Medicare

doctors are providing chiropractic services within their offices. I believe this matter deserves the consideration of the minister. As we approach our centennial year, I think we should be far enough advanced in our thinking to include these people. The rest of the world would know that we look to a bright future for Canadians if we included chiropractors and optometrists. Many private medical schemes in Ontario offer these services at the present time. I think we will be very lax if we do not include them in Bill No. C-227. I hope the minister will consider including them.

I am very fortunate, as are many members of this house, in that I am not forced to wear glasses. Many service clubs throughout Canada make provision for the care of the eyes. I believe we will be very lax if we do not include optometrists in this bill, in view of the fact that service clubs include them in their welfare programs. They believe this service is very important to the people. In my view, it would be only fair and just if the Canadian government saw fit to include optometrists in Bill No. C-227.

Mr. Pascoe: Mr. Chairman, I have not taken part in the discussion this afternoon because it has been concerned mainly with optometrists and chiropractors, and I expressed my views on these services earlier. I support all the arguments advanced in respect of the inclusion in the bill of these professions. I should like to return to a subject about which I spoke earlier, namely, the inclusion of podiatrists in the definition of "medical practitioner" in the provision of insured medical services.

I know that under the rules of the house I cannot refer to the amendment I made earlier, but I can refer to the remarks made today by the hon. member for Hastings-Frontenac in support of podiatry. He repeated the arguments advanced for the recognition of podiatrists as medical practitioners. The hon. member for Hastings-Frontenac referred, as have other hon. members, to the training of podiatrists. He also referred to the services provided by podiatrists, such as the medical and surgical care of the feet.

## • (4:40 p.m.)

The podiatrist is a trained medical specialist in diseases and ailments of the foot and, as others have said, if podiatrists are not included under the term "medical practitioner" this would be a discrimination against a legally licensed branch of the medical profession. I think others have referred to that as professional genocide.

[Mr. Scott (Victoria, Ont.).]

I do not intend to repeat many of the arguments which have been advanced. I will only quote a statement made by Dr. J. H. MacDermot in an editorial which appeared in the Canadian Medical Association Journal. It reads:

He is really a trained specialist, a trained medical specialist, in diseases of the foot.

Farther on, referring to podiatrists, he said:
—medical practice in a limited field . . . an important branch of medicine. . . a necessity, an important branch of the medical profession.

I speak of this because of my personal experience with the work of a podiatrist.

While the minister is in the house I would like to ask him a couple of questions.

He stated that any province is free, on its own responsibility and at its own expense, to add under their plans the services of any specialists they choose. He held out the hope that perhaps at a later date the federal government would consider the addition of other professional services. May I ask the minister whether he has received strong representations from the Canadian Podiatric Association requesting the inclusion of that profession under the term "medical practitioner"? If so, have these representations been fully considered?

Another point which I should like to make is that this bill will come into effect not later than July 1, 1968. If the provinces make representations regarding the inclusion of other medical services, such as services rendered by podiatrists and oral surgeons, will the minister consider making the necessary changes in the bill before it becomes law?

In this regard, I certainly support the argument of the hon. member for Burnaby-Coquitlam that some changes should be made in the bill which would enable rapid amendment by the governor-in-council if the provinces requested the inclusion of extra services and were able to convince the minister of the need for them.

That is all I wish to say, Mr. Chairman. The hon. member for Hastings-Frontenac advanced the same arguments I had voiced at an earlier date, and I trust the minister will take these into full consideration.

Mr. Rynard: Mr. Chairman, I have a great deal of sympathy for the minister in view of the problems in which he finds himself entwined because, as we look across the Dominion of Canada today, we find that various provinces have set up differing regulations for insured medical services. For this reason I