



[§1.5 billion at stake as tobacco smuggling lawsuit relaunched.](https://arctichealth.org/en/permalink/ahliterature183644)

<https://arctichealth.org/en/permalink/ahliterature183644>

Author: Louise Gagnon

Source: CMAJ. 2003 Sep 16;169(6):593

Date: Sep-16-2003

Language: English

Publication Type: Article

Keywords: Canada

Crime - economics - legislation & jurisprudence

Health Promotion - economics - legislation & jurisprudence

Humans

Marketing of Health Services - economics - legislation & jurisprudence

Smoking - economics - legislation & jurisprudence

State Health Plans - economics - legislation & jurisprudence

Taxes - economics - legislation & jurisprudence

Tobacco Industry - economics - legislation & jurisprudence

United States

PubMed ID: 12975235 [View in PubMed](#) 

1,005 delayed days: a study of adult psychiatric discharge.

<https://arcticealth.org/en/permalink/ahliterature244608>

Author: P A Barrette
Source: Hosp Community Psychiatry. 1981 Apr;32(4):266-8
Date: Apr-1981
Language: English
Publication Type: Article
Keywords: Adult
Canada
Hospitals, Community
Hospitals, Psychiatric - organization & administration
Humans
Length of Stay
Patient Acceptance of Health Care
Patient Discharge

Abstract: Delay in discharge of psychiatric patients frequently is attributed to the lack of available community resources, or to the unwillingness of the patient or his family to accept discharge or transfer to another facility. The role of the psychiatric system itself rarely is mentioned as a factor. A study of 138 psychiatric patients in a Canadian community hospital in 1978 showed that 35 per cent were judged to be delayed in their discharge. By far the greatest source of delay was the administration of the various psychiatric services within the system. Delayed patients were found to be statistically similar to nondelayed patients, except for the delayed patients tendency to be poorer and to be overrepresented on two of the six wards studied. The cost implications of the delays in discharge are discussed, as are suggestions for solving the problems within the administrative framework.

PubMed ID: 7227988 [View in PubMed](#) 

The 1 alpha-hydroxylase locus is not linked to calcium stone formation or calciuric phenotypes in French-Canadian families.

<https://arcticealth.org/en/permalink/ahliterature206213>

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Source: J Am Soc Nephrol. 1998 Mar;9(3):425-32
Date: Mar-1998
Language: English
Publication Type: Article

Keywords: 25-Hydroxyvitamin D3 1-alpha-Hydroxylase - genetics - metabolism
Adult
Calcium - urine
Canada
European Continental Ancestry Group - genetics
Family Health
Female
France - ethnology
Genetic Linkage
Genetic Markers - genetics
Humans
Kidney Calculi - enzymology - genetics
Male
Middle Aged
Nuclear Family
Pedigree
Phenotype
Vitamin D - blood

Abstract: Calcium urolithiasis is often associated with increased intestinal absorption and urine excretion of calcium, and has been suggested to result from increased vitamin D production. The role of the enzyme 1 alpha-hydroxylase, the rate-limiting step in active vitamin D production, was evaluated in 36 families, including 28 sibships with at least a pair of affected sibs, using qualitative and quantitative trait linkage analyses. Sibs with a verified calcium urolithiasis passage (n = 117) had higher 24-h calciuria (P = 0.03), oxaluria (P = 0.02), fasting and postcalcium loading urine calcium/creatinine (Ca/cr) ratios (P = 0.008 and P = 0.002, respectively), and serum 1,25(OH)₂ vitamin D levels (P = 0.02) compared with nonstone-forming sibs (n = 120). Markers from a 9-centiMorgan interval encompassing the VDD1 locus on chromosome 12q13-14 (putative 1 alpha-hydroxylase) were analyzed in 28 sibships (146 sib pairs) of single and recurrent stone formers and in 14 sibships (65 sib pairs) with recurrent-only (> or = 3 episodes) stone-forming sibs. Two-point and multipoint analyses did not reveal excess in alleles shared among affected sibs at the VDD1 locus. Linkage of stone formation to the VDD1 locus could be excluded, respectively, with a lambda d of 2.0 (single and recurrent stone formers) and 3.25 (recurrent stone formers). Quantitative trait analyses revealed no evidence for linkage to 24-h calciuria and oxaluria, serum 1,25(OH)₂ vitamin D levels, and Ca/cr ratios. This study shows absence of linkage of the putative 1 alpha-hydroxylase locus to calcium stone formation or to quantitative traits associated with idiopathic hypercalciuria. In addition, there is coaggregation of calciuric and oxaluric phenotypes with stone formation.

PubMed ID: 9513904 [View in PubMed](#) 

[1 Canadian Field Hospital in Haiti: surgical experience in earthquake relief.](#)

<https://arctichealth.org/en/permalink/ahliterature122035>

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Source: Can J Surg. 2012 Aug;55(4):271-4

Date: Aug-2012

Language: English

Publication Type: Article

Keywords: Canada
Disaster Planning - organization & administration
Earthquakes
Female
Haiti
Hospitals, Packaged - organization & administration
Humans
International Cooperation
Male
Multiple Trauma - etiology - surgery
Operating Rooms
Relief Work - organization & administration
Surgical Procedures, Operative - statistics & numerical data

Abstract: The Canadian Forces' (CF) deployable hospital, 1 Canadian Field Hospital, was deployed to Haiti after an earthquake that caused massive devastation. Two surgical teams performed 167 operations over a 39-day period starting 17 days after the index event. Most operations were unrelated to the earthquake. Replacing or supplementing the destroyed local surgical capacity for a brief period after a disaster can be a valuable contribution to relief efforts. For future humanitarian operations/disaster response missions, the CF will study the feasibility of accelerating the deployment of surgical capabilities.

Notes: Cites: Disasters. 2000 Sep;24(3):262-7011026159
Cites: Prehosp Disaster Med. 2003 Oct-Dec;18(4):278-9015310039
Cites: Disaster Manag Response. 2005 Jan-Mar;3(1):11-615627125
Cites: Mil Med. 2007 May;172(5):471-717521092
Cites: Prehosp Disaster Med. 2008 Mar-Apr;23(2):144-51; discussion 152-318557294
Cites: Ann Intern Med. 2010 Jun 1;152(11):733-720197507
Cites: Prehosp Disaster Med. 2009 Jan-Feb;24(1):9-1019557952
Cites: Science. 2010 Feb 5;327(5966):638-920133550
Cites: Nature. 2010 Feb 18;463(7283):878-920164905
Cites: N Engl J Med. 2010 Mar 18;362(11):e3820200362
Cites: Prehosp Disaster Med. 2009 Jan-Feb;24(1):3-819557951

PubMed ID: 22854149 [View in PubMed](#) 

The 1st Annual Awards for Action on HIV/AIDS and Human Rights.

<https://arctichealth.org/en/permalink/ahliterature182022>

Author: Thomas Kerr
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Source: Can HIV AIDS Policy Law Rev. 2002 Dec;7(2-3):1, 20-3

Date: Dec-2002

Language: English
French

Publication Type: Article

Keywords: Awards and Prizes
Canada
HIV Infections
Human Rights
Humans
Physicians

Abstract: The 1st Annual Awards for Action on HIV/AIDS and Human Rights were awarded to the Vancouver Area Network of Drug Users and to Dr. Wan Yanhai, a Chinese physician and activist. The international attention and media coverage of the awards was heightened by the fact that the Chinese government had detained Dr. Wan for disclosing information about unsanitary blood collection practices in Henan province. An international outcry led to Dr. Wan's release on 20 September 2002.

PubMed ID: 14719485 [View in PubMed](#) 

1st Canadian conference on hepatitis C.

<https://arctichealth.org/en/permalink/ahliterature191313>

Author: M. Fletcher

Source: Can Nurse. 2001 Aug;97(7):14-6

Date: Aug-2001

Language: English

Publication Type: Conference/Meeting Material

Keywords: Canada
Hepatitis C - drug therapy - economics - transmission
Humans
Nurse's Role
Patient Education as Topic

PubMed ID: 11868223 [View in PubMed](#) 

The 1st step: a personal health-care planner from the Canadian Cancer Society.

<https://arctichealth.org/en/permalink/ahliterature229611>

Author: C. Jamieson
Source: J Palliat Care. 1990;6(2):48-50
Date: 1990
Language: English
Publication Type: Article
Keywords: Canada
Humans
Neoplasms - psychology
Patient Education as Topic - methods
Voluntary Health Agencies
PubMed ID: 2376807 [View in PubMed](#) 

A 1-year community-based health economic study of ciprofloxacin vs usual antibiotic treatment in acute exacerbations of chronic bronchitis: the Canadian Ciprofloxacin Health Economic Study Group.

<https://arctichealth.org/en/permalink/ahliterature206818>

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Source: Chest. 1998 Jan;113(1):131-41
Date: Jan-1998
Language: English
Publication Type: Article

Keywords:

Adolescent
Adult
Anti-Infective Agents - adverse effects - economics - therapeutic use
Bronchitis - drug therapy - economics
Canada
Chronic Disease
Ciprofloxacin - adverse effects - economics - therapeutic use
Cost-Benefit Analysis
Female
Follow-Up Studies
Health Care Costs
Hospitalization - economics
Humans
Male
Middle Aged
Predictive value of tests
Quality-Adjusted Life Years
Recurrence
Treatment Outcome

Abstract:

To evaluate the costs, consequences, effectiveness, and safety of ciprofloxacin vs standard antibiotic care in patients with an initial acute exacerbation of chronic bronchitis (AECB) as well as recurrent AECBs over a 1-year period.

Randomized, multicenter, parallel-group, open-label study.

Outpatient general practice.

A total of 240 patients, 18 years or older with chronic bronchitis, with a history of frequent exacerbations (three or more in the past year) presenting with a type 1 or 2 AECB (two or more of increased dyspnea, increased sputum volume, or sputum purulence).

The assessment included AECB symptoms, antibiotics prescribed, concomitant medications, adverse events, hospitalizations, emergency department visits, outpatient resources such as diagnostic tests, procedures, and patient and caregiver out-of-pocket expenses. Patients completed the Nottingham Health Profile, St. George's Respiratory Questionnaire, and the Health Utilities Index. The parameters were recorded with each AECB and at regular quarterly intervals for 1 year. These variables were compared between the ciprofloxacin-treated group and the usual-care-treated group.

Patients receiving ciprofloxacin experienced a median of two AECBs per patient compared to a median of three AECBs per patient receiving usual care. The mean annualized total number of AECB-symptom days was 42.9+/-2.8 in the ciprofloxacin arm compared to 45.6+/-3.0 days in the usual-care arm (p=0.50). The overall duration of the average AECB was 15.2+/-0.6 days for the ciprofloxacin arm compared to 16.3+/-0.6 days for the usual-care arm. Treatment with ciprofloxacin tended to accelerate the resolution of all AECBs compared to usual care (relative risk=1.20; 95% confidence interval [CI], 0.91 to 1.58; p=0.19). Treatment assignment did not affect the interexacerbation period but a history of severe bronchitis, prolonged chronic bronchitis, and an increased number of AECBs in the past year were associated with shorter exacerbations-free periods. There was a slight, but not statistically significant, improvement in all quality of life measures with ciprofloxacin over usual care. The only factors predictive of hospitalization were duration of chronic bronchitis (odds ratio=4.6; 95% CI, 1.6, 13.0) and severity of chronic bronchitis (odds ratio=4.3; 95% CI, 0.8, 24.6). The incremental cost difference of \$578 Canadian in favor of usual care was not significant (95% CI, -\$778, \$1,932). The cost for the ciprofloxacin arm over the usual care arm was \$18,588 Canadian per quality-adjusted life year gained. When the simple base case analysis was expanded to examine the effect of risk stratification, the presence of moderate or severe bronchitis and at least four AECBs in the previous year changed the economic and clinical analysis to one favorable to ciprofloxacin with the ciprofloxacin-treated group having a better clinical outcome at lower cost ("win-win" scenario).

Treatment with ciprofloxacin tended to accelerate the resolution of all AECBs compared to usual care; however, the difference was not statistically significant. Further, usual care was found to be more reflective of best available care rather than usual first-line agents such as amoxicillin, tetracycline, or trimethoprim-sulfamethoxazole as originally expected. Despite the similar antimicrobial activities and broad-spectrum coverage of both ciprofloxacin and usual care, the trends in clinical outcomes and all quality of life measurements favor ciprofloxacin. In patients suffering from an AECB with a history of moderate to severe chronic bronchitis and at least four AECBs in the previous year, ciprofloxacin treatment offered substantial clinical and economic benefits. In these patients, ciprofloxacin may be the preferred first antimicrobial choice.

PubMed ID:

9440580 [View in PubMed](#) 

A 1-year, three-couple expedition as a crew analog for a Mars mission.

<https://arctichealth.org/en/permalink/ahliterature31234>

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Source: Environ Behav. 2002 Sep;34(5):672-700

Date: Sep-2002

Language: English

Publication Type: Article

Keywords: Adaptation, Psychological
Adult
Aerospace Medicine
Arctic Regions
Astronauts - psychology
Canada
Child
Cold Climate
Darkness
Expeditions
Female
Humans
Interpersonal Relations
Male
Mars
Norway
Personality
Personnel Selection
Questionnaires
Social Isolation
Space Simulation
Spouses - psychology

Abstract: This study assessed the intrapersonal and interpersonal functioning of a three-couple expedition group that included a 2 1/2-year-old child which was ice-locked on a boat in the High Arctic during a major portion of the expedition. Personality assessment indicated that team members were generally well adjusted, scoring relatively higher on well-being and achievement and relatively lower on stress reactivity. Weekly mood ratings showed that the group exhibited significantly higher positive than negative affect. Reported negative events were relatively most frequent at the beginning of the Arctic stay and toward the end of the darkness period and were lowest during the initial darkness interval. The period of darkness had both a salutary and negative impact. A highly important means of coping with stress was seeking emotional support from one's partner. Selection of couples with strong bonds with their partner appears to be one viable approach for crew selection for long-duration missions.

PubMed ID: 12481801 [View in PubMed](#) 

The 2 × 2 model of perfectionism: a comparison across Asian Canadians and European Canadians.

<https://arctichealth.org/en/permalink/ahliterature123132>

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Source: J Couns Psychol. 2012 Oct;59(4):567-74

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Language: English

Publication Type: Article

Keywords: Adolescent

Adult

Asian Continental Ancestry Group - psychology

Canada

Cross-Cultural Comparison

Educational Status

Emigrants and Immigrants - psychology

European Continental Ancestry Group - psychology

Factor Analysis, Statistical

Female

Humans

Male

Middle Aged

Models, Psychological

Personal Satisfaction

Personality

Students - psychology

Abstract: The 2 × 2 model of perfectionism posits that the 4 within-person combinations of self-oriented and socially prescribed perfectionism (i.e., pure SOP, mixed perfectionism, pure SPP, and nonperfectionism) can be distinctively associated with psychological adjustment. This study examined whether the relationship between the 4 subtypes of perfectionism proposed in the 2 × 2 model (Gaudreau & Thompson, 2010) and academic outcomes (i.e., academic satisfaction and grade-point average [GPA]) differed across 2 sociocultural groups: Asian Canadians and European Canadians. A sample of 697 undergraduate students (23% Asian Canadians) completed self-report measures of dispositional perfectionism, academic satisfaction, and GPA. Results replicated most of the 2 × 2 model's hypotheses on ratings of GPA, thus supporting that nonperfectionism was associated with lower GPA than pure SOP (Hypothesis 1a) but with higher GPA than pure SPP (Hypothesis 2). Results also showed that mixed perfectionism was related to higher GPA than pure SPP (Hypothesis 3) but to similar levels as pure SOP, thus disproving Hypothesis 4. Furthermore, results provided evidence for cross-cultural differences in academic satisfaction. While all 4 hypotheses were supported among European Canadians, only Hypotheses 1a and 3 were supported among Asian Canadians. Future lines of research are discussed in light of the importance of acknowledging the role of culture when studying the influence of dispositional perfectionism on academic outcomes.

PubMed ID: 22731112 [View in PubMed](#) 