

Government Orders

seeing their doctor. He talked, in particular, about a woman who may be pregnant and may be suicidal. He seemed to indicate that that was not what he would consider as grounds for an abortion.

He also mentioned other countries and what the laws were there. I would just mention that in Ireland, where abortion is totally illegal and totally outlawed, the abortion rate in fact is higher than the abortion rate in Canada.

But I would ask him as a parliamentarian and as a medical doctor, under this law that we are debating here today, if a pregnant woman was to see him requesting an abortion under what circumstances would he approve that request?

Mr. Pagtakhan: Mr. Speaker, I am really being challenged to exercise my medical judgment and I will do that.

It is given that when a physician approaches a patient and then wants to prescribe a treatment, the ultimate challenge to that physician is to save the life of that patient from an illness. In so doing, the physician has to examine alternatives of therapy, including counselling for example, including other modes of therapy that are not of a surgical nature. When a physician makes only one treatment approach, if we can even call it that, of aborting 100 women that come to my clinic so that when they leave they have all had abortions, well, I submit that that physician will be challenged through peer review by our colleagues, because the real treatment likely is not being practised.

Before I answer directly the specific question posed, let me clarify. For example, let us say the psychological health of the woman is in danger. What do we mean by that? Is it because one has a discomfort and, therefore, one would have an abortion? Well, if a physician does that, then he or she is not doing a proper job, because the therapy for depression is not abortion. The therapy likely will be counselling and other modes of therapy that do not have to terminate the life of that unborn. That is why only when the life of the mother is seriously threatened, gravely threatened, in the history of medical practice abortion is an accepted alternative, because in trying to save the lives of both, one has to give way, but not only for simple convenience.

Mr. Boudria: Mr. Speaker, I am sure that many colleagues will join me in congratulating the member for

his speech. It is not often in this chamber, perhaps not often enough, that we can have this kind of debate, all speak from the heart, agreeing or disagreeing with each other regardless of party line.

I want to congratulate the member for the dimension he is bringing to the debate as a medical doctor. I know he did not think he was going to practise medicine upon his arrival on Parliament Hill, but I am going to ask him another question in regard to that. I hope the member puts up with that.

Some members had an opportunity of hearing Professor Peter Day from the University of British Columbia, who came to speak to a number of MPs on the value of abortion as a medical treatment, if you wish. That is really a follow up to the answer that my colleague has just given.

It was suggested to those members of Parliament who attended that very excellent talk a couple of months ago that in fact there was no record anywhere in the medical profession which proved that abortion was in fact a valuable medical treatment.

Dr. Day even went so far as to add that it was rather unusual, and perhaps unique to abortion, that prior to using that medical treatment—I will call it that loosely for the purposes of this discussion—no experimentation had been done, as we do, for instance, when we experiment with a new kind of drug or a new kind of treatment. We will study that on either other life forms first or we will select a few individuals and study what the benefit is of a treatment, then evaluate that and decide whether we want to apply that treatment to society as a whole.

I want to ask my colleague, in his professional opinion, if he knows of any such studies that actually demonstrate that there is such a benefit from abortion as a medical treatment. Again, I am using that term. It has come to my attention that, in fact, there was no proof that abortion was ever a good medical treatment. I want him to comment on that.

Mr. Pagtakhan: Mr. Speaker, I thought my hon. colleague, the hon. member for Saint-Henri—Westmount, who is a lawyer would give me legal advice before I continue to give medical opinion in Parliament. But because we have parliamentary immunity, I can do so. I must say, however, in all seriousness that I still maintain my medical licence.