

throughout the country as to whose responsibility it was and why we did not do something about the labelling of these products, we felt it would be a suitable bit of work if we collected the information on the poisonous ingredients in various household products so as to provide a method of treatment for such poisons. I think it was in 1957 that we finally prepared a series of cards listing not only the proprietary and patent medicines but also a considerable number of other products that are commonly used in the home. These cards were offered, I think, through the dominion council of health to various provincial health departments for use in the hospitals. In many cases of accidental poisoning that are brought to the hospital as an emergency, the difficulty is that the doctor who has to deal with the case is unaware of what poison he is dealing with because in many cases of course the list of ingredients is not given on the label. In that case the information on the card would help to resolve that difficulty. I think this was the beginning of the establishment of poison control centres in the hospitals in various provinces.

Now, it was not the business of the food and drug directorate to establish poison control centres. We merely offered information to those hospitals which wanted to establish the centres. As the food and drug directorate we have no authority, and perhaps no particular competence either, as to what should constitute a proper and adequate poison control centre. Our rule in this has been the supplying of information and in general the suggestion of a method of treatment for a particular type of poison, and we have adhered to this.

Further to the supplying of information, we believe we should get something back from the hospital for our use and interest. We have therefore asked the poison control centres to fill out forms on each poison case they have encountered and to send them to us. We are anxious to know what particular items were the worst offenders and if they are drug products. If they are drug products, then an amendment to our legislation or some labelling change may be required and may be helpful in reducing the number of poisons from a particular substance. We have used the reports of the poison control centres to give us this information. Mr. Leduc, who is in charge of the poison control programs so far as the food and drug directorate is concerned, is here and he could tell you the relative number of poisonings from household products such as cleaners, polishers, kerosene and so forth as against the drug products. At the moment of course we have no legislative authority over things that cannot be classified as foods, drugs, cosmetics and medical devices. All we are doing here is to provide information and collect information from the centres. I do not know whether that is a complete answer to your question.

Mr. WILLOUGHBY: Could I ask Dr. Morrell whether his directorate keeps a list of the new products that are being registered so as to notify the poison centres immediately that this new drug is being released? They will then know what type of antidote or what treatment to apply.

Mr. MORRELL: These are relatively few. You know that new drugs are not just new chemical entities; they are perhaps combinations of old drugs in different proportions. If it is that kind of new drug, the method of treatment is already known. However, if it is a new substance, then the method of treatment would be very valuable. Would you like to say something on that, Mr. Leduc?

Mr. J. F. G. LEDUC (*In charge of Poison Control Programs, Food and Drug Directorate*): Mr. Chairman, with regard to new drugs, at the present time we have sent limited information to poison control centres because they were all asking for information on household products—that was their main interest. We have sent some information on new drugs, but most of our information has been on household chemicals.