6, 1984, the Association of Ontario Boards of Health endorsed the medical use of heroin and called for its reinstatement. During the week of July 2, the Gallup poll indicated that 73 per cent of Canadians endorsed the use of heroin for the terminally ill. Then on August 21 of this year, the Canadian Medical Association, which appeared before the standing committee in June when the subject matter of my Bill was before the committee, passed a resolution at its convention in Winnipeg. It was clear, concise and unequivocal. The resolution read, and I quote:

Resolution 84-50.

That the Government of Canada immediately resume the licensing for importation, manufacture and sale of diacetyl morphine (heroin) for medical purposes.

It is my view, Sir, and I believe the view of my colleagues and the view of the Minister of National Health and Welfare, that the politicians of Canada should move very carefully and cautiously in dictating to the medical profession what it may or may not prescribe. I do not believe that the governmental process should really interfere with the right of physicians to make this judgmental choice. That, in fact, is what the CMA was saying to the Government of Canada.

I could go on, Mr. Speaker, and refer you to the evidence which was presented to the committee. I can refer you to public interests which were reflected in editorial comments across the country during the past few months. I hesitate to do so, Sir, because I would not want to take up the time of the House.

Perhaps you will forgive me, Mr. Speaker, if I quote from the speech of the late Hon. Member for Nepean-Carleton, the late Walter Baker. He said on June 1, 1983, and I quote from *Hansard* at page 25938:

I think that is the issue for the House of Commons, Mr. Speaker. I think it is time that the House faced it. I think it is time the medical profession faced it. I think it is time the cancer societies in the country faced it. I think it is time the public faced it. I ask the House of Commons to support this Bill today so that the public examination can begin.

Some Hon. Members: Hear, hear!

• (1710)

Mr. McGrath: Little did my colleague know the train of events that his Bill and his eloquent speech in the House would set in place, bringing us to where we are today.

Finally, Mr. Speaker, I would like to suggest to you that there may be a disposition on the part of the House to hear from the Minister of National Health and Welfare who, I believe, is prepared to make a statement. I realize this is an unusual procedure for Private Members' Business, and of course the House would have to consent to that taking place. However, it is my understanding that the Minister will be making today a major policy statement on this issue and it would be my intention, after the House has had a chance to address this issue and before the clock runs out, to ask for the unanimous consent of the House to withdraw the Bill so the Government can bring in its own legislation which will be addressed today by the Minister of National Health and

Narcotic Control Act

Welfare. I hope it will be the disposition of the House to hear from the Minister at this time.

Hon. Jake Epp (Minister of National Health and Welfare): Mr. Speaker, and colleagues, first of all I want to thank the House for the courtesy of allowing me as a Minister to become at this moment a private Member once again and address what I think is an issue—

Ms. Mitchell: Welcome back.

Mr. Epp (Provencher): —which is important to all of us. I intend to be brief and I hope the action I am announcing today will find appeal from the point of view of fairness and the point of view of doing the right thing and addressing what obviously is an issue which concerns all mankind, and it is done in that spirit. Therefore, Mr. Speaker, it is with great pleasure that I participate today in the debate on this Bill.

When I was a Member of Her Majesty's Loyal Opposition, as has been mentioned, I joined the Hon. Member for St. John's East (Mr. McGrath) in support of this Bill in its earlier form. At that time the effort to see heroin legalized for therapeutic use was spearheaded by our sorely missed colleague, the late Hon. Walter D. Baker.

As my colleagues in the House of Commons will know, when in public life one is asked frequently to take positions on controversial issues, issues which obviously have more than one point of view. It is in this House of Commons where these matters are debated, debated with vigour, and where points of view are firmly held and expressed. However, when that is done, there is a common sense that on certain issues there is widespread agreement, and on this issue, hopefully, unanimity.

As Members of Parliament, in most cases we are not qualified to make a determination on issues, especially on this one, from a technical point of view. I fully recognize that my colleagues, such as the Hon. Member for Oxford and other medical officers who are Members of Parliament, have both the experience and very often the technical background on these medical issues which I do not have. But I do think that on this issue it is not a technical question which we are addressing but, rather, the meaning of life and the inevitability of death; the sanctity of life and how death with dignity can be enhanced. Those are the issues that this Bill addresses in part.

Therefore, it is with great pleasure that I rise today to respond to my colleague's Private Members' Bill and to announce that it is the intention of the Government to legalize in Canada the medical use of heroin for the terminally ill and those in intractable pain.

Some Hon. Members: Hear, hear!

Mr. Epp (Provencher): The Government has decided to take this action in response to the very clearly expressed desire of many individual Canadians, service organizations, indeed church groups, the Canadian Medical Association and health care practitioners that this potent painkiller be made available to the loved ones and patients with whom all of us can identify.