villa in Rustrel, the daily services of the travel company, return tickets for the high-speed train from Paris to Avignon and one night's hotel accommodations in Paris (upon arrival). Not included in the package price: airfare, hotel overnights after returning to Paris, and meals. Prices on flights varied from free (courtesy of air miles) to \$970 per person via Icelandic Air out of Halifax. On average the price of a full meal, including appetizer, entree and dessert (plus a glass or two of vino) at a café was between 30 - 50 Euros. Extra expenses: boat rental in Cassis (50 Euros per person) and, of course, any purchases made at various shops and markets.

TOUR GUIDES Trust me, you would not want to embark on an expedition of this nature without proper guides. No one needs the additional headaches of getting lost, suffering a fender bender in a rented car or just wasting precious vacation time. Our guides were prompt, professional and courteous. Knowing our itinerary in advance, they had the guickest routes planned, the best attractions highlighted, and even reserved selected cafés for our meals. They also adjusted the schedule on-the-fly depending on our preferences. The days flowed seamlessly because all the wrinkles were ironed out by the guides. They knew where to stop for pictures and how to avoid the crowds. And as we travelled, they gave us a synopsis of a village's history, or what is important. They explained our options and brought us home safely when our feet were too tired to take another step. Our tour company: provence-panorama.com/index_en.php

WINE TASTING Learning how to properly hold the wine glass, swirl the contents for maximum olfactory assessment, and decipher the various tastes on your tongue is a unique, educational experience. Maybe it's not quite on par with calculating glomerular filtration rates but it does come with its own pearls. We learned how to properly sample the wine, head tilted forward, lips pursed to suck air over the wine in order to bring out the subtleties of taste. The initial sensation may be that of a melon, full and fruity, quickly followed by a secondary taste, a more earthy impression like chestnut, and, as your taste buds continue to work over the wine, you might get a third sensation, perhaps apricot or cherry. Our instructors claimed to be able to detect five or six different sensations from wine tasting. We smiled politely and nodded.

CASSIS Probably the best spur-of-the-moment decision of the week involved renting motorboats in the charming village of Cassis. Picture a white sandy beach that dips into the Mediterranean, miles of natural coastline and an afternoon breeze that serves up whitecaps and sends salt spray whipping across the bow of the boat. The hidden inlets were only minutes away and yet totally isolated. Dropping anchor in one of these secluded beaches allowed for plenty of swimming in warm water and sunbathing on rocky ledges where fishermen once tossed their nets for centuries.

ACCOMMODATIONS Packing nine couples (however polite and wellmeaning) into a single dwelling for a solid week can put a strain on even the most benevolent of relationships. To survive there must be give and take and communal sharing of storage space in the fridge, bathrooms, and laundry cycles. The nine rooms that served as bedrooms were not exactly private. The villa did not offer monogrammed housecoats, cable TV or room service but, rather, could be compared to your dorm days in college. It required couples to pack not just their passport and camera but also an extra serving of patience. Picture the Walton's house with John-boy helping out at meal time and everyone pitching in to clear the table. But if you have the proper temperament and the joie de vive to experience southern France without undo pampering, this is certainly the way to go. Check out: ownersdirect. co.uk/France-Provence-Alpes-Cote-DAzur.htm

The next morning we set out to St. Remy for this village's international market day. After perusing the numerous stalls along the narrow, winding streets, we picked out a sampling of sausage, samosas, fresh fruit and cheese and drove to the village of Baux-de-Provence, spectacularly situated on a rocky ledge in the Alpilles Mountains, where we had an afternoon picnic. Then we wandered inside one of the bauxite mines and took in a Van Gogh exhibition.

We also visited the yellow tavern that inspired Van Gogh's famous painting in Arles. This village sits on the Rhone River where the firstcentury Romans constructed a walled fortress, parts of which still stand today, and a huge amphitheatre. Many of the medieval structures in the village were built on top of old Roman structures, and stones used to build newer houses were taken from Roman buildings.

Another day was in the town of Avignon, a walled city of about 90,000-20,000 of which actually live inside the old walls. Avignon





villa in Rustrel

the wind rising and white caps forming in the lazy afternoon sunshine, we reluctantly returned to Cassis. We stopped to enjoy the village's famous ice cream before returning to our villa for dinner.

Back in Rustrel, we discovered that a carnival, complete with rides and a live concert, had arrived in the village. The festivities continued until the wee hours-the perfect send-off to our week in Provence.

Dr. Michael Simon lives and practises in Saint John, New Brunswick.

became famous in the 14th and 15th centuries when a succession of Popes took up residence and constructed the magnificent Palais des Papes (Palace of the Popes). We toured the palace and walked the remaining portion of the original bridge, the Pont d'Avignon, built in the 13th century and now partially washed out by the Rhone.

On our last day in Provence we travelled to the French Mediterranean. After taking a narrow road that snaked through the mountains we arrived in Aix en Provence where we shopped and picked up quiche, spring rolls, samosas and sandwiches for a beach picnic in Cassis. The white sandy beaches (clothing optional) here are incredible, stretching like a blanket into the warm green-blue waters of the Mediterranean.

We rented three small boats and spent the early part of the afternoon motoring along the pristine coast. Spying several secluded beaches, we dropped anchor in a cove and swam in the turquoise waters and even dove off the surrounding rocks. Hours later, with

COURTESY DR. MICHAEL SIMON (3)

In Mami by dr. venita jay Taking in a little sun, a little art

oronto's weary winter was exhausting and never-ending. For a break from this drudgery, I needed some fast-paced Latin music to dance to—a little salsa and merengue to beat the blues. And so in Toronto's Kensington Market, in a little shop aptly named "El Buen Precio," I stumbled upon a CD entitled, *Merengue 2002, Calle Ocho*. And from thereon, I became obsessed with seeing the real Calle Ocho of Miami.

The opportunity soon presented itself; I had to speak at a conference in South Beach. I found myself at the Royal Palm, a nice example of the art deco style that abounds in South Beach. And with a tight schedule, I set myself four simple goals: to visit Calle Ocho, see a couple of Miami's art museums, take in the art deco, and get some much-needed vitamin D on the beach.

It was 2:30 pm on a Saturday afternoon when I reached my hotel. Immediately, I hailed a cab for the Miami Art Museum on 101 West Flager Street. Miami's taxi drivers have a mind of their own—this one dropped me at East Flager Street in downtown Miami and took off.

After some confusion and a bit of a walk, I finally made it to the museum. It was not quite what I had in mind but then art is really "to each their own." I covered the museum's modern art displays quickly and still had time to take in the Historical Museum of Southern Florida, located in the Miami-Dade Cultural Center, right next door.

I now sought the famous Calle Ocho (8th Street). My first run was not so successful. A friend and I drove past N.E. 8th Street a few times but failed to see any semblance of Cuba—no exotic cafes or Cuban cigar shops. But after several runs, I did find the heart of little Havana on S.W. 8th Street—not quite the bustling hub of life I had imagined. Not far from here, on Biscayne Boulevard, was the Cuban heritage landmark, The Freedom Tower, constructed in 1925 and modelled after the Giralda Tower in Seville, Spain. For 32 years, this building served as the home of the Miami Daily News. In 1962, it was renamed in honour of the Cuban refugees, as it was here that nearly 500,000 were first processed.

In the little time I now had left, I dedicated fully to South Beach (the area between the southern tip of Miami Beach and 23rd Street), home to an eclectic mix of tourists and residents. *Who were all these exotic and beautiful people with perfect bodies?* Their diversity was reflected in the many tongues they spoke—Spanish, Portuguese, French, German and more.

The historic Art Deco district of South Beach represents an incredible urban restoration project in the history of American architecture. Hundreds of buildings have been restored to their early 20th-century appearance with the championing efforts of the non-profit Miami Design Preservation League (MDPL).

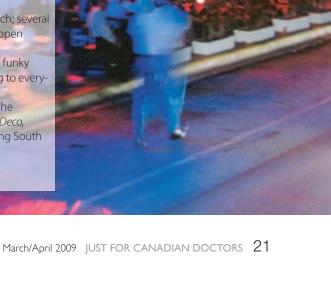
It's an idyllic world on South Beach with the cool ocean breeze, the swaying palms and the feeling of being transported back to the 1930s. Besides the geometric shapes, colour is a big part of it. Soft pastels, bright blues, and flamingo pink are everywhere and neon signs liven up the night. The buildings have lots and lots of corners—angular ones and curved ones, all presenting opportunities for walls and decorating relief.

There are some nearly 800 renovated examples of the art deco style in South Beach; several famous landmarks are right on Ocean Drive and Collins Avenue. Jerry's Famous Deli (open 24/7) on Collins Avenue, which I visited for a quick bite, was built in 1940.

Although not really art deco, Española Way offers lots of outdoor cafes plus some funky shopping. Forgot your bikini? No problem, South Beach is littered with shops catering to everything you might conceivably need on the beach and in water.

There are also South Beach Art Deco walking tours organized by the MDPL from the Welcome Center. For your own personalized art deco tour, get a copy of *South Beach Deco*, *Step by Step* by Iris Chase. Sadly, I got this beautifully illustrated book just as I was leaving South Beach—a thoughtful gift from the organizers of my conference.

Dr. Venita Jay is a Toronto physician, artist and writer.



Virtually on-sight

See more patients farther and in more detail than ever before

a med American photographer Robert Mapplethorpe said that with photography, you zero in; you put a lot of energy into short moments, and then you go on to the next thing. With Librestream Onsight, the same outcome is expected.

Simply put, Librestream Onsight is mobile collaboration, now being used in telemedicine applications. But it didn't start that way.



Originally developed for industry, Librestream's Onsight Mobile Collaboration system provides one-way video, two-way audio and two-way telestration. Think about it. If you are at a corporate head office in America and your manufacturing facility is in the Far East, what do you do when there's an assembly line problem that only you can resolve?

Traditionally, the technical specialist would board a plane and fly half-way around the world to set things straight. In the meantime, that technician was not available should another problem arise elsewhere.

Librestream fixed that. Workers on the assembly line use a specially designed camera and software to send streaming video of the problem right to the technician's desktop. The parties collaborate on a solution and no one leaves their desk, let alone the country.

Medicao patients are not assembly lines but the same theory applies. Specialist

physicians and their patients no longer have to be in the same room or even the same city. Mobile collaboration is better than video conferencing because patients and providers each don't need to book space in a video conferencing facility and then travel there.

"The technology provides just-in-time information and knowledge at the pointof-care, for the patient, say 300 miles away, and for the healthcare provider at their

> desktop or wherever they are," says Dr. Ray Postuma, Librestream's medical and telehealth advisor, retired pediatric surgeon and one of the co-founders of Manitoba's telehealth.ca. "The beauty of Librestream is basically it isn't video conferencing. It's a device that allows you to collaborate securely. You take the technology to the pointof-care."

Postuma says the device can be taken to the bedside of the patient, but that bedside is

already crowded. This technology is mobile, nimble, rugged, un-tethered and safe.

"It looks like an oversized SLR camera but it's very intelligent—streaming audio and telestration two-way and video oneway over the Internet, all wirelessly. The device is with the patient in the wi-fi zone in the patient area and sends a signal securely to an internet address anywhere in the world."

Crystal-clear images can be discussed between the healthcare provider at the near-end, and the patient and nurse at the far-end, and the two can speak as they view an image, move the camera for different views, and even use the two-way telestration feature.

"The nurse or patient says, 'I am worried about this part of the wound' and circles it on the screen of the device. It immediately appears on the physician's screen at the near end. If the physician is more concerned about a different area, he can circle elsewhere on the image and that circle



appears immediately in a different colour on the screen of the device at the patient end. Both can see and hear exactly the same thing."

Security is an important issue, says Postuma, and so the signal is encrypted to the highest standard possible.

And the device isn't just for the convenience of the patient, who may live remotely or be too ill to travel. It's also for the need of the medical specialist who may be in an emergency or operating room working on one patient and needs to advise on a patient at a different location.

"In plastic surgery, they're using the device for training plastic surgeons-tobe. If the plastic surgeon trainee sees a problem in the emergency room while the supervising surgeon is in the operating room, the surgeon can't un-scrub but he can take a few minutes out of the procedure and see on a video screen in the operating room what's going on with the patient in the emergency room," explains Postuma. "It teaches and provides supervision. You can't do that scenario from a conference room."

Librestream's Onsight is being used in a stroke rehabilitation program, improving access for remote patients and increasing the amount of follow-up care. It can also be used on-the-fly in primary care, where the family physician can call on a specialist and show the area of concern while the patient is still in the same room.

Onsight is currently used in wound care, and foot care in diabetic patients, with huge potential in home care, colostomy care and even medical assessment of incarcerated patients. Librestream is using the camera to see farther and in more detail than ever before.

"This is an information technology tool that allows caregivers to truly collaborate securely and privately from point-of-care to point-of-expertise," says Postuma.

Corey Van't Haaff is a Vancouver-based writer and owner of Cohiba Communications. She is Just for Canadian Doctors' technology columnist. She can be reached at medicalnews@ cohibacommunications.com and welcomes ideas for future columns.

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DEGGES



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🚬 Course #1 - Infectious Diseases August 11 through August 14, 2009

Learners enrolled in this course will review the management of wound infections, as well as community and hospital acquired pneumonia, c.difficile colitis, MRSA/VRE and more!



Course #2 - Physician Resilience August 17 through August 21, 2009

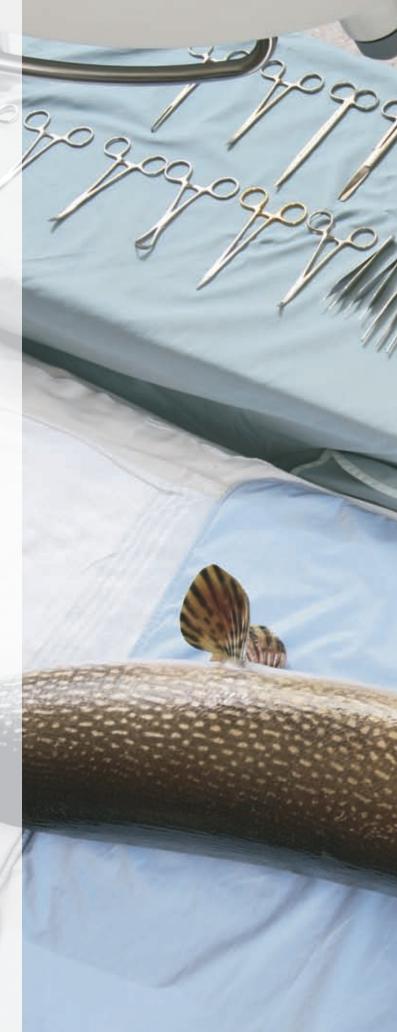
Learners enrolled in this course will review concepts and tools that will better allow them to manage themselves, others and their environments - promoting a healthy balance between work and personal life.

Course #3 - Internal Medicine August 24 through August 28, 2009

This course will provide the non-internist with a review of what is new in various fields of medicine including: cardiology, neurology, nephrology, gastroenterology and endocrinology.

For more information on these and other courses from the University of Manitoba, please contact the Office of Continuing Medical Education at 1.204.789.3660 or visit our website at: www.umanitoba.ca/faculties/medicine/education/continuing_med_ed





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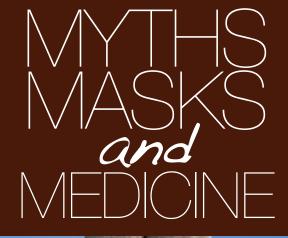


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travelat home





Some of the faces are those of ghostlypale frightened souls, seemingly weeping tears of blood. One face bears the smirk of ridicule, and another has bulging, whirling eyes. Another still, with sunken eyes and disheveled hair, has her thick lips pursed together in an O, ready to utter her frightening cry: *hu hu*. It's the terrifying visage of Dzunuk'wa—the giant of the woods—who, according to legend, snatches naughty children, puts them into her cedar basket and spirits them away to her lair to devour them. >>

story + photography by Janet Gyenes

travelat home

Lillian Hunt, curator of cultural tourism programs for Alert Bay's U'mista Cultural Centre, explains some of the complex history and legend behind the wooden masks that make up the Kwakwaka'wakw First Nation's potlatch collection as she takes our group through the exhibit that is arranged in the same strict order as the masks would be used during potlatch ceremony dances.

These elaborately carved masks, some adorned with horse hair and cedar bark, represent a centuries-old culture that was once held ransom for decades when the federal government, largely at the behest of missionary groups, banned the potlatch ceremony in the late 19th century. Authorities seized the masks in 1921 at what has been described as "the last potlatch ceremony," which was held at Mi'mkwamlis (Village Island). Here, 45 people were arrested and charged with spurious "offences," such as giving and receiving gifts and dancing at the potlatch. group on the *Columbia III*, which has also had a storied presence on the British Columbia coast as a hospital ship. It will be our home for three more days as we explore aboriginal cultural sites scattered throughout the ragged coastlines of BC's pristine Broughton Archipelago.

The evening before, our group travelled from Port McNeill across the Broughton Strait on the *Columbia III.* We anchored among the battered old fishing boats and bunked down in the boat's snug confines and awoke to the mournful drone of fog horns. On board, Ross Campbell, captain of the *Columbia III*, and his crew—his wife, Fern and daughter Miray—shared historic anecdotes that unfolded on the coast during the Kwakwaka'wakw's cultural repression.

At the turn of the century, logging was plentiful, but death rates in the risky industry were high. And without roads or telephones, schools or libraries, families were isolated. With a mandate to deliver hospital services throughout the region, Reverend John Antle's Columbia Coast Mission (CCM) and the *Columbia III* became a lifeline to

There's been an "HB" sighting, and within minutes we spy the spray from a humpback whale in the distance

In 1980, almost six decades later, the U'mista Cultural Centre was opened with a mandate to ensure the survival of all aspects of the cultural heritage of the Kwakwaka'wakw. By this time, most of the potlatch masks had been repatriated. Some had been sent to museums in Canada and

PREVIOUS PAGE, FROM LEFT Memorial totem poles at Namgis Burial Grounds, Alert Bay; close-up of U'mista totem pole; U'mista Cultural Centre. opposite page, cLOCKWISE FROM TOP LEFT Cruising on the Columbia III; through the bracken to Alert Bay Ecological Park; village homes, Alert Bay; remnants of the past, Village Island; shell midden, Village Island; scarlet poppy; frolicking dolphin sighting; curios on display at Billy's Museum, Echo Bay; Columbia III, sunset anchorage.

abroad; others were sold off to private collectors. Not all pieces have been returned.

Potlatches, which are held by hereditary chiefs, are at the core of the Kwakwaka'wakw culture: titles and privileges are passed on, marriages and deaths are commemorated, and dances are performed. Hunt explains that the dances aren't owned: they're carried and passed down at potlatch ceremonies. "It took so long [to get the masks back] that some families didn't survive, and in our culture, when that happens, the dance dies with them. We help to correct [what has been written] because [our culture] wasn't lost, it was taken away," says Hunt. "[The masks] weren't returned, we had to go get them. The villages were not abandoned, we were displaced."

After taking us through the potlatch collection, Hunt, who grew up in Alert Bay, joins our the fragmented communities that eked out an existence in remote outposts.

Campbell describes how Antle, who was characterized as a "hard-talking, hard-swearing man," decided to start the CCM, not to convert

people to religion, but to bring muchneeded medical services, supplies and news to coastal denizens. And for 60 years the CCM fleet of 17 ships, including the *Columbia III*, unfailingly travelled thousands of kilometres through swells and storms. Campbell points out how the vessel's original doors open extra wide to accommodate a stretcher, and how the refurbished salon where we feasted on breakfast was once the hos-

pital cabin. The vessel was also one of the first on the coast to have a radio.

Leaving our overnight anchorage at Dong Chong Bay, we gather in the wheelhouse to listen to the squawks coming from the radio. There's been an "HB" sighting, and within minutes we spy the spray from a humpback whale in the distance.

Soon, though, we're distracted from our quarry by breathy puffs of air, snorting and splashing around the stern. Dozens of Pacific White-sided dolphins have surrounded the boat. They're playing—and playing with us, too, showing off with their stealth. It's dolphin soup of fins, flukes and noses flipping and splashing in the briny broth. Pairs leap frog one over the other. Farther back, soloists propel themselves clear out of the water,

practise medicine on the BC coast today

After training in the UK, New Zealand and Vancouver, Dr. Granger Avery leapt at the chance to move to the rugged coastal community of Port McNeill in 1974, because "I thought I'd better go somewhere where I could learn to make a decision again."

"Remote areas are wonderful for teaching oneself—and for teaching others—about medicine," adds the former President of the BC Medical Association, and Clinical Professor at UBC's Department of Family Practice. "It's ideal for physicians who are rational risk-takers."

BC's legendary coast is home to plenty of rewarding opportunities for physicians today, permanent or locum.

You could join Dr. Avery in Port McNeill, home of the district hospital for the North Island. Not far away, there's also a vacancy in Port Alice, a sheltered gateway to the Pacific. Farther north are a few specialist and FP positions in booming Prince Rupert, the travel hub for northern BC. And across the Hecate Strait, the Masset Hospital is ready to welcome another physician to the team practicing at the tip of the Queen Charlotte Islands or Haida Gwaii.

Find big adventure in "the Bellas": the island village of Bella Bella, the largest community on the central coast, or Bella Coola.

Love to surf? The worldfamous surfing mecca Tofino has one permanent FP position and one locum gig.

For less rugged, but still pristine, coastal adventures, explore specialist or FP careers in the laid-back cities of Campbell River, Comox or Courtenay. You'll be the envy of your colleagues if you start a practice on the islands of Gabriola or Hornby, or snap up the surgical position on the international getaway destination of Salt Spring Island

Explore locums throughout the region. Why not make one into a paid extension of your trip to BC's coast? Work for six months, or stay for a year or more...You can check out what's available at Health Match BC (healthmatchbc.org). —Pamela Clarke



hotspots

travelat home

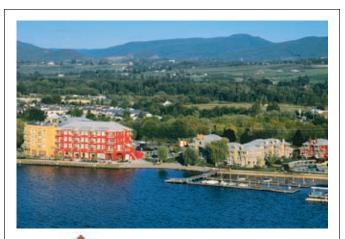


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eliciting cheers and clapping from our gang. We speed up and the dolphins skim alongside the stern—one, two, three—and jockey for position to ride the waves in a playful bravado.

Eventually, the dolphins disappear, and we double back between craggy islets toward Mi'mkwamlis (Village Island), site of the last potlatch. Shards of old china—a handle from a teacup, the rim of a saucer decorated with tiny blue flowers—litter the beach, along with crushed white shells reveal traces of an abundant life. Honeysuckles perfume the air, and the din of bees buzzing around swaths of thimbleberries cuts through the stillness. Shells crunch underfoot as we stroll past the sun-bleached remains of a shed. We scramble up the embankment and Fern points out what's left of an old totem that now rests beneath the shade of an ancient cherry tree. Moss camouflages the barely perceptible outline of an otter and grizzly bear claws. A few old buildings and posts from the Big House stand as reminders of the once-bustling community of Aboriginals, missionaries, and teachers who may have greeted the *Columbia III* on its visits.

We continue to explore a tangle of islets over the next two days, visiting T'sadzis'nukame (New Vancouver) where Chief Ki'ki'klala (Bill Glendale) graciously tours our group through his remarkable Big House. We spy pictographs near Karlukwees on Turnour Island and navigate past rafts of bull kelp toward the deep shell middens at Insect Island. We drop in to visit Billy Proctor at Echo Bay and explore his museum of treasures scavenged from Gilford Island and the surrounding environs. Opium bottles from the 1930s, fishing lures, cobalt blue Milk-of-Magnesia bottles and other remnants of a bygone era line Proctor's handcrafted wooden shelves. And we commemorate Canada Day while catching glimpses of harbour porpoises that are almost apparitions in the blanket of fog.

I crane my neck high, and I can just see the top of the world's tallest totem pole near the Big House at Alert Bay. We've been invited inside to witness some of the potlatch dances being performed by the community's elders and toddlers alike. The fragrant aroma of smoke and cedar permeates the air and the drumming, chanting and dancing begins.

There are spellbinding dances performed with masks and eagle down and then we recognize one of the creatures we'd heard about at U'mista days ago. It's Bak'was—Wild-Man of the Woods, shyly shielding his face with his hands, which he uses for digging cockles—his favourite food—out of the sand. He's mesmerizing, dancing alone in the middle of the Big House, long hair tumbling forward over his green face and hooked, beak-like nose. Bak'was can lure you into his netherworld where you'll be stuck forever. But today, we're safe among our new-found friends.

Soon, Bak'was disappears and we're guided from our seats to the centre of the Big House to join the dancers. We chant, twirl, stamp our feet in the sand and raise our arms up high progressing in a circle past the totems and the drummers in the smokescented air, while fluffy eagle down swirls around.

🗕 if you go

THE TOUR Mothership Adventures offers four-night/five-day First Nations cultural tours with Lillian Hunt on the *Columbia III*, departing and returning to Port McNeill on Vancouver Island. mothershipadventures.com GETTING THERE Pacific Coastal Airlines flights depart daily to Port Hardy 25 minutes north of Pt. McNeill. pacific-coastal.com; 1-800-663-2872 > Ground transportation via car, taxi or shuttle bus from Port Hardy to Pt. McNeill. > BC Ferries offers frequent service from to Vancouver Island. Port McNeill is an approximately 4.5-hour drive from Nanaimo or 6 hours from Victoria. bcferries.com MORE U'MISTA CULTURAL CENTRE: mista.ca

AN INTERNATIONAL GUIDE TO CONTINUING MEDICAL EDUCATION spring 2009 + beyond



Does Paris ever get old? *Mais, non!* The City of Light demands being returned to again and again. (CME events at Paris are highlighted in blue)

Paris is the seminal European city. What hasn't been said or written (or painted or composed) about Paris? Yet it never loses its charm. Especially come spring as the warmer air allows a sojourn at a streetside café. When in Paris, just do as the Parisians do...sip pastis outdoors and watch the world go by, and feel a little bit like Hemingway, or Picasso, or Sartre... take your pick of inspirational figures and lovers of the City of Light.

No matter how many times you've been to Paris, the go-to spots still demand going to. Be sure to wander the Luxembourg Palace gardens. Grab one of those metal green chairs and admire the statues, fountains, and *très*-stylish Parisians. Of course, there are the museums. The musts: the Musée d'Orsay, housed within an spectacular old train station, and the Louvre, within a former palace and above ancient ruins (that you can amble through in the bowels of the building)...not to mention the art (standing amidst the crowds huddled about the Nike and the Mona Lisa is an experience in itself). Sustenance is aplenty and legendary, but indulge in some "fast-food" as you tramp along the narrow streets of the Left Bank, where vendors whip up a crêpe au citron in front of you. Trudge up the steep hill to Montmartre and the steps of Sacré-Coeur Cathedral. As twilight approaches, join the backpacking crowd; the mood is infectious as the sun goes down and the City of Light starts to sparkle. And the very best sparkle: the Eiffel Tower on July 14, Bastille Day. For more on Paris and France go to: en.parisinfo.com; ca-en.franceguide.com — B.S.

And discover what has to be the most comprehensive history of medicine found in a single city. Here are five different medical museums in Paris:

- 1 The museum of the History of Medicine, located in the 18th-century building of the College of Surgery. It features instruments like ancient Egyptian embalming knives, and a 17th-century circumcision kit, along with furniture and paintings.
- 2 The museum of the Army's Health Service. Over 10,000 objects show the evolution of military medicine. (Enter "The Army's Health Service Museum" in your search engine to find the website.)
- 3 Paris Public Health Museum. Lays out the history of Parisian hospitals from 1849. Features include a reconstructed 18th-century hospital room and a hospital pharmacy.
- 4 The Dupuytren Museum. Features pathological anatomy.
- 5 The Museum of Anatomy at Reneé Descartes University. The largest in France.

Go to paris.org/Musees/mus.rubrique/medicine.e.html for more info. — Cherie Thiessen

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Aesthetic Medicine	Jul 17-19	Estes Park Colorado	Colorado Integrative Medicine Conference (CIMC 2009): Focus On Mind-Body Medicine	AlterMed Research Foundation	970-310-3030	alterme- dresearch.org
	Jul 17-19	Vancouver British Columbia	XVII World Congress Of Aesthetic Medicine	Canadian Association of Aesthetic Medicine and the Union Internationale de Médecine Esthétique	604-685-0450 See Ad Page 45	aestheticmedi- cine2009.com
Vestheti	Jul 22-26	Amsterdam Netherlands	17th Annual Scientific Meeting Of International Society Of Hair Restoration Surgery (ISHRS)	ISHRS	800-444-2737	ishrs.org
4	Sер 24-26	Washington District of Columbia	Diabetic Limb Salvage: A Team Approach	DLS Administrative Headquarters	337-235-6606	dlsconference. com
Alternative Medicine	May 30-31	Toronto Ontario	Nutrition For Docs 2009: Using Nutritional Supplements In Clinical Practice, A Practical, Evidence-Based Approach – Part II	University of Toronto	888-512-8173	cmetoronto.ca
Alte Me	Jun 11-12	Baltimore Maryland	Current Concepts In Complementary & Alternative Medicine	Johns Hopkins University	410-955-2959	hopkinscme.edu
logy	May 15-18	Jinan China	10th Asia Oceania Congress Of Regional Anesthesia & Pain Medicine	CICCST	011-86-10- 6217-4061	aosra2009.com
Anesthesiology	Jun 05-07	Seattle Washington	Society For Education In Anesthesia 2009 Spring Annual Meeting	Society for Education in Anesthesia	847-825-5586	theairwaysit. com
	Aug 02-07	Mauna Kea Hawaii	2009 Hawaii Anesthesiology Update	Dannemiller Memorial Educational Foundation	800-328-2308	dannemiller.com
nistry	May 06-09	Montreal Quebec	69th Annual Meeting Of The Society For Investigative Dermatology	SID	216-579-9344	sidnet.org
	Jun 28- Jul 05	Paris France	9th World Congress Of Biological Psychiatry	CPO Hanser Service	011-49-40-670- 8820	wfsbp-congress. org
Biochemistry	Aug 30- Sep 03	Sydney Australia	12th Congress Of The World Federation For Ultrasound In Medicine And Biology (WFUMB)	ASUM	011-61-2-9958- 7655	wfumb2009. com
	Dec 05-09	San Diego California	49th Annual Meeting Of The American Society For Cell Biology	ASCB	301-347-9300	www.ascb.org
	May 29-31	Lake Louise Alberta	Sleep Apnea: Diagnosis, Treatment And Impact On Cardiovascular Disease	National Education Institute	866-685-6860 See Ad Page 33	neiconferences. com
Cardiology	May 30	Edmonton Alberta	9th Annual Cardiology Update	University of Alberta CPL	780-407-6346	ualberta.ca
	Jun 03-05	Nice France	5th International Conference On Functional Imaging & Modeling Of The Heart	FIMH	fimh09@lists- sop.inria.fr	sop.inria.fr
	Aug 31- Sep 04	Monte Carlo Monaco	XVIth World Meeting Of The International Union Of Phlebology	Publi Creations-Partner of AIM	011-377-9-797- 3555	aim-international- group.com



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Clinical Pharmacology	Apr 22-24	London England	British Association For Psychopharmacology Masterclasses In Clinical Psychopharmacology	BAP	011-44-1223- 358-421	bap.org.uk
	May 15-17	Limassol Cyprus	International Conference On Alzheimer's Disease And Related Disorders	World Events Forum	773-784-8134	worldeventsfo- rum.com
	Jul 26-29	Oxford United Kingdom	2009 British Association For Psychopharmacology (BAP) Summer Meeting	BAP	011-44-1223- 358-421	bap.org.uk
Ū	Sep 12-16	lstanbul Turkey	22nd European College Of Neuropsychopharmacology Congress	Colloquium Brussels	011-32-2-779- 5960	ecnp.eu
	May 06-09	Montreal Quebec	69th Annual Meeting Of The Society For Investigative Dermatology	SID	216-579-9344	sidnet.org
ology	Jun 11-13	Stockholm Sweden	5th International Aesthetic Symposium: Beauty Through Science	Congrex Sweden	011-46-8-459- 6600	akademiklini- ken.se
Dermatology	Jul 01-05	Whistler British Columbia	84th Annual Conference Of Canadian Dermatology Association	Advance Group	604-688-9655	dermatology.ca
	Aug 22-23	Chicago Illinois	Practical Approaches To Patient Problems	American Academy of Dermatology	866-503-7546	aad.org
Diabetes	Sep 02-05	Ljubljana Slovenia	35th Annual Meeting Of The International Society Of Pediatric & Adolescent Diabetes	KIT GmbH	011-49-30-246- 030	ispad2009.com
	Oct 18-22	Montreal Quebec	World Diabetes Congress	International Diabetes Federation (IDF)	32-2-5431631 See Ad Page 36	worlddiabe- tescongress.org/
cine	Jun 12-13	Smithers British Columbia	Comprehensive Advanced Life Support: CALS	Smithers CME	250-476-1119	sml@xplornet. com
cy Medi	Jul 13-16	Las Vegas Nevada	Annual National Emergency Medicine Boards Review	Center for Emergency Medical Education	800-651-2363	ceme.org
Emergency Medicine	Aug 21-25	Phoenix Arizona	American College Of Chest Physicians Critical Care Medicine Board Review 2009	American College of Chest Physicians	800-343-2227	chestnet.org
ū	Oct 11-14	Vienna Austria	22nd Annual Congress Of The European Society Of Intensive Care Medicine	ESICM	011-32-2-559- 0355	esicm.org
	Jun 06-14	Mediterranean Cruise	Endocrinology Update	Sea Courses Cruises	888-647-7327 See Ad Page 32	seacourses.com
Endocrinology	Jul 10-17	Seattle Washington	Hot Topics At Sea: Multidisciplinary Management Of Hepatic, Pancreatic & Biliary Malignancies	Johns Hopkins University School of Medicine	410-955-2959	hopkinscme.edu
	Aug 24-28	Winnipeg Manitoba	Internal Medicine	University of Manitoba & Travel Manitoba	204-789-3660 See Centre Supplement	umanitoba.ca
	Oct 08-10	La Jolla California	4th Annual Frontiers Of Clinical Investigation Symposium	University of California	858-534-3940	ucsd.edu

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	May 07-09	Toronto Ontario	7th Annual Primary Care Today Conference	Primary Care Today	888-443-6786 See Ad Page 34	primarycareto- day.ca
	May 15-16	San Diego California	Integrative And Holistic Nursing Conference: Bringing Healing To You And Your Patients	Scripps Conference Services	858-652-5400	scripps.org
nily	Jun 27- Jul 05	San Jose Costa Rica	Adolescent Medicine And Young Adults: Costa Rica Adventure Tour	MCE Conferences	888-533-903 I	mceconfer- ences.com
General & Family Medicine	Aug 03-05	Seward Alaska	Most Useful Topics In Mental Health Issues For Primary Care	MCE Conferences	888-533-903 I	mceconfer- ences.com
Gener	Aug 17-21	Winnipeg Manitoba	Physician Resilience	University of Manitoba & Travel Manitoba	204-789-3660	umanitoba.ca
	Sep 19- Oct 03	Mediterranean Cruise	Women's Health		888-523-3732 See Ad Page 35	cmeatsea.org
	Oct 24-27	Paris France	I 2th Annual European Congress Of International Society For Pharmaeconomics & Outcomes Research	ISPOR	800-992-0643	ispor.org
S	Apr 21-26	Whistler British Columbia	Stem Cell Niche Interactions	Keystone Symposia	800-253-0685	keystonesympo- sia.org
Genetics	Jul 05-12	Alaskan Cruise	Geriatric/Cardiology		888-523-3732 See Ad Page 35	cmeatsea.org
	Oct 17-21	Atlanta Georgia	65th Annual Meeting Of The American Society For Reproductive Medicine	ASRM	205-978-5000	asrm.org
X &	Apr 24	London England	Improving Immunohistochemistry 2009	EuroSciCon	enquiries@ euroscicon.com	euroscicon.com
Immunology & Allergy	Jun 24 - 28	Barcelona Spain	Drug Diversion	National Education Institute	866-685-6860 See Ad Page 33	neiconferences. com
Imn	Oct 20-24	Honolulu Hawaii	59th Annual Meeting Of The American Society Of Human Genetics	ASHG	301-634-7300	faseb.org
ases	Jul 11-17	Porto Portugal	8th European Society Of Clinical Microbiology & Infectious Diseases Summer School	Congrex Switzerland	011-41-61-686- 7711	escmid.org
Infectious Diseases	Aug 11-14	Winnipeg Manitoba	Infectious Diseases	University of Manitoba & Travel Manitoba	204-789-3660 See Centre Supplement	umanitoba.ca
Infec	Aug 27-30	St John's Newfoundland	Assessment And Action For Healthy Settings Conference	Atlantic Network for Prevention Research	866-843-9468	med.mun.ca
	May 17-20	Zefat Israel	International Conference On Bioethics Committees In Hospitals	ISAS International Seminars	011-972-2-652- 0574	isas.o.il
Legal Ethics	Sep 15-22	Florence Italy	Pan Europe Medical & Legal Conference	Cont. Professional Education Pty Ltd	011-61-7-3254- 3331	conferences21. com
	Oct 29- Nov 01	Baltimore Maryland	40th Annual Meeting Of The American Academy Of Psychiatry And The Law	American Academy of Psychiatry and the Law	860-242-5450	aapl.org

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calendar CME

cme	when	where	topic	sponsor	contact	website
	Jun 01-03	Birmingham England	2009 Conference Of British Renal Society	BRS	011-44-1483- 764-114	britishrenal.org
Nephrology	Oct 02-03	St. Petersburg Russia	3rd St. Petersburg Postgraduate Lecture Course In Nephrology:Actual Problems Of Nephrology & Dialysis	Prof.Vladimir Dobronravov	011-7-812-234- 6656	ndt-educational. org
2	Oct 15-18	Hannover Germany	Falk Liver Conference	Falk Foundation e.V.	011-49-761- 15140	drfalkpharma.de
	Apr 16-18	Edmonton Alberta	Alberta Brain Injury Conference 2009	Brain Injury Association of Alberta	888-533-5355	biaa.ca
λs.	May 17-19	Houston Texas	Goodman Oral Board Preparation: Neurosurgery Review By Case Management	American Assoc. of Neurological Surgeons	847-378-0500	aans.org
Neurology	Jul 17-18	Washington District of Columbia	Managing Coding & Reimbursement Challenges	American Association of Neurological Surgeons	847-378-0500	aans.org
	Aug 12-15	Vancouver British Columbia	MTBI 2009 – An International Conference On Mild Traumatic Brain Injury	Canadian Academy of Medical Education	604-685-0450 See Ad Page 45	mtbi2009.org
	Apr 25-26	Toronto Ontario	Nutrition For Docs 2009: Using Nutritional Supplements In Clinical Practice, A Practical, Evidence-Based Approach – Part I	University of Toronto	888-512-8173	utoronto.ca
Nutrition	Jul 11-15	New Orleans Louisiana	2009 Annual Conference Of The Society For Nutrition Education	Society for Nutrition Education	317-328-4627	sne.org
Nutr	Oct 04-09	Bangkok Thailand	19th International Congress Of Nutrition 2009	Asia Congress Events	011-662- 9600141	icn2009.com
	Nov 19-22	Santiago Chile	6th World Congress On Developmental Origins Of Health & Disease: From Developmental Biology To Action In Health	DOHaD Society	011-56-2-354- 6898	dohad2009.com
	Jun 04-06	Melbourne Australia	2009 Annual Scientific Meeting Of Australian Gynaecological Endoscopy Society	AGES	011-61-2-9967- 2928	ages.com.au
Obstetrics Gynecology	Jun 28- Jul 02	Portorose Slovenia	8th World Congress In Fetal Medicine	Fetal Medicine Foundation	011-44-20- 7034-3070	fetalmedicine. com
Gyn	Sep 28- Oct 09	Black Sea & Holy Lands Cruise	2009 Women's Health	Continuing Education, Inc./University at Sea	800-422-0711 See Ad Page 47	continuingedu- cation.net
	May 23-27	Vienna Austria	36th European Symposium On Calcified Tissues	European Calcified Tissue Society	011-44-145- 461-0255	ectsoc.org
Oncology	Jun 09-10	Marrakech Morocco	16th Colloque International De Médecine Ambulatoire Multidisciplinaire De L'association Des Médecins De Langue Française	AMLFC	800-387-2228	amlfc.org
	Sep 16-19	Athens Greece	7th International Symposium On Minimal Residual Cancer	Erasmus Conferences	011-30-210- 725-7693	ismrc2009.org



cme	when	endar where	topic	sponsor	contact	website
Ophthalmology	Jun 20-24	Toronto Ontario	2009 Annual Meeting & Exhibition Of Canadian Ophthalmological Society	COS	314-991-4100	biposa2009.org
	Sep 23-25	Glasgow Scotland	2009 British Isles Paediatric Ophthalmology & Strabismus Association Annual Meeting	Northern Networking Events Ltd	011-44-1355- 244-966	biposa2009.org
Oph	Dec 03-06	Rome Italy	8th International Symposium On Ocular Pharmacology & Therapeutics	Paragon Conventions	011-44-22-533- 0948	isopt2009.com
ement	May 28-3 I	Granada Spain	Ist International Course On Pain Medicine	Paragon Conventions	011-41-22-747- 7930	icpm.net
Pain Management	Jun 05-06	Saskatoon Saskatchewan	Headache Conference	University of Saskatchewan	306-966-7795	usask.ca
Pain	Nov 06-08	Scottsdale Arizona	Scottsdale Headache Symposium 2009	American Headache Society	856-423-0043	americanhead- achesociety.org
	Jun 27- Jul 03	Maui Hawaii	Pediatrics In The Islands Clinical Pearls 2009	University Childrens Medical Group	323-361-2752	ucmg.org
Pediatrics	Jul 13-17	Kauai Hawaii	27th Kaiser Permanente National Pediatric Conference	Meetings by Design	510-527-9500	meetingsbyde- sign.com
	Sep 09-12	New York New York	8th Joint Conference Of The European Society For Pediatric Endocrinology & The Lawson Wilkins Pediatric Endocrine Society	ESPE	011-44-145- 464-2208	lwpes- espe2009.org
	Oct 14-18	Shanghai China	13th Asian Pacific Congress Of Pediatrics	Chinese Medical Association	011-86-10- 8515-8150	chinamed.com. cn
Primary Care	Jun 07-11	Paris France	13th International Congress Of Parkinson's Disease & Movement Disorders	Movement Disorder Society	414-276-2145	movementdis- orders.org
	Jun 22- July 04	British Isles/ Norwegian Fjords Cruise	Gastroenterology For The PCP	Continuing Education, Inc./University at Sea	800-422-0711 See Ad Page 47	continuingedu- cation.net
уgс	May 15-16	Baltimore Maryland	5th Annual Advances In The Diagnosis & Treatment Of The Rheumatic Diseases	Johns Hopkins School of Medicine	410-502-9634	hopkinscme.ed
Rheumatology	Jun 10-13	Copenhagen Denmark	European League Against Rheumatism - Annual 2009 Congress	EULAR	011-41-44-716- 3030	eular.org
Rheu	Jun 12-22	Baltic Sea & Russian Cruise	Rheumatology And Chronic Pain	Sea Courses Cruises	888-647-7327 See Ad Page 32	seacourses.cor
Rural Medicine	Oct 01-21	Everest Base Camp, Nepal	Emergency Medicine CME On Everest	Wilderness Medical Society	888-308-3007	tandtadven- tures.com
	Oct 06-07	Portland Oregon	2009 Rural Health Clinic Conference	National Rural Health Association	816-756-3140	ruralhealthweb org
	Dec 09-11	Memphis Tennessee	2009 Minority And Multicultural Health Conference	National Rural Health Association	816-756-3140	ruralhealthweb org

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ORGANIZATION

Canadian Diabetes Association du Diabète

All enquiries and correspondence in relation to the congress should be directed to:

20th World Diabetes Congress International Diabetes Federation Avenue Emile De Mot 19 B-1000 Brussels • Belgium Telephone: +32-2-5431632 Telefax: +32-2-2-4030830 E-mail: wdc@idf.org

Diabète





How to pay less tax

5 tax write-offs you could be missing

did not know I could claim those!" This is the response I regularly receive from new clients when I talk about the following tax-deductible expenses.

1 home office

CRA's party line in reference to deducting home office expenses is that it must either be the principal place of business, or be used exclusively to earn practice income by meeting patients there on a regular basis. Not necessarily. If you work in a capacity where you do not have your own office available, e.g. part-time locum, anesthesiologist, emergency physician etc., then your home office is your principal place of business. Additionally, claiming home office expenses when you have your own clinic office is still possible, as long as you consult with patients over the phone from your home.

Deductible expenses relating to the workspace include rent, insurance, property taxes, mortgage interest, utilities, repairs, landscaping etc. These expenses must be apportioned between practice and non-practice use on a reasonable basis. For example, you can calculate either the square footage of floor space used or the number of rooms, whichever gives you the largest claim. If your office space is 300 square feet in a 3,000-square-feet home, and the total expenses are \$30,000, then you can deduct 10% or \$3,000. If your house consists of three bedrooms, one of which is used for office space, a living and dining area, and an unfinished basement, then you should be able to claim one guarter, or \$7,500. Bathrooms and unfinished basements don't count. Don't forget to also give your accountant the receipts for furnishing your home office as any major purchases are considered capital expenditures and must be depreciated over time.

2 salary to spouse

Shifting income in the form of salary or administration fee to your low-income spouse is particularly useful when you are facing a big personal tax bill on your unincorporated practice income. This maneuver can create significant tax savings. If an annual fee of \$25,000 is reasonable for the administrative services provided by your spouse, then the tax savings are about \$6,000. A note of caution: If the contract fee to your spouse exceeds \$30,000 per annum, you will be subject to GST.

3 automobile expenses

As you likely use your vehicle for both personal and practice use, you need to correctly allocate the expenses. The easiest way is to use a mileage

I did not

know I could

claim those!

log. Happily, CRA has eased off the demand that you maintain yearly detailed mileage and, starting with the 2009 tax year, it will be sufficient to maintain a log book for only a representative

period during the year. Many physicians who work in a hospital or take locum assignments are not aware that travelling between home and the hospital constitutes practice use of the automobile.

If you have a medical corporation, you probably own the car personally and the company reimburses you for any practicerelated travel. The reimbursements are tax-free as long as they are considered "reasonable." For 2008, CRA considers a reasonable allowance as \$0.52 per kilometre for the first 5,000 km, and \$0.46 for each additional kilometre. The question here is, should you continue to own the car or should the company purchase a car for your use? Before you consider this question seriously, you must meet the following criteria. Firstly, the practice use of the car must account for 50% or more of the total kilometres driven, and secondly, your personal use of the car must be less than 1,667 km per month. If you pass these two tests then the punitive tax is reduced. If not, a standby charge of 2% per month of the original cost of the car will apply. On the surface, it seems that having your corporation purchase or lease a vehicle

is an appealing option, but before you proceed, I advise you to check with your accountant as the rules of corporate car ownership are fairly complex.

4 meals and entertainment

While on the subject of complexity, claiming meals and entertainment expenses is just as tricky as automobile expenses. Generally, only 50% of meals and entertainment costs is deductible. The full amount of the expenses can be claimed for meals and entertainment, if it is provided

> to all of the employees, to a maximum of three functions per year. I find that a lot of physicians miss out on deducting the costs of entertaining at home, so remember, if you invite your colleagues over for

dinner and drinks to discuss changes to the cost-share agreement, these entertainment expenses are absolutely deductible.

5 medical library

When starting out on their medical career, many physicians fail to claim the cost of the books they bring to the practice. If this sounds familiar and you don't have receipts, use an estimate of the fair market value as you can amortize the library at 20% annually. Other professional journals and books you purchase while practicing can be deducted immediately.

As I am sure you are painfully aware, there is much more to income tax preparation than buying a Turbo Tax program. Don't miss out on these and other practice expenses that could have a major impact on your tax savings. Retain a savvy accountant who really understands the medical profession.

Manfred Purtzki is the principal of Purtzki & Associates Chartered Accountants. You can reach him at manfred@purtzki.com.



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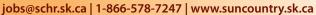
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sudoku 1 easier solution

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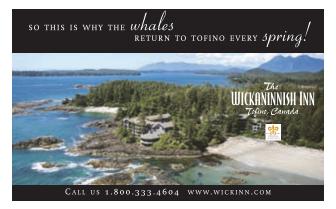
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winner of last issue's sudoku contest: Dr. Julie Schollenberg of Rothesay, NB

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Puzzle by websudoku.com

sudoku 2 harder solution in next issue 6 7 3 8 3 7 4 1 8 3 4 8 1 9 5 9 7 1 1 5 2 9 7 1 2 8 5 6 5 3 1 2

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FAX:

5. All entries become property of In Print Publications. Employees of In Print Publications and its affiliates are not eligible to participate.



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Dr. Art Hister is a well-known TV and radio personality on the west coast who has overcome a fear of public speaking. He's also an avid hiker whose guilty pleasure is "eating way, way too much" (and if stranded on a desert island, his must-have would be a hefty supply of wine). A bit of a dichotomy? His picks range from *My Cousin Vinny* to *Pride and Prejudice*, and if he wasn't a doctor he'd like to sit in the driver's seat of a race car...



SMALL TAL

FROM TOP Dr. Art Hister hiking at Lake O'Hara, in the BC Rockies; One of his favourite books, *Heart of Darkness* by Joseph Conrad (another, on the opposite end of the spectrum, is *Pride and Prejudice* by Jane Austen); Hiking again, this time in the United Kingdom.

My name: Art Hister I live and practise in: Don't practice, but live in Vancouver

My training: BSc McGill 68, MDCM McGill 70

Why I was drawn to medicine: I was very young and I simply did what my best friend did, and we both got in, much to my surprise

My last trip: St. Cuthbert's Way in the UK, Berlin

The most exotic place I've travelled: Agia Galini on the south side of Crete, 1969



The best souvenir l've brought back from a trip: Cheese

A favourite place that I keep returning to: UK, to hike; interior of BC, ditto

My ultimate dream vacation: Hiking in Patagonia America

If I could travel to any time, I'd go to: 1960s, hitchhiking everywhere, sleeping in fields, no money, eating rough—fantastic era

My favourite book: Heart of Darkness, Pride and Prejudice

My favourite movie: Apocalypse Now, Taxi Driver, My Cousin Vinny

My must-see TV show: Global TV Morning News, of course; never miss it

My favourite music: Keeps changing, but anything by Neil Young

My first job: Community Clinic in Pointe Claire, Quebec

The gadget or gear I could not do without: My wife: she understands gadgets better than anyone I know

My favourite room at home: Bedroom

My last purchase: 1999 Lexus SUV

My last splurge: Dinner

Most-frequented store: Same

My closet has too many: Shirts

My fridge is always stocked with: Fruit, pepperoni, white wine

My medicine cabinet is always stocked with: Nexium

My guilty pleasure is: Eating way, way too much, but no real guilt about it My favourite exercise/ activity: Working out at fitness facility; cycling

My favourite sport to watch: Football aka soccer in North America

My celebrity crush: Coen Brothers

I'd want this item with me if stranded on a desert island: Multi-year supply of wine

My secret to relaxing and relieving tension: Read, write, work out

A talent I wish I had: Writing fiction

My scariest moment: Blow-out on Coquihalla

My fondest memory: Birth of my kids

A big challenge I've faced: Overcoming fear of public speaking

One thing I'd change about myself: I would continue to speak Polish and Yiddish throughout my life

The word that best describes me: Chatty

I'm inspired by: Seniors who keep on trekking

My biggest ego boost: When a public talk actually works as I'd hoped

My biggest ego blow: When a public talk doesn't work as I'd hoped

I'm happiest when: Sitting at meals with my family, talking

My greatest fear is: Losing a family member

A cause that's close to my heart: Prevention of chronic diseases through lifestyle choices

A cause close to my heart: Holocaust and antiracism education efforts

Something I haven't done yet that's on my must-do list: Trek to Machu Pichu

If I wasn't a doctor I'd be: A very bad race car driver For more information—Call 800-422-0711 or visit www.ContinuingEducation.NET

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June 21, 2009 Practicing State of the Art Diabetes Care in 2009

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June 22, 2009 Neurology

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July 2, 2009 Orthopaedics and Sports Medicine for

Primary Care: Hands on examination techniques 14 AMA PRA Category 1 credits™ AAFP Applied for 10-Night Baltic Sea and London from Copenhagen Holland America's ms Eurodam

July 4, 2009 Cancer in Women

14 AMA PRA Category 1 credits[™] AAFP Applied for 12-Night Baltic Sea from Harwich, England Royal Caribbean's Jewel of the Seas

July 8, 2009 10th Annual Update in Gastroenterology 14 AMA PRA Category 1 credits™ AAFP Applied for 12-Night Arctic Circle and Norway from Amsterdam

Celebrity's Century

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Featured Destinations

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July 12, 2009 Infectious Disease

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July 31, 2009 Dermatology for the PCP 14 AMA PRA Category 1 credits[™] AAFP Applied for 7-Night Alaska Cruise Conference from Seattle Holland America's ms Zaandam

October 17, 2009 Women's Health

14 AMA PRA Category 1 credits[™] AAFP Applied for 14-Night Cradle of Civilization from Athens, Greece to Rome, Italy Holland America's ms Rotterdam

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