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EDITOR'S NOTE

D'Arcy Little, MD, CCFP, FCFP, FRCPC Medical Director, JCCC and www.healthplexus.net



In this issue of the *Journal of Current Clinical Care*, we present articles spanning the escalating crisis of antimicrobial resistance, a landmark advance in Alzheimer's disease treatment, and the enduring humanity at the heart of the patient–physician relationship.

Nsisong Asanga surveys a field in urgent transition in *New Antibiotics Provide a Glimmer of Hope as Older Drugs Grapple With Resistance*. With the WHO projecting AMR could cause up to 10 million deaths annually by 2050 and no novel antibiotic class approved between 1987 and 2020, the pipeline has been dangerously thin. The article documents the economic forces stifling development alongside emerging platforms offering cautious optimism: soil-derived teixobactin, AI-designed agents such as halicin and abaucin, phage therapy, and membrane-disrupting molecules like zosurabalin. The message is clear: new antibiotics alone cannot solve AMR—stewardship, rapid diagnostics, and genomic surveillance remain indispensable.

Dr. D'Arcy Little provides a comprehensive clinical guide in *Lecanemab (Leqembi®) in Early Alzheimer's Disease: A Clinical Guide for Family Physicians in Canada*. Health Canada's October 2025 approval marks a historic milestone as the country's first disease-modifying Alzheimer's therapy. The guide covers patient selection, mandatory APOE genotyping, amyloid biomarker confirmation, and the safety considerations around amyloid-related imaging abnormalities (ARIA)—including the critical caution that lecanemab patients presenting with stroke-like symptoms should not receive thrombolytics until ARIA is excluded by MRI. With provincial coverage still evolving, family physicians will play an essential role in this new care pathway.

Dr. William Watson offers a moving narrative in *Dale—My Heartsink Patient: A Tale of Transformation During a Medical Visit*. With candour and compassion, Dr. Watson recounts caring for Dale, an opioid-dependent patient whose difficult behaviour masked a profound history of childhood trauma. The turning point came when he set aside the medical agenda and asked: "What was it like growing up?" What followed transformed the relationship and the care—a quiet argument for trauma-informed practice and a reminder that beneath the most challenging encounters often lies a story waiting to be heard.

On the *3P: Pills, Pearls & Patients* Podcast this issue, **Dr. Marina Malak** offers an overview of cancer screening in primary care, reviewing current evidence, implementation challenges, and the family physician's role in ensuring patients are appropriately screened and followed.

We hope you find this edition both informative and inspiring, and we look forward to your feedback, as always.