

biomedical research, the community initiatives across Canada and the kind of core funding they need, and the issues around a national treatment registry."

The witnesses from the Royal Society of Canada called for even more government spending. Dr. Fraser testified that his Economics and Epidemiology Subcommittee had recommended that an additional \$50 million annually, for a minimum total of \$80 million per year, be spent on education and prevention alone. He added that an almost equivalent figure now appeared to be required for epidemiological and social research. Those estimates alone would point to spending needs many times higher than the current federal government commitment.

NAC-AIDS has also done an economic analysis, for the information of the Minister of Health and Welfare, which looked at Canada's commitment to AIDS and compared it with the American and Australian efforts. This study looked at the data available on the differences in the extent of HIV infection in the three countries, as well as population sizes and funding efforts. Dr. Normand Lapointe, the Chairman of NAC-AIDS, testified that the study showed that Canada's efforts so far have amounted to about 44% of what the Americans have done and 40% of what Australia has done.

Dr. Catherine Hankins, also from the Advisory Committee, testified that the conclusion from the study was that the amount committed by the federal government in Canada for the period from 1989 to 1993 should be "at least \$363 million" for research and prevention alone, if this country is to mount an effort comparable to that in the United States and Australia. This would represent an almost three-fold increase over current funding commitments.

Ideally, the Committee would like to have available internally-generated criteria which would tell us exactly how much money is required to deal with the threat posed by the disease in Canada. We would like to be able to determine what effect a given level of expenditure would have on the general pattern of the spread of the disease, and therefore, in general, how much we could expect the spread of the disease to be lessened if expenditures of the order advocated by the witnesses were made.