

which deals with the concern of the committee over the absence of any ascertainable rules in relation to import quotas on footwear and other goods.

[*Editor's Note: For text of above report see today's Votes and Proceedings.*]

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[*Translation*]

QUESTIONS ON THE ORDER PAPER

(Questions answered orally are indicated by an asterisk.)

Mr. Yvon Pinard (Parliamentary Secretary to Deputy Prime Minister and President of the Privy Council): Mr. Speaker, the following questions will be answered today: 211 and 654 to 661 inclusive.

[*Text*]

UNUSUAL AND TROPICAL DISEASES

Question No. 211—**Mr. Jones:**

1. Have there been any reports of outbreaks or diseases that are unusual for the Canadian environment or climate by doctors or hospitals within the last eight years? If so, what were they?

2. Have there been any reports of tropical disease breaking out in Canada since 1970? If so, please specify.

3. Have the number of tropical or unusual disease cases been on the rise in Canada since 1970? Please give statistical figures for outbreaks of tropical or unusual diseases since 1970.

4. Have these cases been reported to the Health authorities or to the public to warn them of these dangers? If so, list the authorities to whom these cases were reported. If not, why?

5. What steps have been taken by the Department of Health and Welfare to protect the people of Canada from the spread or attack of tropical or unusual diseases?

6. Is immunization against tropical or unusual disease available to all Canadians upon demand. If not, why?

Hon. Monique Bégin (Minister of National Health and Welfare): In so far as the Department of National Health and Welfare is concerned: 1. There have been few reports of outbreaks or diseases in the last eight years that are unusual for the Canadian environment or climate. A visitor to Canada was diagnosed as a case of cholera in 1974, and a second diagnosis was made in 1977 in a Canadian who acquired the infection while overseas. No spread occurred in Canada. The recently described legionnaires' disease was confirmed in two patients in 1977, and in approximately 20 in 1978. Poliomyelitis which, through aggressive immunization programs, has become a rare disease in Canada, was diagnosed in nine patients during the past summer. All occurred in unimmunized individuals who had rejected vaccination on religious grounds. Over the past eight years the average incidence has been three cases.

2. No outbreak of tropical disease has been reported in Canada during the last eight years. Epidemics of these diseases are unlikely to occur nowadays because of the ecological environment and improved hygienic conditions. As shown in

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the response to question No. 3, malaria is being diagnosed in an increasing number of patients. However, all cases have occurred among travellers returning from the tropics and spread within Canada does not occur.

3. The following table shows the number of cases of tropical or unusual diseases reported in Canada since 1970. As already noted, the increasing volume of Canadian travellers to tropical countries where the disease is still endemic.

Reported Cases of Rare Diseases—Canada, 1970-1977

	1970	1971	1972	1973	1974	1975	1976	1977
Amoebiasis	118	134	253	491	584	650	870	746
Brucellosis	31	8	16	8	27	30	38	39
Cholera	—	—	—	—	1	—	—	1
Leprosy	6	9	10	15	10	11	18	16
Malaria	5	7	7	25	24	52	91	96
Poliomyelitis	2	6	2	4	3	2	—	2
Psittacosis	9	3	6	2	2	1	—	6
Tetanus	11	6	3	3	8	1	7	8
Trichinosis	6	3	16	14	49	7	41	23
Tularemia	1	1	—	1	8	2	35	5

4. Tropical and unusual diseases are reported by the physician making the diagnosis—either to the local medical officer of health—or directly to the respective provincial epidemiologist. Action is then taken for location and examination of contacts, if this is necessary. Provincial health authorities in turn alert Department of National Health and Welfare officials if further interprovincial or international action is indicated for control of the disease in question.

5. With Department of National Health and Welfare support, a special committee was formed to develop a "Canadian Contingency Plan" dealing with the principles and management of exotic dangerous communicable diseases. This was published in March 1978, and since then approximately 3,500 copies have been distributed to federal, provincial and municipal health authorities. In addition, pamphlets are produced to alert travellers of disease risks in foreign countries. Travel agency associations are informed of special vaccination requirements and ongoing training is maintained in biosafety practices for quarantine officers at ports of entry.

6. Immunization is readily available, although the number of vaccines of proven safety and efficacy is greatly overshadowed by the number of diseases for which no adequate prevention exists. In general, family physicians can provide most immunizations, and many local health departments provide special clinics for traveller vaccinations. Yellow fever vaccine is supplied free of charge in National Health and Welfare designated clinics.

MR. JOHN C. DOYLE

Question No. 654—**Mr. Crosbie:**

1. (a) With respect to Mr. John Christopher Doyle and his reassessments for income tax for the (i) 1950 (ii) 1954 taxation year, what is the total amount of income tax, interest, penalties and court costs due to the government by Mr. Doyle and the amount owing with respect to each category (b) what part of the amount owing to the government was collected?