Government Orders

me very pleased, and it is now called Boehringer Ingelheim.

Bill C-91 will be studied by the committee and I am sure that all members of this House will have constructive suggestions. Let us act promptly and send this bill to the committee for consideration. I must tell everyone here to stop frightening people. Investors want to have some return. No one in business invests without getting a return. With the laws and the board, I am sure that consumers will be well protected and I hope that the board will be very strict.

My colleagues in the opposition are against it. They are against everything. They will not help us build. It is not thanks to them that we have had investments in our riding; it is thanks to Bill C-22, and I hope that we will have more with Bill C-91.

Mr. Milliken: On a point of order, Mr. Speaker. I believe that you will find unanimous consent for the House to continue sitting between one and two o'clock this afternoon.

The Acting Speaker (Mr. DeBlois): Is there unanimous consent for the House to continue sitting over lunch hour, from one to two o'clock?

Some hon. members: Agreed.

The Acting Speaker (Mr. DeBlois): I did not hear anyone say no, so it is agreed and accepted.

[English]

Mr. Jim Karpoff (Surrey North): Mr. Speaker, I listened with a great deal of interest. I want to ask three specific questions.

I would like to point out something about this whole issue of pricing and research and development. First of all, looking at British Columbia, we have been promised \$15 million over five years. However, it has already been documented that it is going to cost our provincial pharmacy program \$40 million each and every year. On one drug alone that is caught in the pipeline, as they call it, that has been given a licence, it will be taken back because after December 1991 it will cost \$146 million over the next 15 years.

Nobody in Canada believes the documentation of the Prices Review Board. It is simply because every other independent organization, like Green Shield, has documented that the average price increase of drugs already in existence was 6.4 per cent.

They did a study in B.C. which showed that the cost of drugs to the pharmacy program has increased 72 per cent. Out of that 17 per cent was because of additional usage, -47 per cent because of a reduction in dispensing fees—actually dispensing fee costs went down—and 133 per cent in average ingredient costs, in other words, the cost of the drugs to the pharmacy.

They talk about all of the wonderful research and development that has gone up to 10 per cent of sales. Compared to the rest of the world, the United States has a minimum mandatory 16 per cent, Germany has 16 per cent, the United Kingdom has 20.9 per cent and Sweden has 21.8 per cent. This is going back a couple of years. They have not even begun to catch up to the rate of research and development that takes place in other countries.

In addition, more than 50 per cent of our research is only clinical trials. It is not basic research.

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Third, the Prices Review Board. The American drug companies made it very clear when the president of the pharmaceutical association, Gerald Mossinghoff, stated that the members of the Pharmaceutical Manufacturers' Association in Washington would like to eliminate the Canadian government's price controls.

They want an extension of patent protection. Then they will eliminate the prices control. Lo and behold, what do you find? James MacPherson, the dean of Osgoode Hall Law School, said that there is no doubt that this legislation could be struck down on a constitutional challenge as it relates to price control.

What the Tories are saying is: "We will pretend we are hiding behind this prices control knowing full well it is going to get struck down by the American Pharmaceutical Manufacturers Association which will challenge it in our courts".

My three questions are: How can you justify it knowing that the legislation as it pertains to price control is probably unconstitutional? How do you justify a rate of research and development which is more than 50 per cent clinical trial, has nothing to do with basic research and is not anywhere near any industrial country? How do