equal of the best in Europe, and I had an opportunity of looking over some of the largest hospitals in the city of London, the county and also on the continent of Europe. But I am wandering from the point. What I am most concerned about is this: whether the doctors like this or not, I believe in the next six years we shall have a system of health insurance in this country. This depression has taught them a lesson. It is absolutely unsound that the state should spend the tens of thousands of dollars it does in the education of a medical student and that he should spend thousands of dollars for the first fifteen years of his practice sitting in his office waiting for patients to come along. The most practical approach to the problem is to give the great masses of the people an opportunity to avail themselves of medical and surgical attention under a scheme of national health insurance divorced from the enormous charges-and I am not saying that in a spirit of criticism of the doctors, because this is a product of the system—that prevail for medical attention at the present time. I would like to see a couple of decent teeth put into part IV so as to give this commission power to launch a scheme of that description in cooperation with the provinces and other interested organizations in connection with this legislation.

Mr. GERSHAW: First of all I would like to tell the hon. member for Battle River that a doctor charges his mileage for one way and makes many trips when he does not get the fifteen dollars. Moreover, the doctor who brings a patient through a major operation and gives him the attention he deserves has rendered a service that cannot be paid for by fifteen dollars, as the hon. member for East Hamilton has intimated.

Mr. SPOTTON: What if the patient dies?

Mr. GERSHAW: The Prime Minister mentioned that the average expectation of life had been very greatly increased. It has been increased from around forty years to fifty-eight years, but the increase has been very largely due to better conditions of living and a lessened infant mortality. The stress, strain and worry of these trying years seems to have had a bad effect upon heart and allied conditions, so that sudden deaths from such causes have greatly increased. Money that is well spent for the health of the people certainly brings greater and richer rewards than money spent for any other purpose.

In connection with health insurance Alberta has taken a forward step. The provincial [Mr. Mitchell.]

authorities have gathered a great deal of information and are about to set up one or two trial districts in which what is really a state medicine experiment may be tried out. It is valuable to assemble that information, to make sure of the steps that are being taken, and thus work out a system that will endure. The only way in which that can be done is by taking steps gradually, and at the present time much more information is needed before a satisfactory system could be launched. At the same time I would like to stress the need for legislation of this kind and for making progress as rapidly as we safely can.

Mr. SPENCER: The hon, member for Medicine Hat mentioned my name in reference to the statement I made. The figures I gave as to medical charges were genuine, and I trust similar charges are not made by all doctors. I have seen bills where a mile each way has been charged for, and where more than one patient was visited on the same journey. The doctor who did this is now practising in Edmonton. I sincerely trust other doctors are not charging as high a fee.

Mr. MACKENZIE (Vancouver): Would the commission be prepared to cooperate with one province in which legislation has been drafted or would it wait until conditions are as nearly uniform as possible in all the provinces?

Mr. BENNETT: I shall answer the hon. gentleman's question as I proceed. debate that has taken place on this clause, although it has traversed far beyond the scope of the matter covered by it, has narrowed itself down to a very simple question. I am surprised at the violence of the language used by the hon, member for Winnipeg North Centre. The question is a very simple one: Shall parliament provide money to enable municipalities, cities and towns, rural and otherwise, to carry out their plans with respect to health and health insurance? The hon. member for St. Boniface was quite frank about the matter. He says: The service is now being rendered. Probably there is in this country no class that has rendered greater service to individual citizens during the hard years through which we have passed and who have received less compensation for their work than has the medical profession. There is no doubt about that. The problem is a simple one; stripped of everything and without this violence of language it narrows down to this: Shall the parliament of Canada provide the money to enable the municipalities to carry out the services mentioned by the hon. gentleman? All the elaboration