

demand for more information on the individual ingredients in medical formulation; the second is a more enlightened public which is demanding to know more about the medication it is receiving.

These observations lead me into the broad problems of drug advertising and marketing practices, both of which play an important part in the problems of drug misuse and drug reliance. It is essential to reassess the general practices and techniques as applied to the marketing of drugs for medical utilization. In my view, if one assesses the present techniques of advertising as evidenced in journals and direct mail to physicians, one may conclude that these contribute in a negative manner to the prescribing habits of physicians and to patient risk. There is need for a thorough re-evaluation of the Food and Drugs Act in this area. We must recognize that the advertising of all drugs, including non-prescription drugs, is potentially harmful and because of the visual impact, particularly on children, we must reassess the advertising of drugs on television.

There is an obvious need to emphasize the educative component regarding the use and misuse of drugs. There is a need to emphasize the positive by informing people about the problems of side effects and the dangers of over-reliance on drugs. I am not suggesting tight and inflexible regulations to govern the safety of existing or new drugs, since this could promote therapeutic isolationism. What I am suggesting is that a new attitude is required, one which would alter the present mentality of "above all, do no harm" to "above all, do good". I think if the minister and the government were to adopt this philosophy, then meaningful legislation might be possible.

In conclusion, Mr. Chairman, I would ask, what is the ideal we should strive for in drug legislation? Is it assurance of the safety and efficacy of the prescription drugs available for the use of professionals in the health care system and the safety and efficacy of non-prescription drugs available to the public? If this is combined with instructions for use that are correct and understandable, and if drugs are advertised and marketed in a positive manner, then I believe our drug laws will be immeasurably improved.

Mr. Knowles (Winnipeg North Centre): Mr. Chairman, I have just a few words to say. It is our view that the minister has made a case for this bill which in effect calls for the repeal of the Proprietary or Patent Medicine Act, that repeal to be effective July 1, 1976. The arguments for it are, of course, that the act itself has outlived its usefulness and that there are other ways to deal with the matters that were covered by it.

The other important point, of course, is that the element of secrecy which is involved in the old act should be done away with. I think we will all agree that the hon. member for Lambton-Kent has made a useful contribution in the remarks he has just made, and we look forward to the answers the minister will give to the important questions that have been placed before him.

The only other comment I want to make is that when the question of drugs comes up, a concern that many of us have is for the cost of those drugs so far as older people are concerned. I was quite disappointed earlier this week when I put a question to the minister concerning phar-

Trade Marks Act

macare, hoping that he would show some interest in it. But the minister's answer in this parliament—I can hardly believe this is the same minister that we had in the last parliament—was "No".

● (1250)

Mr. Lalonde: Not at this time.

Mr. Knowles (Winnipeg North Centre): Sometimes his answer is just "No", and sometimes "Not at this time." This morning, when the hon. member for York-Sunbury asked a question about old age pensioners, I think the answer was just plain "No." The minister did not even enlarge the answer to "not at this time."

This is an area of real concern, Mr. Chairman. It seems to me that if the government is not prepared to come through with a pharmacare program for all the people of Canada, it should at least start it for old age pensioners and other special groups. I realize that this matter is beyond the confines of this particular piece of legislation, but I hope the minister will say a word on the subject. Generally speaking, although we want to hear the answers to the questions which have been put, we are prepared to support this bill.

[*Translation*]

Mr. Gauthier (Roberval): Mr. Chairman, I wish to say a few words at the third reading stage, which in fact is a second reading of Bill S-9, an Act to repeal the Proprietary or Patent Medicine Act of 1908, which was amended ten years later, and also the Trade Marks Act had the Labelling Act. As far as the Proprietary or Patent Medicines Act is concerned, I believe it has lapsed with the enactment of the Food and Drugs Act.

At the outset, it was better than nothing and even if some concoctions seem a bit childish today, still there was confidence with which to build up patient morale. It is still said that good morale accounts for 50 per cent of the cure.

The minister referred a few moments ago to the somewhat comical names of certain remedies with doubtful virtues. But he said nothing of their psychosomatic effect in those days. I shall remind him that even today, there is for instance the so-called Indian remedies. Although they might be laughed at by a good number of learned pharmacists, they nevertheless have proven curative values. But of course what is involved here today is not the art of medication but the marketing and quality control of drugs offered for sale to the public.

Is quality ensured today? That is the question raised by many people. When people today go to a drugstore or licensed retail outlet, do they really get the drugs they need? In my opinion, the reply is much more serious, because even in some drugstores, people often try out new remedies: "Try this pill, if it does not work, you can try another one." This pill often has the opposite effect to that hoped for. The old act is criticized, but I believe that today the department must seriously examine these pill pushers and especially formulas, because certain products have been found in drugstores which have now been discontinued and which were sold to cure liver troubles and were ineffective. But these products are still being sold, Mr. Chairman. Things should not remain as they are; the