

## The Lapsley Family Doctors' Clinic

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People don't expect to get sick from visiting their family doctor's office. Doctors' offices generally are safe, even though sick people attend there. The spread of SARS at the Lapsley Family Doctors' Clinic in Toronto, however, raises concern that our doctors' offices are weak links against SARS and other infectious diseases.

Family doctors' offices fortunately did not become transmission spots for SARS. The Lapsley was the only doctor's office to become a vector for the spread of the disease,<sup>375</sup> but regrettably it was a tragic exception, with international implications. One of the clinic's physicians, Dr. Nestor Yanga, died of SARS and two of his colleagues became seriously ill.

Dr. Yanga, 54, known as a kind and gentle physician, left a wife and two sons, and was the only North American doctor to die of SARS. One of his sons, Ron, a Grade 12 student at the time, described his father:

He was a kind, caring man. He cared about everybody – his patients, his friends, his family. He made you feel special.<sup>376</sup>

Horrific as the Lapsley incident was, it could have been worse. SARS could have created other Lapsleys by spreading through dozens or hundreds of other family clinics and doctors' offices. As the Commission noted in its first interim report:

The Lapsley clinic showed that family physicians were clearly at risk, as a SARS case could walk through their door at any time. Many SARS patients did not only go to SARS clinics and hospitals. Many avoided them from fear of SARS and went instead to see their family physician.<sup>377</sup>

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375. Although one doctor caught SARS in her office from a patient and a number of doctors had to be quarantined after suspected contact with SARS, these isolated incidents involved no further spread of the disease.

376. *Toronto Star*, September 27, 2003.

377. SARS Commission, first interim report, p. 150.

The Lapsley tragedy shows that more must be done to support family doctors and to better prepare them for the next outbreak of infectious disease, and to make their offices even safer than they are now.

The Lapsley Clinic was operated by four family physicians in northeast Toronto. Many of its patients were Canadians originally from the Philippines. Some were members of the S family, one of whom was associated with the BLD SARS cluster referred to above.

The Lapsley Family Doctors' Clinic is mentioned by name because it is already in the public domain through media reports and presentations at SARS Commission hearings.<sup>378</sup> Also in the public domain are the names of Dr. Yanga, who suffered four months before dying on August 13, 2003, and Dr. Rex Verschuren.<sup>379</sup> Because these names are in the public domain they are used in this report.

The tragedy began when the 82-year-old patriarch of the S family was brought to Scarborough Grace Hospital on March 16, 2003, by his wife and one son and a daughter-in-law. In the emergency room waiting area was a woman who had been infected with SARS earlier and who passed on the infection to the S family. The disease later killed the patriarch and his wife and severely sickened other, younger members of the family.

Sick members of the S family went to at the Lapsley Clinic late in March and early April. One son went to the clinic on March 29, was seen by Dr. K and was prescribed antibiotics. The patriarch's wife and another son attended the clinic on March 31 and were seen by Dr. Yanga, a family friend well-known in the Filipino-Canadian community. It is believed that during these sessions SARS was passed on to clinic staff and patients.

Three of the four doctors at the clinic became ill with SARS. Why the fourth, Dr. Verschuren, did not is a mystery, and public health officials believe it might have something to do with the location of his office in the clinic.

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378. See in particular the presentation of Dr. Jan Kasperski, Executive Director and CEO of the Ontario College of Family Physicians, SARS Commission Public Hearings, September 29, 2003.

379. See Dr. Verschuren's lengthy CBC interview by Kelly Crowe, "Was Canada Ready for SARS?" April 30, 2003. Dr. Verschuren declined to speak to the Commission and the Commission decided that he had put enough of his story in the public domain and that it was unnecessary to issue compulsory legal process to secure an interview with him.

The two other doctors at the clinic became severely ill but survived.

Another horrible side story from the Lapsley Clinic began when an older female patient attended the clinic at the same time as some members of the S family. She became infected with SARS. Her daughter had a friend, Adela Catalon<sup>380</sup>, who was a nurse's aide, and when the older woman was ill at home, Ms. Catalon was kind enough to stop by her house to provide nursing assistance.

During her Good Samaritan work Ms. Catalon unknowingly became infected, then travelled to the Philippines to assist her elderly parents, who were returning home to Canada. She arrived in Vacante, Philippines, on April 4, and two days later became ill. She died on April 14 in hospital, the fourth Toronto-area health worker to die of SARS. She infected her father, 74, who died eight days later. An entire village of 1,000 people was quarantined because she had been there. Police were stationed at the approaches to the village to stop people from coming and going. The Philippines Department of Health traced 257 people she was believed to have had contact with, plus the people who had been on the plane that brought her from Canada.<sup>381</sup>

The Philippines recorded 12 probable cases of SARS during the outbreak, eight directly connected to Ms. Catalon and therefore the Lapsley Clinic in Toronto. The other four cases were imported by others. The World Health Organization (WHO) placed the Philippines on its list of local transmission places but lifted the recommendation in May. Two SARS deaths were recorded, those of Ms. Catalon and her father.<sup>382</sup> The WHO credited fast emergency action by the Philippines for stopping the outbreak from growing.

The SARS situation in the Philippines illustrates the scale of the emergency effort needed to respond effectively to an imported case and to ensure that an outbreak is swiftly contained, keeping the number of secondary cases small. The imported case travelled to five provinces prior to hospitalization. Contact tracing identified 250 casual and close contacts who were closely followed up. Four of these developed fever and were quarantined until a diagnosis of SARS was excluded.<sup>383</sup>

The WHO also said:

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380. Because Ms. Catalon's case has been widely reported and is in the public domain, she is referred to by name in this report.

381. "SARS-suspected village sealed off," *Manila Times*, April 23, 2003.

382. WHO Update 60, May 20, 2003.

383. WHO Update 60, May 20, 2003.

The efficient surveillance and reporting system in the Philippines, which reflects strong political commitment and a high level of awareness among health staff, confers an additional level of assurance that no local transmission is now occurring.

At the outset, however, the case of Ms. Catalon set off widespread fear in the area in which she had travelled. The *Manila Times* reported on the precautions taken at her burial:

Her coffin remained unopened inside the hearse that took it to the public cemetery in Alcala, the provincial administrator told the *Times*. Only members of her immediate family were allowed to come near the funeral car before it headed towards the cemetery.<sup>384</sup>

Meanwhile, at the Lapsley Clinic the situation had worsened. Three of the four doctors were ill.

Dr. Verschuren, the only doctor at the Lapsley who did not become ill, was quarantined. The clinic was forced to close, leaving hundreds of patients without a doctor. A private group of doctors tried to arrange locums to cover the clinic's backlog and some family doctors volunteered to work shifts there. Dr. Verschuren returned to the clinic after quarantine but had difficulty trying to keep up, seeing 160 patients a day instead of the usual 40 or 50.<sup>385</sup>

The spread of SARS through the Lapsley Clinic caused anxiety in the medical community and, of course the public. It raised immediate questions about safety and protection in family doctors' offices.

The Ontario College of Family Physicians told the Commission that as word got out about the clinic, fear amongst family doctors was heightened.<sup>386</sup>

Family doctors felt vulnerable when SARS began. Anyone falling ill would go to their family physician; however, family practitioners said they had not been warned or prepared to deal with SARS. These concerns were raised by the Ontario College of

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384. "SARS-suspected village." *Manila Times*.

385. "SARS had immense impact". *Canadian Medical Association Journal*.

386. SARS Commission Public Hearings, September 29, 2003.

Family Physicians and by Family Physicians of Toronto, which represents 2,000 physicians working in the city. As they told the Commission at its public hearings:

In the early days of the crisis, Telehealth, emergency department staff and media were telling people to go see their family doctor if they had SARS-like symptoms; yet no one in a position of authority thought to provide family doctors with the knowledge and the skills they needed to properly assess SARS or the policies and procedures they should follow or the supplies and equipment they required to protect themselves, their staff, their families and, most important of all, other patients.<sup>387</sup>

The Ontario College of Family Physicians told the Commission that too much of the fight against SARS was directed at hospitals and not enough at the work of family physicians:

Many patients had booked appointments and others simply wanted to see their own doctors. If they had SARS-like symptoms, they were reluctant to go to the SARS clinics. They would tell us that they were concerned that if they did not have SARS, they would get it by being exposed at the clinic, and if they did have SARS, they wanted their own family doctor to look after them, and given the long-standing relationship that family doctors have with their patients, this is perfectly understandable and must be taken into account in future planning.<sup>388</sup>

When family doctors began to realize that patients with SARS-like symptoms were showing up in their offices, they began to take precautions, but their approaches were inconsistent as they lacked clear direction from a source of authority.

Family physicians were given insufficient information during the SARS crisis, said the College. They felt as if they were out of the communications loop and that they were operating under an umbrella of darkness.

The College was critical of the lack of support for the Lapsley Clinic:

At no time did he [Dr. Verschuren] receive any calls or visits from those in authority and, to this day, he does not know if those who were exposed in his office were contacted. No one in authority offered the clinic advice

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387. SARS Commission Public Hearings, September 29, 2003.

388. SARS Commission Public Hearings, September 29, 2003.

on how to decontaminate their office. The clinic doctors and staff simply had to soldier on without help.<sup>389</sup>

Another of the Lapsley doctors confirmed with the Commission that some family doctors felt they did not have enough support. One doctor told how he bought protective goggles and masks at Home Depot:

I felt somewhat abandoned, being a front-line health care worker and being unable to protect myself.

The College also warned about the future:

We're not saying that the focus should not have been on hospitals – that was where the spread was occurring, but the Lapsley Clinic experience points out how easily this disease could have become a major community-based outbreak. We were lucky this time. We may not be so lucky next time.<sup>390</sup>

Better communications are key to fighting another outbreak, said the College. Communications during SARS were slow “and essential information did not get to the right people quickly enough and with sufficient authority to prevent the virus from getting a leg up.” The old ways of planning how to respond to a crisis in the midst of a crisis must end. Communications about what must be carried out need to be done fast and accurately.<sup>391</sup>

The College said a pre-arranged plan for communication must document who will be responsible for communication within each sector and between sectors. It also called for a pre-arranged plan for the redeployment of human health resources “to adequately cover the hot spots, including plans for when and how to acquire assistance from other communities, provinces and the federal government.”

Ontario must prepare for the next outbreak or pandemic finds and ensure there is a better system to protect family doctors and their patients.

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389. SARS Commission Public Hearings, September 29, 2003.

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For all its horror and agony, the Lapsley Clinic story offers hope. Despite the devastation of SARS, the clinic reopened and continued the important work of treating people. One Lapsley Clinic doctor who became ill almost died and was in hospital for six months. But when he recovered he returned to work at the Clinic and said he would work through SARS again. When he spoke with the Commission, he reinforced one of the most important messages of SARS: although the system is broken, there are many professionals who remain dedicated to helping others in times of health crisis. He said:

I'm a Christian and through my faith . . . I believe that this is what I'm called to do. If there were something that would come about, if it were to happen that I were to get sick again, then that would be what was meant to happen. I believe that God will protect me through what will happen. So, yes, I will. I will probably slow down my volume [of patients] and take more precautions.

We cannot help but be moved by the doctor's courage and his faith. But for the next outbreak, the next pandemic, we need more than faith. We need systems of the kind tragically lacking when SARS struck, systems to protect family doctors and their patients from what happened at the Lapsley Family Doctors' Clinic.