



President's message. *Multitudo sapientium sanitas orbis**

See related news article on page 107.

Braam de Klerk, CM,
MB ChB
Inuvik, NT

Correspondence to:
Braam de Klerk;
polarDoc@gmail.com

These title words are very relevant as a description of what we were trying to achieve with our recent Rural and Remote Medicine Course. They are also the motto of the University of Victoria, on whose doorstep we had our most successful annual conference yet, attended by more than 900 rural physicians, residents, students, nurses, spouses and children. The theme of the conference was "Sea to Sea," emphasizing the breadth of rural practice in Canada. It was great to see the attendees engage in the great variety of workshops, the coffee breaks, meals and other entertainment, as well as make new friends and rekindle old friendships. The multitude of residents and students brought youthful enthusiasm and a breath of fresh air to the gathering. The event is organized and taught by rural doctors, which makes the information that much more relevant.

The cardinal thread that ran throughout the conference was the generalism evident in all the talks and workshops. The concept of "rural generalist medicine" acknowledges that there is a difference in a rural scope of general practice or family medicine, in breadth, context, independence and other elements. The selection of students for rural medicine was also discussed in several talks and panels. It was clear from the different perspectives that nobody really knows how to ensure that students end up in rural areas as physicians, except to note that a rural background is still the single most important predictor of working in a rural area, followed by rural exposure at an early stage of medical careers.

According to feedback received, this conference was an enormous success, especially with more interest from rural and remote nurses, and we will be hard pressed to improve on it next year in Banff, Alta.

At this year's conference, the SRPC had an executive meeting, an annual general meeting and a meeting of former presidents. At these meetings a consensus was obtained for the SRPC to pursue generalism in family medicine, as well as a rural curriculum. Establishing a college of rural medicine with certification criteria would accomplish this, but it is likely more practical and collegial to have a core curriculum in rural medicine recognized by The College of Family Physicians of Canada. This is the final frontier for the SRPC.

We look forward to working together on the various fronts as we address our collective medical and social responsibility to ensure ongoing and ever-improving services to citizens in rural and remote areas of Canada, while providing the right training and satisfying careers for those who serve.

I will end by quoting Sir William Osler: "It cannot be too often or too forcibly brought home to us that the hope of the profession is with the men [I would add "and women"] who do its daily work in general practice."¹

REFERENCE

1. Oslerisms. Life in the fast lane [website]. Available: <http://lifeinthefastlane.com/resources/oslerisms/> (accessed 2013 June 5).

*A multitude of the wise is the health of the world.

Society of Rural Physicians of Canada
Société de la médecine rurale du Canada

PRESIDENT / PRÉSIDENT
BRAAM DE KLERK, CM, MB ChB
Inuvik, NT

**PAST-PRESIDENT
PRÉSIDENT SORTANT**
JOHN WOOTTON, MD
Shawville, Que.

SECRETARY / SECRÉTAIRE
GABE WOOLLAM, MD
Happy Valley-Goose Bay, NL

TREASURER / TRÉSORIER
TODD YOUNG, MD
Springdale, NL

**MEMBERS-AT-LARGE
MEMBRES EXTRAORDINAIRES**
GARTH CAMPBELL, MD
Beauséjour, Man.

DARLENE KITTY, MD, CCFP
Chisasbi, Que.

**ADMINISTRATIVE OFFICER
RESPONSABLE ADMINISTRATIF**
LEE TEPERMAN
SRPC Office, Shawville, Que.

SRPC / SMRC
Box 893,
Shawville QC J0X 2Y0;
819 647-7054,
877 276-1949;
fax 819 647-2485;
admin@srpc.ca
srpc.ca