



McCrone Publications Inc.

HEALTH *beat*

November 2005
Volume 8, Issue 8

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DIRECTOR, CLIENT SERVICES - INUVIK REGIONAL HOSPITAL

Reference # 2005-94-3158 - CLOSING DATE: November 18, 2005

Salary ranges from \$45.55 - \$65.07 per hour depending on education & experience - Northern Allowance of \$4.39 per hour (\$8,552.00/yr.) is provided. RELOCATION ASSISTANCE IS AVAILABLE.

The Beaufort Delta Health & Social Services Authority serves a population of 7,500 people in the Beaufort Delta Region of the North West Territories. You will be headquartered at the Inuvik Regional Hospital, a 47-bed facility, in a modern community of 3,500.

Reporting to the CEO, you will plan, organize and lead multi-disciplinary teams striving to meet the clinical needs for the Inuvik Regional Hospital, Public Health and Homecare programs, Continuing Care and Independent Living programs including two Long Term Care units, contractual services for an 8 bed Chronic Care unit, 5 bed Adult Group Home and contracts for clients receiving care outside the Inuvik Region. Scope of responsibility also includes directing the operations of 7 Community Health Centres located in the Inuvik Region. You will work as part of a senior management team in one of the most integrated service delivery systems in Canada.

The successful candidate will possess a Bachelor of Science in Nursing supplemented with Health Management preferably at the Masters level with a minimum of 5 years of Management experience including successful completion of a recognized program in Health Care Administration. You will be required to demonstrate excellent written and oral communication skills, analytical and problem-solving skills, systems thinking, leadership and team building abilities are necessary.

Knowledge of Clinical Program Management, Continuous Quality Improvement and Risk Management are required. Having experience in a hospital setting such as acute and or emergency care, community and rural health is mandatory. Expertise with word-processing, electronic communication systems, coupled with demonstrated tact and diplomacy are required. Previous experience working with first nations populations is a valuable asset. A satisfactory criminal records check, medical clearance and Class 5 driver's license are required.

Other Career Opportunities....

- Medical Radiation Technologist/Sonographer
- Registered Nurses - Acute Care - Inuvik Regional Hospital
Salary ranges from \$33.30 - \$35.02 per hour based on experience
- Registered Nurses - Long Term Care - Inuvik Regional Hospital
Salary ranges from \$31.96 - \$33.61 per hour based on experience plus northern allowance of \$8552.00 per annum
- Community Health Nurses - various communities
Salary ranges from \$36.18 - \$38.05 per hour depending on experience plus northern allowance \$4.70 - \$7.23 per hour depending on community. Nursing Station Allowance is applicable for any 1-3 nurse stations.
- Nurses in Charge - various communities
Salary ranges from \$39.30 - \$41.33 per hour depending on experience plus northern allowance \$4.70 - \$7.23 depending on community.
- Regional Speech Language Pathologist
- Mental Health/Addictions Counsellors - various communities
- Community Social Service Workers - various communities
- Medical Laboratory Technologists
Salary starts at \$30.64 per hour plus \$8552 northern allowance per annum

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To provide healthcare professionals with job opportunities, continuing education, new products, resources, and editorials to help them succeed in their careers.

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HEALTHbeat Welcomes Cheryl Lee to its

Sales Staff! We are pleased to announce the addition of Cheryl Lee to our staff at HEALTHbeat. You will find that Cheryl's extensive experience in sales, her problem solving, listening and writing skills will help you in creating just the right advertisement to meet your recruitment or product line needs. Some of you have already talked to Cheryl during the preparation of this issue of HEALTHbeat. For those of you who haven't, we are pleased to introduce her to you. **Welcome to HEALTHbeat Cheryl!**



Editorial: by Jennifer (Jay) Sherwood BScN, MEd.

Trends in Geographic Mobility of Physicians and the Regulated Nursing Workforce in Canada: CIHI Reports

The Canadian Institute for Health Information (CIHI) is a not-for-profit, independent organization that has as its main goal, the collection of Canadian health information. It is dedicated to forging a common approach to "provide timely, accurate and comparable information." The data it collects has informed health policy makers, supported the delivery of health care and raised the awareness of Canadians about the factors that contribute to good health. HEALTHbeat has reported on the data collected by CIHI several times over the last few years and it is time once again to address the latest data about physicians and nurses that it released in August and October (2005) respectively. The focus of this editorial is to look specifically at the mobility trends of these two health professional groups as reported in four large CIHI reports, namely:

- Supply, Distribution and Migration of Canadian Physicians, 2004;
- Workforce Trends of Registered Nurses in Canada, 2004;
- Workforce Trends of Licensed Practical Nurses in Canada, 2004; and
- Workforce Trends of Registered Psychiatric Nurses in Canada, 2004.

All four of these reports are available for download, free of charge in PDF format on the CIHI website www.cihi.ca.

Physicians

For the first time since 1969 when data began to be collected, more Canadian physicians are returning to Canada than those who are leaving. Overall, the number of physicians in Canada increased by 5% between 2000 and 2004. Canada's population also grew during this period and the number of physicians per 100,000 population has remained quite stable.

During the same period (2000-2004) there was a decrease in the number of physicians leaving the country and an increase in the number returning home. 25% of the physicians who emigrated in 2004 earned their medical degree outside of Canada and 44% received their degrees within the last 10 years. Of those who left Canada the majority were men. As well, men made up the majority of those who returned. CIHI says that these new numbers reflect a trend that has been evident since the mid-nineties i.e. fewer physicians leaving. The other notable trend is that the total number of physicians has kept pace with population growth. Neither one of these trends answers the question about having enough doctors. Rather the data in the report serves to help understand the factors contributing to the supply of physicians and the demographics of the physician workforce.

Nurses

The new nursing reports cover all three regulated nursing groups in Canada. These are: registered nurses; licensed practical nurses; and, registered psychiatric nurses. In 2004, there were more than 300,000 regulated nurses working in Canada. In general, Canada has steadily relied on nurses who are educated at home and over the last 10 years the number of foreign trained nurses (7% of the total workforce) has remained fairly stable. As well, according to the highlights of the three reports it looks as if the majority of Canadian nurses stays in or returns to the province from which they graduated from their nursing programs.

Within Canada, British Columbia and Ontario drew more foreign trained nurses than any other province or territory. Of Canadian nursing graduates who moved interprovincially after graduation, the highest number chose to work in BC, Alberta and Ontario. For foreign trained nurses, Ontario drew more than half, BC almost a quarter and Quebec less than 10%. Taken together, almost 40% of BC's nursing workforce did not graduate in BC. Amongst Canadian graduates alone, the percentages of nurses working outside their original jurisdiction, BC (26%), Alberta (25%) and Prince Edward Island (23%) had the highest proportions while Quebec (3.5%) and Newfoundland and Labrador (5.4%) had the lowest.

Registered Nurses (RNs): Once registered nurses graduate from their nursing programs those graduating in Quebec, BC and Ontario were most likely to be employed in their province of graduation. Lower proportions (although significantly more than half) of graduates from Saskatchewan, PEI and Newfoundland and Labrador remain in those provinces. Overall, almost nine out of ten graduates of Canadian nursing programs working in Canada in 2004 either didn't move after graduation or returned to their home jurisdiction.

Licensed Practical Nurses (LPNs): In 2004, the LPN workforces in BC and Ontario had the highest concentration of foreign graduates. These percentages (BC 4.0%; Ontario 3.1%) while small were somewhat higher in comparison to the percentages in Nova Scotia (0.3%) and New Brunswick (0.4%).

Among Canadian LPN graduates, those graduating in Ontario, BC and New Brunswick were the most likely to remain in or return to their province of graduation. Fewer but still over 80% of LPNs working in Newfoundland and Labrador and Saskatchewan were graduates of those provinces.

(No data were available for the province of Quebec so it is not included in this part of the report.)

Registered Psychiatric Nurses (RPNs): Currently, RPNs represent 1.6% of Canada's regulated nursing workforce. They are regulated and educated in the four Western provinces only.

In 2004, the RPN workforce in BC had the highest concentration of foreign graduates (11.3%) while only 1.4% of Manitoba's RPNs were from out of country.

Almost 40% of the 2004 Alberta RPN workforce graduated outside of Alberta. About 30% of those were from another Canadian province and approximately 9% were from other countries. Conversely, over 95% of Manitoba's workforce and over 90% of Saskatchewan's graduated from programs in those provinces. Among Canadian graduates those graduating from programs in BC and Alberta were the most likely to be employed in their province of graduation.

With respect to RPNs, the CIHI notes that a high rate of out-of province/out-of country graduates may reflect, among other things, the number of programs (and/or seats) available in the province.

In summary, these mobility trends from the four reports cited in this editorial only reflect one aspect of career mobility among doctors and nurses. The reports however provide valuable information for health human resource planners in helping to understand the mobility of nurses and doctors in Canada.

Did You Know...?

by Jennifer (Jay) Sherwood, BScN, MEd.

Once again I am writing this column to share with you some of the many snippets of information that come our way here at HEALTHbeat. This column highlights a **small** sample of the information that has arrived during the last couple of months. All of this comes from press releases, lists and other such things that are available. Apart from editing, I am passing it along to you as it comes to me. Be advised, HEALTHbeat does not endorse or otherwise support any of the products, new ideas etc.

Did you know that....?

• **The Monster at our Door:** This is a report of an interdisciplinary study of avian flu - biological, epidemiological, political, social and economic - that puts the coming storm in perspective for scientists and lay people alike. In this urgent and extraordinary book, Mike Davis reconstructs the scientific and political history of a viral apocalypse in the making, exposing the central roles of agribusiness and the fast-food industries, abetted by corrupt governments, in creating the conditions for the emergence of
See Did You Know? page 7

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If these are your ambitions, Multi Options Nursing inc. is your window of opportunity to all your professional goals. We have the best that proficient prospects have to offer you. Our firm covers the following Areas : **Northwest Territories, Labrador, Manitoba, New Brunswick and New Mexico. With the following Assignments: Community Health Nurse, 2 positions available (4 months period); Nurse Practitioner, 1 position, (permanent status)**

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Nurse Practitioners & Registered Nurses Needed

HEALTH beat Stress Relief

Dr. David Rainham, M.D.
Author, Speaker, Stress Management Consultant

The Holiday Season...Stress or Joy?

It's a busy time... maybe too busy and it can mean more stress than pleasure, especially for women. Women tend to do most of the menu planning, organizing of visits and choosing presents, then must fight crowds at the mall, wrap gifts, write cards, do the cooking and deal with kids who are wired and tired!

Lots of us have trouble enjoying the holidays fully because of existing stresses that are magnified by high expectations from the media, family and ourselves. We set ourselves up for burnout and a less than joyous holiday experience.

A little advance planning can give you some guilt-free time each day for yourself to re-energize physically and emotionally. People often say, "Great idea but I don't have the time" when really they just haven't allowed the time for themselves. If you are overly busy then perhaps it is time to change some priorities and delegate or rework some jobs.

Seize an hour, hide away and do something special for you. Here are some suggestions:

- Take a long warm bath with bubbles, candles and scents;

- Use some relaxing aromatherapy scents to unwind... perhaps with a massage;
- Slowly enjoy a cup of herbal tea in a special cup and saucer;
- Create a special bowl of fruit for your ongoing enjoyment;
- Buy an Amaryllis and watch it slowly grow and bloom;
- Take time to read a book in your favourite place;
- Go for a walk. Make a snowman or a snow angel;
- Phone a friend or have a visit you haven't had time for;
- Play simple games with children;
- Listen to music that you really enjoy;
- Write in a personal journal;
- Get a pedicure or facial;
- Go on a date or don't date depending on what you need most;
- Exercise – you will release harmful tension

- and feel more energetic;
- Deep breathe/meditate - reflect on all the good experiences of the past year.

Every chance you get take slow breaths and let your muscles relax. Don't get tense about searching for parking spaces and waiting lines. Share a smile and use humour to bring joy to the season. Imagine obnoxious associates or relatives getting nipped by one of Santa's reindeer!

Finally, imagine a memorable holiday season where your new relaxed state brings joy to all around you. Taking time for yourself is NOT selfish. Remember, no one can do a good job or care for others, if they don't care for themselves first!

Dr. David Rainham is a Family Physician, Author and Workshop Leader. Visit StressWinner.com for E-books or call 1 800 771-5776.

Nurses4Canada: Combining Immigration & Recruitment of International Nurses to Live & Work in Canada!

BRINGING NURSES TO CANADA

The shortage of health care professionals is an international phenomenon. The situation in Canada is no different from that of the rest of the world. The nurse shortage is particularly evident as Canadian employers struggle to fill nursing positions in their settings. Employers, who recruit internationally as one of their recruitment strategies, will realize a definite advantage with Nurses4Canada when seeking nurses qualified to work in Canada. If you are a nurse who would like to migrate to Canada or a Canadian Health Authority looking to fill shortages in your region, feel free to contact us to discuss your requirements. All of our nurses are pre-registered with the provincial nurses association, have excellent references, and are prepared to settle in Canada.

We are now moving towards the Employers in Canada that are seeking Nurses to fill their shortages either a short term contract, or Full placement we are able to accommodate both: Here is a letter from its managing director, Kathryn MacDonald.

Who is Nurses4Canada, and how did it start?

Nurses4Canada is a division of North American Services Center (NASC). The nursing program grew on its own due to the demand from internationally trained nurses who wanted to go to, establish, and live in Canada coupled with the existing nursing shortage in Canada. Nurses4Canada combines the requirements of the various provincial nurses associations with the current immigration guidelines.

Kathryn MacDonald Managing Director of Nurses4Canada, has been in business since 1986. That is 17 years of experience! While I am a native Canadian, I currently make my home in Dubai, United Arab Emirates. North American Services Center is considered one of the leading Immigration firms in this region!

Why Recruit with Nurses4Canada?

Nurses4Canada is a privately owned recruitment and retention service that assists Canadian Health Regions in filling registered nurse vacancies throughout the country. Our service has successfully
See Nurses4Canada page 5



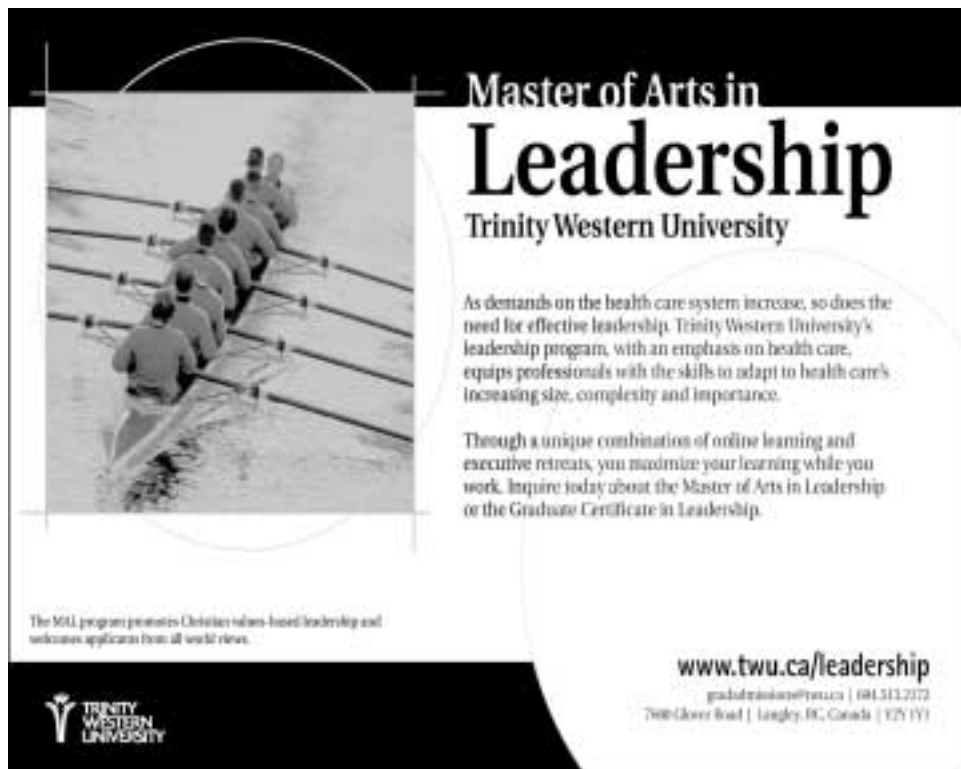
Nurses4Canada is a World Class Placement Agency for all your Nursing Shortages!!
Specializing in Temporary & Long Term placement in Alberta and BC.
We have ICU, ER, NICU, Pediatric (icu) Cardiac, Renal Unit, OR, Medical Surgical, Oncology, Midwives, Labor and Delivery, Psychiatry Nurses on staff to fill your temporary and long-term shortages.

Why Nurses4Canada Nurses?

- All of our Nurses are AARN & CRNBC (formerly RNABC) Registered and completely bonded.
- Our rates are competitive and our work ethic is excellent.
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Contact: Human Resources, Sunrise Health Region, 270 Bradbrooke Dr, Yorkton, Saskatchewan S3N 2K6
Phone: 306.786.0740 Fax: 306.786.0741 Email: resume@shr.sk.ca Website: www.shr.sk.ca
Accept the responsibility and the lifestyle – you've earned it!



The Weeneebayko General Hospital
located in Moose Factory, Ontario, on the southern tip of James Bay is a fully accredited general treatment acute care facility servicing a population of 10,000 residents in the Mushkegowuk Territory.

We have immediate vacancies for the following on a full time basis, Hospital Pharmacist; Dietitian; Primary Health Care Nurse Practitioner and Registered Nurses. The RNs & NP must be registered with the CNO, and NP in the extended class also; the Pharmacist and Dietitian must be licensed to practice in Ontario. *We have a Relocation Package, Comprehensive Group Benefits, Hospitals' of Ontario Pension Plan, eligibility for Northern Tax Benefits, Vacation Leave Assistance, Isolated Post Allowance and subsidized housing.*

For a copy of the work description and salary information, please contact:
Human Resources Department, Weeneebayko General Hospital,
P.O. Box 34, Moose Factory, ON P0L 1W0
Ph: 705-658-4544 ext. 2327 Fx: 705-658-4917 Email: dmiller@wha.on.ca

First Travel Nurse Reality Show

"13 WEEKS" Follows Six Travel Nurses in Southern California

Access Nurses, a national travel nurse company based in San Diego, CA, recently announced the six cast members for the first reality show about travel nurses.

The show, 13 WEEKS, will focus on the lives of six travel nurses relocated to Southern California from all over the country – including a very intense and challenging hospital work environment, the excitement of exploring Southern California, and the demands of living with five new roommates.

The nurses also have personal development goals for the 13 WEEKS including learning to surf and losing weight among others. Filming has already begun and occurs inside hospitals, inside the mansion and on group events ranging from skydiving to wine tasting. The events showcase the nurses in situations that test their sense of adventure as well as allow them to bond as a group.

With over 26,000 votes cast, and hundreds of See *Reality Nurses* page 7



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- Decentralized Budgeting (1 unit credit)
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 - important to professionals involved with decentralization management
- Total Quality Management/Quality Assurance (1 unit credit)
 - 4 month course completion
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- Advanced Leadership/Management in Health Care Organizations (NEW! 2006)
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for further information please contact: **Nursing & Health Care Leadership/Management Distance Education Program**
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 Email: mgtprog@mcmaster.ca Website application/info: www.fhs.mcmaster.ca/nursing/distance/distance.htm
 Separate application and admission requirements are necessary for admission to the B.Sc.N Program



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Nurses4Canada from page 3

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Today we continue to provide health employers with qualified candidates from around the world. This is done by the active and ongoing sourcing of new candidates – through networking, advertising, conferences, career fairs, word-of-mouth, and our website. Register your vacancies with us, and you'll get immediate access to registered nurses seeking employment in Canada.

Candidates that Meet Your Requirements

Our recruitment consultants, all of whom have extensive experience in the health care sector, ensure that your vacancies get exposure with the right nurses. We work hard to understand your requirements before we begin the matching process. Our focus is to find not just a candidate, but the right candidate to meet your needs. We concern ourselves not only with a candidate's professional qualifications but also with their personal and lifestyle interests, to determine whether placement in your region is a good fit for both parties.

All of our nurses have been assessed by the provincial nurses association; have obtained their authority for an interim permit; completed and satisfied their English language requirements; and have a current file number from the Canadian High Commission for their application for permanent residence. All this prior to Nurses4Canada circulating their CV to potential employers!

Recruitment Services

Nurses4Canada is committed to making your recruitment of registered nurses, easier and more

efficient. With the goal of assisting you in virtually every aspect of the recruiting process, we can:

- Market your vacancies and community to candidates;
- Lead you through the recruitment process; and
- Facilitate contact with prospective candidates.

Our fees are very competitive! All of our candidates have been through the nurses' association registration process in your province (obtained authority to nurse on an interim permit) and have applied for immigration to Canada. As well, they are highly educated and trained specialty nurses from all over the world with authority to nurse in your specific province and can report to work within four months of being hired

Nurses4Canada takes the entire guesswork out of the process for the employer! We have over 100 qualified internationally educated nurses who are committed to settling and nursing in Canada.

Our nurses come from various backgrounds, various specialties, (e.g. ER, ICU, Med/Surg, OB/Delivery, Pediatrics, Mental Health etc.) as well as some educators, and administrators.

We pride ourselves on our efficiency, simply contact us at info@nurses4canada.com and tell us your requirements; we will contact you to discuss it further. Start your search now for registered nurses within 24 hours of contacting us. Visit our Website at www.nurses4canada.com/employers

For details on our fee structure please email: info@nurses4canada.com or telephone our Dubai, UAE (Head office) 011 9714 228 0422 or Fax: 0119714 228 0424



ACADEMIC PATHOLOGIST
Cross Cancer Institute
Edmonton, Alberta

The Cross Cancer Institute and the Department of Laboratory Medicine & Pathology at the University of Alberta invite applications for the position of pathologist in the Department of Laboratory Medicine and Pathology based at the Cross Cancer Institute. The Cross Cancer Institute, which is the comprehensive cancer centre serving Edmonton and Northern Alberta, is an academic teaching and research hospital operated by the Alberta Cancer Board and affiliated with the Faculty of Medicine & Dentistry at the University of Alberta. The Institute offers an outstanding environment for basic, translational and clinical research. Strategic expansion of the Institute is in progress and will increase the size of the facility and the scope of its clinical and research activities.

We seek an academic pathologist with strong diagnostic skills and interest in the surgical pathology of cancer. Abundant opportunities exist for practice, consultation and research in many areas, particularly in breast, gynecologic, lymphoma, lung and gastrointestinal pathology. Teaching opportunities within the residency program and undergraduate medical curriculum are available. Candidates must be certified in either Anatomic or General (AP/CP) Pathology and be eligible for licensure in the province of Alberta. Academic rank at the University of Alberta will be commensurate with experience and qualifications.

The Alberta Cancer Board and the University of Alberta hire on the basis of merit. We are committed to the principle of equity in employment. All qualified candidates are encouraged to apply; however, Canadians and permanent residents will be given priority. If suitable Canadian citizens or permanent residents cannot be found, other individuals will be considered.

Interested applicants should submit a curriculum vitae and a statement of career goals, along with the names of three referees to:

Dr. Richard C. Berendt MD
Director of Laboratory Medicine and Pathology
Cross Cancer Institute
11560 University Avenue
Edmonton, Alberta T6G 1Z2
email: rberendt@cancerboard.ab.ca



Bigstone Health Commission
Employment Opportunity

COMMUNITY HEALTH NURSE

The Bigstone Health Commission (BHC) is incorporated as a non-profit corporation. We are working toward assuming the responsibility for the delivery of federally funded health services to all Bigstone Cree Members. Our Vision is to enhance the quality of life for all Bigstone Members and all others living within the Bigstone Traditional Territory. Our goal is to accept the responsibility and authority to manage and control health services within the Bigstone Traditional Territory. Currently, the BHC Head Office is seeking a Community Health Nurse to join our BHC Nursing Team on a full time basis to assist us with achieving our goal.

Qualifications:

- Possess a B.Sc. Degree in Nursing from a recognized university;
- Licensed with Alberta Association of Registered Nurses;
- Minimum of 1 year experience in Community Health Nursing in a Northern Community;
- Valid clean driving license;
- Be medically fit;
- Ability to understand Cree language will be an asset;

Duties and Responsibilities:

- Promote wellness through an integrated team approach with various health partners;
- Provide public health, baby clinics, STD counselling, prenatal/postnatal care;
- Organize and jointly conduct breast screening and cervical cancer clinics with health partners;
- Make client/family referrals to other agencies and professionals when need is identified;
- Maintain accurate records, documents, and reports;
- Participate in community health planning;
- Possess excellent interpersonal communication skills, as well as organizational skills;
- Proficiency with computers, effective teaching skills;
- Accept direction and support continuous improvement and development of position;
- Able to work independently with minimum supervision;
- Communicate with various members of the public in a pleasant and respectful manner;

Apply with cover letter and resume in confidence to:

Human Resources
Bigstone Health Commission
P.O. Box 1020, Wabasca, AB
Fax: (780) 891-2623

Application Deadline: November 30, 2005 at 5:00 p.m.

No phone calls please. We thank all who apply, however, only those selected for an interview will be notified.



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HEALTHY AGING: The Traditional Chinese Medical Integrative Approach

by Steven KH Aung, MD, FAAFP*

In our human life, aging is a natural process and is inevitable and despite what is sometimes promoted by various entrepreneurs in the health care industry, it cannot be reversed. We all age, even as I am writing this brief article and you are reading it – we are all aging all the time, every second, every minute, every hour, every day, etc. That is the bad news, since nobody enjoys getting older. However, the good news is that the aging process may be delayed. It is also necessary to note that aging is not all bad. Yes, we are nearing death, but we may have achieved a lifetime of experience and wisdom which we lacked when we were younger and which we can share with others in a spirit of cooperation and coordination.

Why we age remains a mystery. Various theories have been proposed, but there is no final answer. Signs, symptoms and diseases of the aging process are well known: less mobility, hearing and eyesight degeneration, arthritis, cancer, memory loss, Alzheimer's disease – the list goes on and on. It is a depressing list of the effects of growing old. Therefore, we seek to delay this process, as health care providers, patients and even those who seek to avoid or cannot afford any type of medical or non-medical intervention.

Biomedicine

This traditional medical system relies heavily on pharmaceuticals and surgery. There is no doubt that this is a valuable approach when applied judiciously to our aging patients. Yet, polypharmacy and unnecessary surgery must be avoided, as these only exacerbate the health problems of the aging.

Old Age/Nursing Homes

There are so many of these structures around the world



Nutritional and Herbal Medicine for Immune Enhancement



Medical Acupuncture for Qi Vital Energy Balancing and Harmonization

that it is almost impossible to understand their variety. Some are what we would call nice, loving places, staffed by kind and competent professionals taking good care of their elderly residents and offering them an excellent opportunity for healthy aging.

The Family Matrix

Some people try to take care of their aging family members with an attitude of responsible loving kindness and compassion. In traditional societies this is inculcated as respect for the elders. In modern social systems such respect may be attenuated or lost, which is unfortunate. Yes, in some cases, the very frail elderly may have to be placed in appropriate old age or palliative care facilities to take care of their complex physiological needs which family and friends are apparently not able to provide on a daily basis. Some of these facilities provide the best of the best primary care, while some are not so good and seek to exploit the elderly and their families.

A TCM Perspective

Traditional Chinese medicine (TCM) does not claim to have the perfect solution for our aging process. Everyone ages together of whatever age – physicians of whatever medical system, other health care practitioners and our

dear patients of whatever social position – but TCM has always been and hopefully will remain a natural and holistic approach encompassing the following points of attention:

- Excellent diagnostics, encompassing inquiry, observation/inspection, palpation along the meridian system, auscultation and olfactory modalities.
- Assessment of Shen (a person's total vital energy—Qi—at that period of time in a patient's life).
- Proper nutrition and appropriate dietetics. There is a vast array of dietetic advice in TCM and an equally vast array of herbal medicines for specific syndromes.
- There is no standard diagnosis, just as there is no standard therapeutics. Each and every patient has to be evaluated according to their specific situation.
- Regular exercises such as Qi Gong and Tai Chi Chuan. These exercises may be conceptualized as acupuncture without needles or herbs without ingredients. Such exercises, especially breathing exercises, may be taught personally from physician to patient as well as in a classroom setting or in special retreats in certain remote or wilderness areas.
- Acupuncture. It is useful in controlling pain and balancing Qi at the superficial level of the meridians. Patients can be taught to stimulate certain acupoints (acupressure) in the interest of their own self-care.
- Nutritional and herbal modalities work more slowly from the deep level of the organ systems upward toward the superficial level.
- Massage and manipulation are often useful to balance the Qi and make the patient feel good and re-unite the superficial and deep levels of Qi circulation. TCM child massage is a vitally important and respected modality, since it helps delay the aging process throughout our life.
- Feng Shui pertains to attaining environmental harmony in basic building structures and also their situation within their environmental context.
- Please note that blood letting refers to the gentle pricking of certain acupoints to harmonize Qi flow, while bone setting refers to the proper re-positioning of bones after injury

Blood Stagnation and Kidney Qi/Essence Deficiency

There are so many patterns of disease and illness in the TCM system that it is almost impossible to categorize all of these syndromes in their various pathological dimensions. Disease, of course, pertains to the scientific biological factors, while illness pertains to the personal and interpersonal impact.

Blood Stagnation syndromes of the aging process generally refer to conditions where there is insufficient blood to nourish the major internal organs and their corresponding meridians. Signs and symptoms may

See Aung page 7

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Australia Career Opportunities

Aung from page 6



Healthy Invigorating Exercise Programs:
Medical Qi Gong and Tai Chi Chuan

include pale tongue coating, localized pain, blurred vision, numbness of the hands and feet, insomnia, palpitations, hemorrhage and a 'thready' weak pulse. These often relate to weakness of the Spleen and Stomach functions. Kidney Qi/Essence Deficiency syndromes of the aging process generally refer to weakness and soreness in the lower back region, weakness of the knee joints, dizziness, insomnia and a 'deep' weak pulse. These also often relate to weakness in the Urinary Bladder functions.

Of course it is required of each TCM practitioner to arrive

at an appropriate specific diagnosis and specific as well as holistic treatment plan pertaining to the above general syndromes or any other related conditions affecting their aging patients. The best follow-up is also essential as time goes by.

Concluding Remarks: The Integrative Approach

We must certainly strive to provide the best medical health care to our elderly citizens and patients. They are the leaders of the new generations. Healthy aging is not an impossible quest. While we grow old, we can still remain physically active, mentally alert and spiritually enlightened. This depends on one's personal will to live a compassionate, competent and creative life within the context of family, friends, colleagues and the sociopolitical medical system. The optimal approach is for wise and dedicated physicians and other accredited complementary health care providers to work hand in hand, heart to heart, to enhance the health of our dear aging patients with the knowledge, skill and tools we have at our disposal. Whether relatively young or old, we are all aging, so let us stand strong together in this fateful experience.

* Please note that this installation was previously presented at the 5th International

Congress on Traditional Chinese Medicine (WFCMS), Paris, France, September 30 – October 2, 2005. Dr Steven Aung is a geriatric and family physician and a TCM practitioner and teacher. At the University of Alberta, Dr Aung is an associate clinical professor in Faculty of Medicine and Dentistry and an adjunct professor in the Faculty of Extension. He is a World Health Organization advisor on TCM. Dr Aung was awarded a Professional Excellency from the Académie Diplomatique de la Paix in 1986, the

Alberta Order of Excellence in 2002 and the Queen Elizabeth II Golden Jubilee Medal in 2003. His primary interest is the integration of TCM and Western biomedicine within the context of a more natural and compassionate approach to health and primary health care initiatives.

Did You Know? from page 2

this new plague. He analyzes past pandemic mortality patterns to warn that the mega-slums of many of the world's capitals provide perfect ecologies to host and spread the coming pandemic. **For information contact: Ina Howard, Phone: (212) 564-4406 or email: ihoward@thenewpress.com**

• **It's Time to Shift the Canadian Health System from Political Posturing to Citizen Action!** By Dr. Vaughan Glover This book contains some very important information on the Canadian healthcare system. Dr. Vaughan Glover's other new book, "Journey to Wellness, Designing a People-Centred Health System for Canadians" is in stores now. Dr. Glover is also the founder of the Canadian Association for People-Centred Health, (CAPCH) a grass-roots organization dedicated to finding ways to make our healthcare system more responsive to the needs of Canadians. **For more information contact: Lia Lyons at Meisner Publicity (416) 203-9307 or email lia@meisnerpublicity.com.**

• **Coolfemme clothing introduces new line.** Coolfemme clothing has a new product on the market to help provide comfort to women who suffer from night sweats during menopause?

Coolfemme clothing is made from a new high performance textile fibre designed to absorb the moisture directly from your skin very quickly AND to dry fast.

This is a perfect fit for the needs of menopause and other heat related symptoms and brings relief and comfort and a good night's sleep.

Research suggests that 75% of women will have some experience of hot flashes and 10% will have severe discomfort at some time during the menopause years. The lucky 15% will have none. For those who are part of the not so lucky group there is Coolfemme. **For more information: www.coolfemme.ca**

• **Linkwell Corporation Introduces New Disinfection Indicators for Hospitals and Clinics Home** Linkwell Corporation (OTC BB: LWLL), a leading manufacturer and distributor of disinfectant products in China, will introduce a

new series of disinfection indicators for hospitals and clinics. The new line of steam pressure disinfection indicators were developed by a Linkwell subsidiary, Shanghai Likang Disinfectant Company, Limited ("Likang"). **For information: www.linkwell.us**

• **A New Treatment for Prostate Cancer** Prostate cancer, the most common cancer found in men in North America, is often treated with surgery or various forms of radiation. Now a new, non-invasive treatment that uses ultrasound is available in Canada. Called Ablatherm® HIFU, the treatment has been successfully used in Europe for many years. Based on sophisticated ultrasound technology, it has a substantially lower risk of side effects. **For information: Contact: John McCook Phone: (212) 843-8074**

• **The Fraser Institute will release its 15th annual survey, Waiting Your Turn: Hospital Waiting Lists in Canada.** The Fraser Institute's annual Waiting Your Turn survey documents the extent to which queues for visits to specialists and for diagnostic and surgical procedures are being used to control health care expenses. **For information: The full text of the publication (in PDF) will be available at www.fraserinstitute.ca.**

• **Cancer awareness bracelets have been around since 2003.** Bracelets for a cause seem to be the newest trend lately, thanks to Lance Armstrong. But in fact they have been around for quite a while, just not in the rubber form. You can find many bracelet styles at Beads For A Cure. Shari Slonski gives back 20% of the profit of each bracelet to cancer organizations, she strings most of her bracelets together with beads that she buys wholesale but her pride and joy are her Lampwork bracelets. The Lampwork bracelets are so individual, like each person's cancer journey. Each bracelet design has its own name. Sometimes it's the name that will be the deciding factor in why a customer chooses a particular bracelet. It will trigger a memory about a person they have lost to cancer or about something that is important to them and their personal cancer journey. The sterling silver cancer charm hanging from each bracelet says it all. **For information: www.beadsforacure.com.**

Reality Nurses from page 4

applicants, visitors to NurseTV.com chose six cast members to live in a mansion in Orange County. The show's debut is scheduled for November online at www.NurseTV.com and on a cable network in the Fall of 2006.

By showcasing the exciting and rewarding lifestyle that travel nursing offers, Access Nurses hopes the show will encourage more people to join the nursing profession. The United States Department of Labor predicts that the country will have over 600,000 unfilled nursing positions by the year 2020.

Access Nurses is a leading provider of healthcare staffing, servicing over 1,300 healthcare facilities in the United States. The company recruits nurses and allied health



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