## good guys

to gently get Kenny onto the padded metal wire stretcher, and I placed one leg in a Thomas splint for his badly fractured femur. Then I threaded two intra-catheters into each broken arm's veins. The two young men carried the bottles of saline. Cappy assisted the young lad out of the plane and helped him hobble back to the lodge. A few hundred yards along the trail Kenny stopped breathing and I intubated him on the muddy path. Then his sterterous breathing reassured me as we carried Kenny along the swampy lakeshore.

While we were away Colonel Joe had gassed up the plane in anticipation of flying the injured back to Williams Lake.

"Doc, what say we strap Kenny to one of the pontoons? We don't have room in my plane."

"Colonel Joe, are you out of your mind? I'll get the RCMP's large Beaver aircraft to fly down from Prince George. When you get back to Williams Lake notify the hospital matron, Doreen Campbell, of our problems and we'll be back in three or four hours."

"OK. Doc."

We had a great trip back in the Beaver. My partner, John Hunt, and I in the War Memorial hospital splinted some of the 43 fractures and transfused Kenny with six units of blood. I retrieved the scalp from my brown sandwich bag and reattached it with many stitches. At dawn the next day Kenny was transferred by an Air-Sea Rescue Grumman flying boat to the Richmond docks and then to VGH under the care of Hammy. Kenny was to remain a patient in VGH for three years. Kenny returned to town with no crutches, and after a long 40 months, married Doreen Campbell, the hospital matron. Ken's recovery was due to the great treatment provided by Hammy and Hec and the resident staff of VGH. ECM

# council on health promotion

## Health Canada allows 10000 unproven remedies onto shelves

ecent industry concerns over Health Canada's backlog of roughly 10000 so-called natural remedies awaiting pre-market review1 have not gone unheeded by Health Canada. In a move reminiscent of a Kafka novel, the nation's foremost health protection agency has decided to address the bottleneck posed by an already woefully lax screening process by simply exempting products from such review altogether for at least a couple of years.

For more than a decade, products such as herbal, homeopathic, and similar remedies have been granted special regulatory status as natural health products (NHPs). Manufacturers are permitted to market these NHPs using claims that they produce health benefits. Currently, the standard proof of safety and effectiveness that applies to this class of products is far lower than those that apply to regular medications. Furthermore, once proper testing is done, almost all of these products fail to show compelling proof of efficacy, including products already on the market. Indeed, even after claims of health benefits are disproved, the products continue to be sold.

The problem of inadequate standards is compounded by the lack of resources at Health Canada to review and process a backlog of marketing applications.

This is not to say that unapproved natural products aren't on the shelves. They are, but producers are concerned that Health Canada might demand that unapproved products be removed from the marketplace. Although such a move might seem to be common sense to those concerned about consumer protection, Health Canada appears to have taken a different approach.

The current NHP regulations came into force in 2004 at which time Health Canada had an estimated 40 000 natural health product applications to review and provide licences for, and manufacturers had 6 years to meet Health Canada's requirements. Health Canada now says it will not be enforcing the now-passed 1 April 2010 deadline. The agency states that about 60% of applications it received have been processed. For the remaining 11 000 NHP applications received but not yet assessed, Health Canada on 4 August introduced the Natural Health Products (Unprocessed Product Licence Applications) Regulations. These state that these products can remain for sale to Canadians during the 21/2 years the agency believes it will take to apply the existing weak review standards for safety, efficacy, and quality. The benefits of this exemption will be huge—as far as producers are concerned. Health Canada recently estimated the retail value of the unapproved natural health products at between \$200 to \$930 million.2

The bottom line is that thousands of products remain unapproved by Health Canada but are still openly sold to unsuspecting Canadians, who might well believe that Health Canada wouldn't allow anything into stores unless it truly was safe and effective. At the end of 2009, pharmacy regulators concerned for patient health and safety instructed pharmacies across the county to stop selling unapproved natural health products. Health Canada's maneuver appears to sidestep the concerns by neatly declaring those same products "approved pending review."

The proposal to defer the weak review process that exists within Health

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## pulsimeter

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## Core-Plus Plan reminder

The open enrollment period for the Core-Plus Plan under the BCMA Health Benefits Trust Fund is underway. The deadline to enroll in this program, or to make changes to your coverage if you are already participating, is 31 October 2010. New coverage or changes to existing coverage for members who submit the required plan documents by the deadline will be effective 1 January 2011.

If you have any questions regarding the open enrollment period or the plans offered under the BCMA Health Benefits Trust Fund, please visit www .bcma.org/hbtf or contact an HBTF Administrator:

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-Sandie Braid, CEBS **Assistant Director, BCMA Insurance** 

### worksafebc

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and orthobiologics, especially the bone morphogenic protein (BMP)-7.

Full documents and other systematic reviews can be downloaded from www.worksafebc.com/evidence.

> -Kukuh Noertjojo, MD, MHSc, MSc —Craig Martin, MD, MHSc WorkSafeBC Evidence-**Based Practice Group**

#### References

References are available by calling Carmen Prang at 604 244-6224 or toll-free 1 800 967-5377, extension 6224 or carmen.prang@ worksafebc.com or online at www.bcmj.org.

#### cdc

Continued from page 413 early screening in high-risk CKD patients, as anergy may be less of a confounder in those with less advanced disease. Once LTBI infection is established, prophylactic therapy should be considered in consultation with TB control and the patient's personal physicians. As always, an ounce of prevention trumps a pound of cure.

## cohp

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Canada's Natural Health Products Directorate places Canadians in harm's way by failing to prevent exaggerated health claims and by exposing consumers to unnecessary health risks. Given that medical claims made on behalf of NHPs typically exceed the evidence of medical benefit, and that significant safety issues with various NHPs continue to be discovered upon proper scientific testing, many Canadians will wonder if a near-billion-dollar bonanza to industry is worth the price.

#### —Lloyd Oppel, MD Chair, Allied Health Practices Committee

#### References

- 1. Geddes J. Problems in the natural health products aisle. Maclean's 3 October 2009. www2.macleans.ca/ 2009/10/03/problems-in-the-naturalhealth-products-aisle/ (accessed 23 August 2010).
- 2. Gavura S. Health Canada gets out a big rubber stamp. Science-based Pharmacy [blog] 15 July 2010. http:// sciencebasedpharmacy.wordpress .com/2010/07/15/health-canadagets-out-a-big-rubber-stamp/ (accessed 23 August 2010).

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