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The fact is that the retail sector which deals with patented drugs, the patented drugs being the part under the control of the Patented Medicine Prices Review Board, represents only 20 per cent of all of the prescription drugs sold in this country. Therefore, even if the drug prices went up considerably, it could not do the things that my hon. friend is suggesting.

However, I will repeat because I want to reassure all of the people out there who are listening that in fact they will not be saddled with huge and inordinate drug increases because of this new bill. The predictions are that there will be no increase in the coming year and that there will be a small increase up to about 2 per cent by the year 2000. That is all.

• (1750)

Mr. Raymond Skelly (North Island—Powell River): Mr. Speaker, I am pleased to have an opportunity to enter into this debate on Bill C-91. It proposes to extend patent rights for 20 years on pharmaceutical products developed by national or foreign multinational corporations in Canada.

It is interesting why we are being saddled with this legislation. Canada has about 2 per cent of the world's drug market. It is not a major place in which to sell items. However it certainly can be an example for other countries, especially if the Americans want to ensure there is no extensive development of national generic drug companies.

If foreign multinationals, especially American multinationals, are to have a patent protection arrangement that will last for a long period of time, George Bush has certainly had an easy task to bring this Conservative government under control, get it to pass an extension to the Patent Act and eliminate generic opportunities. Now we see an even further example of that extension.

When the previous speaker says that this is not a matter of health care concern, it surprises me. We have eight governments in Canada saying it is a major health care concern and one that frightens them, one that makes them concerned that their pharmacare programs are going to become financially unsound if they continue in their present direction because of a substantial increase in those drugs. Specific kinds of actions are going to be taken.

It is not just the concern about rising pharmaceutical costs because of irresponsible legislation by the Conservative government. It is the fact that the unilateral movement away from partnership in health care generally is a serious problem.

The activities of the Conservative government over the last few years have resulted in British Columbia losing about \$1.6 billion of federal funding to health care. That started out as a partnership agreement. Then by unilateral change the federal government simply said: "We do not like the situation. We are going to change that situation". British Columbia is out \$1.6 billion.

I do not have the figures offhand for Manitoba but certainly the previous speaker, the province in which she will be laying her record before the electorate, will be more than somewhat concerned by the major loss of funds that were originally in a partnership arrangement with the federal and provincial governments that has damaged the health care system, and indeed the entire economy of most provinces.

We are talking about a combined effect. On one hand we see a \$1.6 billion loss to the health care system by removal of federal funds and on the other hand a response to federal legislation by removal of generic drugs and placing patent protection over brand name pharmaceuticals produced by multinational corporations.

This is not about job creation. In the final analysis we may wind up in Canada with some jobs. They may be simply jobs that were required at any rate for testing new drugs introduced. They may simply be pure science arrangements to develop new drugs that would have been spent anyway at universities of good quality with good quality results.

Certainly they are not going to offset the cost to Canadians of high priced pharmaceuticals. The minimal amount of research in this country, the minimal amount of employment, is not going to be offset by the work done by generic drug companyies. That research, that job creation, is coupled with a major saving to our pharmacare operations, to prescriptions to individuals and to prescription medication put out by hospitals which was something in the order of \$100 million last year in