

GLOBE & MAIL

Keep health research running

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The Henry G. Friesen International Prize in Health Research is quickly shaping up to be one of Canada's premiere honours - the equivalent of the lifetime achievement Oscar for Canadian health science.

The first recipient was Joseph Martin, who rose from his humble Mennonite upbringing in rural Alberta to become a world-renowned neurobiologist and dean of the Harvard Medical School.

The second laureate, announced last week, was John Evans, a visionary educator, medical statesman and humanitarian over the past 35 years.

As the founding dean of the medical school at McMaster University in Hamilton, Dr. Evans revolutionized medical education.

The teaching model he introduced there was initially mocked but eventually adopted by Harvard Medical School.

Dr. Evans was the founding director of the population, health and nutrition department of the World Bank, where he initiated programs that are still in use around the world.

In the business world, he established Canada's first biotechnology company, Allelix Inc.

He was also chairman of the Rockefeller Foundation, president of the University of Toronto and head of both the Institute of Clinical Evaluative Sciences and the Canada Foundation for Innovation.

Today, Dr. Evans is chairman of Torstar Corp. and chairman of the MaRS Discovery District, a non-profit corporation that brings together academics, scientists and business people in a bid to facilitate the commercialization of science in Canada. But enough about his resumé.

More interesting than Dr. Evans' past accomplishments are his ideas, particularly about health research. He laid them out eloquently in his acceptance speech for

the Friesen Prize.

A short summary cannot do justice to the hour-long tour de force - which researchers, policy-makers and their political bosses would be wise to read - but let's highlight a few points anyhow.

Dr. Evans was a staunch advocate of supporting research long before it became fashionable, but he did not use his pulpit to simply demand more, more, more.

To his credit, he noted that we are living through a golden age of research in Canada.

In the past decade, there has been a dramatic increase in funding and an explosion of new funding agencies - the Canadian Institutes of Health Research, the Canadian Foundation for Innovation, Genome Canada and the Canadian Health Services Research Foundation to name a few - that "has made Canadian research institutions outstanding places to carry out health research."

Ottawa now invests more than \$1-billion a year in health research alone.

Dr. Evans cautioned that, if governments want results, the support needs to continue. "It would be tragic to undermine morale and lose momentum by uncertainty about the government's ongoing commitment to research," he said.

Dr. Evans also offered scientists a stern warning that the more public money they receive, the greater the scrutiny and the expectations will be.

"Governments will look for greater accountability, rationalization among federal agencies, relationship to national and provincial priorities, economic and social return on investment and innovations in research process," he said.

In other words, support for research should not be taken for granted.

Dr. Evans said what many grant-dependent scientists dare not say aloud, that granting agencies need to get their act together. Simply put, there are too many agencies, the paperwork is too onerous and the process of doling out money is too politicized.

He noted that Canada's best researchers seem to spend as much time preparing multiple grant applications as actually doing research, and that that's horribly wrong.

Granting agencies, he said, need to "promote innovations, efficiencies and user friendliness."

At the same time, research dollars should be better targeted, particularly at areas

where Canada excels such as health systems research.

Dr. Evans, while supporting the single-payer insurance system that is medicare, said provincial monopolies insulate the "health industry" from normal competitive market pressures and, as a result, productivity improvements and innovations have lagged.

The answer, he said, is not blind privatization, but investing in research to improve efficiency and quality.

The most flagrant example of failure to keep pace, of course, is the lack of electronic health records in Canada, and Dr. Evans had some harsh words on the subject: "Health care is Canada's largest knowledge industry. It is inconceivable that it will be the last to be digitized."

Dr. Evans' vision for health care and health research is not domestic but global in scope. Failing to mention that, at least in passing, would not do him justice.

"Health in the poorest countries is both our greatest global opportunity and our greatest moral obligation," he said.

For health research to make a difference, at home and abroad, money is required, as well as an enduring commitment.

But Dr. Evans noted that the "single most important determinant of success in research and in its stewardship will continue to be talented people."

Chief among them, leaders such as John Evans.