

medical association or the society of clinical investigation or some other medical group when we tried to make such a definition.

Mr. FAIRWEATHER: I am interested in what I might call the international warning system. It intrigues me that for instance in many areas of defence we have this system but is there an early warning system in this phase of our life as well?

Dr. MORRELL: There is not yet established an early warning system, but the department of national health representative at the Geneva world health organization meeting last May initiated and co-sponsored a resolution which was adopted I think by the world health organization's general assembly, which asked the world health organization to study this matter with a view to making some recommendation toward setting up such a system. I do not know what action has been taken.

Mr. MONTEITH: Mr. Chairman, is there not supposed to be a report at the next meeting of the W.H.O. in this regard? Perhaps Doctor Cameron could give us this information.

Dr. G. D. W. CAMERON (*Deputy Minister of National Health and Welfare*): Mr. Chairman, that is being considered by the executive board of W.H.O. at the present time. We are a member of the executive board. Doctor Layton is there and this matter is being dealt with.

Mr. HORNER (*Jasper-Edson*): I should like to ask Doctor Morrell as to the present status of LSD. It is, as I understand, included in schedule H, but it is available to qualified investigators, is that right?

Dr. MORRELL: That is essentially correct, yes. In the case of LSD a qualified investigator is restricted in the sense that he must be working in an institution approved by the minister.

Mr. HORNER (*Jasper-Edson*): May I just suggest that we may probably get some policy in regard to a definition of a qualified investigator by questioning some of the individuals who will be coming before us at a later date.

The CHAIRMAN: I hope the committee will keep that thought in mind.

Mr. NICHOLSON: Mr. Chairman, I should like to suggest that perhaps we give those individuals advance notice of our intention to ask for their assistance in this definition rather than taking them by surprise as was Doctor Morrell this morning.

The CHAIRMAN: I might say that anyone who it is proposed to call before this committee will receive copies of the proceedings of this committee so that they will be informed as to what is happening.

Mr. ORLIKOW: Will this be done on a regular basis, Mr. Chairman?

The CHAIRMAN: I am trying to set it up on a regular basis, but I will of necessity require a motion from this committee to print additional copies of its proceedings in view of the fact that we do not now have sufficient numbers to follow such a practice.

Mr. NICHOLSON: Doctor Morrell, during recent months, probably because of the thalidomide and LSD situations, attention has been directed toward the dangers or adverse effect of new drugs. What about the good side effects of new drugs, and I think that as an example we could refer to dramamine; is this left to the individual practitioner to report it to you or to report it to the drug manufacturers? When a drug being used for one purpose is discovered by accident to have good medicinal qualities for some entirely different purpose, how is that information brought to the attention of the professions?

Dr. MORRELL: The clinician who has discovered this new use should report it to the manufacturer, or report it to the medical journal.