

*Medicare*

respective professions from being overcrowded. Perhaps the whole matter needs a new look to see what can be done to facilitate an increase, particularly in the medical profession. In the present circumstances we ought to have a crash medical program, first, to convince the medical profession to lower its standards, and, second, to make the pre-medical course unnecessary and allow students to enter medicine immediately. Furthermore, we ought to make the course available free of charge to qualified people.

Also, I do not think that the universities are making enough use of their quarters. If in this country, for example, we need doctors, engineers, physicists, or whatever professions for which we should establish priorities, then courses such as liberal arts, commercial and the like which do not produce scientists, doctors or physicists ought to be taught at night. The building facilities should be used during the day to further the studies of those students who may now be turned away in the fields of science, medicine, physics and so on. I admit that the universities have to expand their quarters in certain instances but the need for some of this expansion could be overcome by staggering the hours at which different courses are taught.

I hope that the establishment of medicare will bring the doctor back to the patient. I hope that the medical profession will not even wait for medicare but that, for example, a pool of doctors will be established which can be drawn on in the middle of the night. If you do not have a family physician it is impossible in an emergency to get a doctor in the middle of the night. Under medicare I hope that this problem will be taken care of so that a person or a family may call the College of Physicians and Surgeons say at two o'clock in the morning when somebody is ill and in need of a doctor. From this pool of doctors it would be the duty of the college during such hours to direct a doctor to the patient.

I suggest that many of the ills a patient suffers from today are often aggravated by the fact that he has to go to the doctor's office and take all kinds of tests. In the past, when the family doctor came to his house and reassured him that his illness was of minor consequence, the patient often recovered more quickly than in these days. I hope that the human relationship that existed at one time between doctors and their patients can be re-established.

[Mr. Klein.]

I also think that the legislation we implement with respect to medicine ought to be part of a concentrated war on poverty. Not enough effort is being concentrated in this direction. I say that because many of the persons requiring medical attention today require it because of malnutrition.

I should like to see the day when, as part of the war on poverty—and I think that medicare is part of the plan of zeroing in on poverty—we designate in certain urban areas pockets of poverty bounded by certain streets, and within those streets we ought to impose rent control. If there are other areas in a city with buildings which, for example, are classified as third class, then those buildings should also be placed under rent control.

I should also like to see the day, and I do not think it should be far off, when we can call dieticians before an appropriate committee of the house to tell us what basic nutrients a person requires in order to exist for a 24-hour period. If those nutrients constitute, for example, milk, bread, certain cuts of meat, whatever those basics are, I think that price controls ought to be enforced on such basic human needs. I am not talking about luxury items or luxury meat cuts. I am talking about basic nutrients.

The government might consider, for example, subsidizing the producers of these basic nutrients at the source of production so that the price spread between the producer and the retailer will always remain constant. I suggest that price control on these food essentials could be worked out. I do not suggest the manner in which that should be done. But, for example, when we give a franchise to a transportation company we say that the company, irrespective of any loss it may incur in providing passenger service in certain areas, must, as part of the franchise, accept the duty of carrying passengers. Before a food market is permitted to establish itself it is placed under an obligation to carry certain essential food products at a price which is controlled or set by the government—I recognize this is a provincial field—or else lose its right to conduct a food market.

● (5:30 p.m.)

The hon. member for Gatineau (Mr. Isabelle) has told us there are 24,000 doctors in Canada, only 9,360 of whom are general practitioners with the others practising in particular branches of medicine. This may account in some measure for the high cost of medical treatment in Canada. I believe that if the proportion were reversed and we had