

EDITORS' MESSAGE

We are pleased to present this first issue of 2011. The ever-changing topology of medicine renders it both exciting and challenging. It can be challenging to keep abreast of developments in the diagnosis and management of the diverse health problems faced by patients today. However, these many changes often bring exciting advances in patient care. This copy begins with a discussion of a familiar diagnostic technology with a promising future. Chung, Van Zoost, and Burrell offer an overview of the growing role of Positron Emission Tomography (PET) in the fields of oncology, neurology and cardiology. Their article provides a concise introduction to the principles of PET, as well as an account of the evolving role it has in healthcare in Halifax.

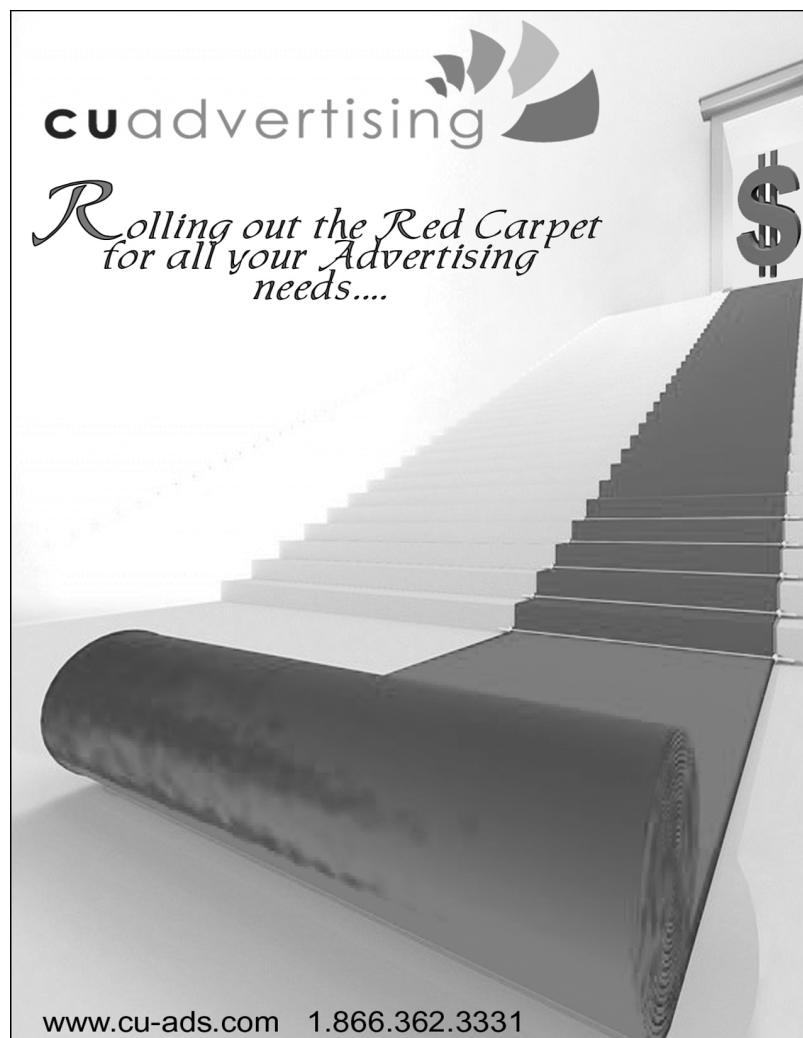
With the prevalence of vascular disease today, physicians are frequently called to manage this disease and its complications. There are many therapeutic choices for some conditions however, and the need to identify the best solution is an ever-present challenge. We present here a critical review of current endovascular treatment options for intermittent claudication, and the evidence to support their use. The author, Michael Stevens, explains that as this is a common complication of peripheral arterial disease, a widespread pathology in itself, we need to be informed of the best evidence regarding effective management of this condition. The limitations of the evidence available are also discussed.

Transitions in the surgical management of breast cancer (and subsequent reconstruction) are next presented by Philips and Williams. The benefits and limitations of two reconstructive approaches, the free transverse rectus abdominis musculocutaneous flap and the free deep inferior epigastric perforator flap, are compared.

As well, this issue revisits the importance of effective communication techniques in providing quality healthcare, but this time a different perspective is offered. The discussion herein focuses on the unique challenges in communication experienced between physicians and one particular group of patients. Laura Kinlin provides a review of the commonly identified barriers to effective communication and healthcare provision that have been cited by Canadians who identify as D/deaf or hard-of-hearing. She further summarizes helpful tips for healthcare providers to help minimize compromises in the patient-doctor relationship that can arise from miscommunication in all specialties.

Finally a review of the novel *Left Neglected*, by Lisa Genova, is provided. Allison Chabassol offers an insightful critique of the story, highlighting some of the more moving lessons learned by the protagonist after she suffered a brain injury that left her with left neglect. We hope that you find this issue enjoyable and look forward to providing you with more copies of the DMJ in the future.

Marcella Cronkhite, Nina Hynick, and Joey Corkum
Editors-in-Chief, DMJ



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