1. Evra[®] is as effective as the pill

Janssen-Ortho's Evra[®], the first contraceptive patch providing the same protection as birth control pills, was approved by Health Canada. The discrete patch is applied to the buttocks, the abdomen, the upper torso (excluding the breasts), or the upper outer arm. Like the pill, it prevents the ovaries from releasing an egg for fertilization. It is worn weekly, the fourth week being patch-free.

How does it apply to your practice? Over 5.5 million Canadian women use birth control. "Evra is so simple to use. It is the most significant development in hormonal contraception since the introduction of the pill," said Dr. Céline Bouchard, clinical associate professor in the department of obstetrics and gynecology at Université Laval. The patch and the pill have similar side-effects, such as blood clots, stroke, or heart attacks. In a recent trial, Evra was well-tolerated; discontinuation rates due to side-effects were < 2%.

Once-a-week Birth Control Patch—Evra®—Now Available by Prescription in Canada. Press Release, Toronto, Ontario, January 21, 2004.

2. Better asthma management in Quebec

The Towards Excellent Care for Asthma Sufferers (TEAM) study recently revealed the importance of promoting improved health-care practices in order to lessen the effects of asthma and to ameliorate quality of life for asthma patients. TEAM stems from a multidisciplinary partnership. Using clinical studies and correspondence with experts, TEAM enhances evidence-based practice on asthma management. Goals include giving heath-care professionals much-needed tools, thus optimizing diagnoses and treatments of Quebecers with asthma.

How does it apply to your practice? "Studies conducted so far by our researchers have identified discrepancies between current and optimal care. They also reveal shortcomings in diagnosis, in the application of the Canadian Consensus Guidelines, and in the use of treatments," said Dr. Louis-Phillippe Boulet, a respirologist at Hôpital Laval and president of TEAM. Improved use of treatments will advance patient health and maximize the use of resources. For further information, contact Isabelle Pleszczynska at (514) 843-2051.

TEAM: Innovative Program for Asthma. Press Release, Montreal, Quebec, January 15, 2004.

3. Couples can enjoy unique moments through music

Lilly ICOS announced the launch of "Music for 2", a global music initiative created to help men ameliorate their sexual health. It will feature annual concerts, a music- and health-themed Web site, as well as CD giveaways. The first concert was held in February 2004 in Monte Carlo. Artists performed music that was supposed to emotionally connect men with their partners. The goal of the program is to provide mature men with information in a non-obtrusive manner. "Music for 2" will be available first in Canada, Mexico, the United Kingdom, Germany, Portugal, and Sweden.

How does it apply to your practice? "Despite important advances in the treatment of erectile dysfunction (ED) over the last decade, statistics show that only one of three men openly seek advice from a health-care professional for their condition," said Mark Barbato, executive director and global product team leader, Lilly ICOS. Statistics show that most men are too embarrassed to seek help for their condition, or they mistake ED as a normal part of aging. Some believe it will naturally go away.

Lilly ICOS Launches Music for 2 to Help Men Improve Their Sexual Health. Press Release, Toronto, Ontario, January 6, 2004.

4. Heart health can save \$2.4 billion by 2006

Diabetes patients who look after their heart health can not only put an end to chronic kidney disease, but they can also save the Canadian health-care system billions of dollars. By 2006, kidney replacement therapies can cost \$2.4 billion per year. The 2003 Clinical Practice Guidelines for the Prevention and Management of Diabetes in Canada urge patients to ask for kidney screenings soon after they are diagnosed with diabetes.

How does it apply to your practice? For more than 2 million Canadians with diabetes, kidney disease is inevitable. "The new guidelines stress to physicians and patients that, in addition to reducing coronary risk factors, early prevention and treatment of kidney disease should be a priority," said Dr. Sheldon Tobe, a nephrologist and assistant professor of medicine at the University of Toronto. The guidelines stress treatment for blood pressure control and protection of the kidneys for people with diabetes to prevent suffering later on. They stress that people with diabetes and high blood pressure be treated with angiotensin-converting enzyme inhibitors or angiotensin receptor blockers in combination with a diuretic. If ineffective, non-dihydropyridines are recommended to reduce protein levels in the urine. $\mathbf{D}_{\mathbf{x}}$

New Canadian Diabetes Association Guidelines Urge Heart Health. Press Release, Ottawa, Ontario.