Medicare

these other services. This legislation is defi- people you have to get the doctor's permiscient and will never meet the requirements of sion. This imposes control upon the individual our people if the government adheres to the receiving these services and puts the power of arguments it is using. The government should take into consideration the practices which are common among the people.

I can assure the government that it will hear more about this question from the people if this legislation is never put into effect in this form. I do not believe in ministers making snap judgments. These decisions should be made in caucus where the opinion of the members of the party can be had. We do not want to force on the minister what are after all reasonable decisions. I suggest that this clause stand and that the government think about it.

Mr. Patterson: Mr. Chairman, I think we are in a dilemma at the moment. Could you rule on whether we are debating the point of order that was raised or the amendment introduced by the hon, member for Winnipeg North Centre? I and other hon. members wish to debate this matter but we are wondering whether we are on the point of order or on the amendment. We would appreciate a ruling from the chair.

The Chairman: The point of order raised by the Minister of National Health and Welfare was whether or not the amendment moved was in order. If it is the wish of the committee I will now render a ruling on whether the amendment in my opinion is or is not in order.

Mr. Langlois (Mégantic): Mr. Chairman, speaking on the point of order, I point out that everyone has been talking on and off the point of order, referring to Beauchesne and May and giving their own opinions. I was wondering whether, if you were ruling the point of order out, we would still discuss the matter. If this is so I would be pleased to give my views first.

With regard to the amendment brought in by the hon. member for Winnipeg North Centre, some hon, members have indicated that if we cannot have the whole principle we will have half of it. How can we have half a principle? The amendment may not be to the entire liking of the hon. member for Winnipeg North Centre, and possibly not to mine, but I do not like to see concessions made to those ence in a particular disease or ailment, not affiliated with the medical profession such as just a jack of all trades. It does not cost more dentists, optometrists and chiropractors, those who are not medical doctors in general prac- by a doctor but it hurts less. In this issue tice. Every time you want to see one of these there is no difference in terms of dollars and

the Almighty into the hands of the college of physicians.

I recall reading about the life of Louis Pasteur who advanced the theory of pasteurization. This was at a time when there were many post-operative problems because of unclean utensils, the use of which caused many deaths. There was even a sickness in the medical books known as doctor's disease. For example, people did not die from appendectomies but from complications thereafter. Then Louis Pasteur introduced the pasteurization process, and he was a chemist, not a doctor. The point is: are medical advances sound only if propounded by medical doctors or is a thing sound if it makes good sense? If a given method is useful it should be put into practice.

I do not see how this amendment would increase the cost. If I need to see an eye specialist I will pay him for his services. If I see an optometrist I will pay the optometrist, not the eye specialist. Perhaps it will cost me the same amount of money, but I will be satisfied with the services I receive and will be able to walk down the street straight without hitting a post.

Doctors today tend to specialize. Some specialize in care of the feet, others in care of the ears, others in care of the eyes and others in care of the spine. There is a need for specialization today, and perhaps we need a few specialists in politics too. But one thing we always forget is the commonsense of the whole issue. For example, anyone with sore feet will not go to see a head specialist unless, of course, he hasn't got a head. But the point the minister is making is that when we need an eye specialist we have to go and see a doctor who can treat appendicitis. If we have sore feet we must go and see a doctor who can treat appendicitis. A doctor might be good at operations for appendicitis, but not nearly as good in treating a case of earache.

## • (9:30 p.m.)

I raise my hat to the medical profession. I do homage to them. But it is impossible to specialize in all branches of the science. When people go to see a specialist they know they are seeing a man with a great deal of experito have a tooth extracted by a dentist than