

Hospitable Hospitals

Canada has 1,235 general and specialized hospitals, a few very large, most rather small. It has 6.7 beds for every 1,000 persons, which is more than either the United States or Great Britain. It may be more than Canada needs.

If everyone were patient and each person had a medical crisis on schedule, it would be possible for all Canadians to be hospitalized, at least overnight, in the course of a single year. In fact a great many are: 165 persons per 1,000 are admitted as a whole.

The average daily cost per bed has gone from \$40 in 1967 to \$112 in 1975, and authorities have suggested that the nation and the nation's health would be better served if some hospital patients were placed in nursing homes, at about \$45 a day, or treated by visiting nurses at home, at about \$20 a day. A recent survey in metropolitan Toronto showed that about 10 per cent of the patients under treatment and about 30 per cent of the chronically ill or convalescent could be transferred without harm to less expensive facilities.

In 1975 Ontario began a major hospital-cost



A trauma resuscitation team at the University of Toronto's Sunnybrook Medical Centre.

containment program to close marginal hospitals and reduce beds. Quebec cut the budgets of teaching hospitals, and Alberta put a 7 per cent annual growth limit on its health budget. The prospect is, however, that the number of beds will continue to grow since the average age of the population is going up. The 2 million Canadians now over 65 (8.6 per cent of the population) use about a third of the beds. By 1996 there will be an estimated 3.2 million persons in this age group.

How Many Doctors are Enough?

In 1976 Canada had 40,130 active physicians, about 173 for every 100,000 people. Some people think that is too many.

It had 127 per 100,000 in 1964 when the Royal Commission on Health Services recommended that six or seven new teaching facilities be built. If current trends continue, Canada will have 210 physicians for every 100,000 people by 1986. There is debate on how many would be ideal. (In 1933 the US Commission on the Costs

At Brocher, Manitoba, 750 miles northwest of Winnipeg, nurse Christine Johnson uses a skidoo to make house calls.



of Medical Care recommended 135 per 100,000 for "adequate medical care.") Experience in western developed nations shows no absolute correlation between the doctor-patient ratio and such things as life expectancy. West Germany, for example, which has a ratio of 194 per 100,000 has a lower life expectancy for both men and women than Canada.

Some authorities suspect that an increase in the ratio of physicians to population leads almost invariably to increases in general health costs. Ontario Health Minister Frank Miller has divided the total cost of insured health care in the province by the number of doctors and concluded that each doctor generates \$200,000 to \$250,000 in annual expenditures. Doctors decide whether a patient should go to the hospital, how long he should stay and what diagnostic tests should be used.

It is noteworthy that as the supply of physicians in Canada has increased, their individual incomes have continued to grow, and they remain the highest-paid professionals. Their incomes have not, however, grown as rapidly in recent years as the incomes of lawyers, engineers, architects and dentists.