

By: LCdr Heather Mackinnon (Ret'd), MSM, CD, MD

I am writing as a former medical officer who has served in both the Regular and Reserve Forces. I have a unique general practice in Halifax which is composed of former military and RCMP members and their spouses. I formed my practice in this way as I have discovered that there is a definite need for a medical transitional service for both Regular and Reserve Force personnel who have left or who are leaving the Canadian Forces.

The majority of these patients are from the local area but some live several hours away. I follow them by telephone and planned visits. Some have transferred from other provinces back to Nova Scotia. They come from all elements. It is important to note that not all released personnel qualify for Veterans Affairs pensions. These patients are referred to me from CFB Halifax, 12 Wing, 14 Wing, Veterans Affairs, by word of mouth or by other family physicians that need assistance in dealing with these unique people.

Many of these patients have multiple medical problems and were medically released. They take a lot of time. Former military patients, especially if medically released come with a lot of paper baggage, that is, multiple forms to be completed. Family physicians just don't have time or expertise to fill out these forms. Often they are done in haste and not to the benefit of the member.

I see numerous patients with Occupational Stress Injuries (OSI). The majority of these patients were well looked after while in the CF but after time they no longer have communication with or receive treatment from military Occupational Trauma Support and Stress Centre (OTSSC) clinics. Some have been on the same medication for a very long time. The medication is no longer effective. There are no designated psychiatrists in Nova Scotia to care for these patients. There are, however some very qualified psychologists that I do work with. Patients suffering from Post Traumatic Stress Disorder (PTSD) have other medical issues. There are side effects from the medication that need to be monitored. These patients develop other medical problems such as hypertension, diabetes and obesity. They need regular health care follow up.

Patients leaving the military with other diagnoses also require regular follow up. I have seen patients who were released with enough medication for only one or two months. They were unable to find a family physician in time to refill their medications so just did without. This is not a good situation for someone with diabetes or heart disease. There are those that have served many years and reach retirement age. These people deserve the same good care that they received in the CF. A transitional service would allow them the type of medical care they need until a family physician could be found for them.

The situation regarding Reserve Forces is even more complex. They may or may not have a family physician. Often these young persons go to a walk in clinic or go to university health services. If they are returning from a deployment such as Afghanistan they will lose their full time Class B status and be back in the provincial system. Upon return they will spend some time on leave and then go back to being part time Class A if they decide to stay with their previous units. They will have had a post deployment medical but not all medical problems will have been recognized in the time allotted to follow them. Too many illnesses whether physical or mental are not recognized right away. These Reserve members need follow up for a minimum of five years.

My recommendation is to stand up medical transitional services across the country. These would be places or perhaps just recognized family physicians where released Regular members or Reserve members could go to in order to obtain direct and efficient medical care. Transitional services mean just that. It is a service supplied by designated physicians and staff that would allow members to continue with the same quality of medical care that they received in the CF. It would be only for a short time until they could be handed over to other civilian physicians who would be willing to take them on as patients.

With the support of RUSI NS I was able to present a letter with my recommendations to the Minister of Veterans Affairs in July 2007. I was invited to present my recommendations to the Liberal Caucus in August 2008. In February 2008, as a guest of Mr. Peter Stouffer, I presented to members representing the Standing Committee on Veterans Affairs. Following that presentation my letter to the Minister of Veterans Affairs was circulated to the Standing Committee on Veterans Affairs.

There have been some positive results. A teleconference composed of members from Veterans Affairs and DND was held in April 2008. The idea of instituting medical transitional services was discussed. The group has agreed to look further into the matter and to look for solutions to this problem

*LCdr MacKinnon is a native of Nova Scotia. After completing her medical training in 1988 and a short stint in private practice, Dr MacKinnon joined the CF as a direct entry medical officer. She has served in no fewer than seven operations in support of such missions as Somalia, Haiti and the former Yugoslavia. Dr MacKinnon served aboard HMCS Toronto in the Persian Gulf in 1998 and aboard HMCS Halifax in 2002 during Op Apollo. LCdr MacKinnon retired from the CF in 2002 and currently operates a private practice specializing in treatment for retired military and RCMP personnel. In addition to being a general practitioner, Dr MacKinnon is a qualified Flight Surgeon, Advanced Diving Medical Officer and has a Diploma in Tropical Medicine and Hygiene from the University of London. LCdr Mackinnon is the Medical Officer and a Director of the Royal United Services Institute of Nova Scotia*

*The Royal United Services Institute of Nova Scotia proudly supports the efforts of Dr. MacKinnon on behalf of all members of the Canadian Armed Forces, Canadian Coast Guard and Policing Agencies in Canada and abroad whether serving or retired, regular or reserve.*