

Oral Questions

Given that the Canadian Lung Association has urged the Department of National Health and Welfare to include all of the health risks of smoking in the labelling of cigarette packages, I would ask the Minister to inform the House as to the reasons why all of these major known health hazards are not displayed; why it is that only one of the numerous health risks involved in cigarette smoking will be displayed at a time, on a rotational basis, on each cigarette package.

Hon. Jake Epp (Minister of National Health and Welfare): Mr. Speaker, at the outset I want to congratulate the Hon. Member on his election to the House. As a result of his election to this House, we can now bring to the floor of this House the debates in which we engaged in Manitoba.

The changes that have been requested by the Canadian Lung Association, the Canadian Heart Association, the Canadian Cancer Society, and others, have been examined by my office, and some changes have been made. As a result, the information that he includes in his question is somewhat dated in terms of the kind of message that we intend to bring forward.

REQUEST THAT MAJOR HEALTH HAZARDS BE INCLUDED
ON LABELS

Mr. Rey Pagtakhan (Winnipeg North): Mr. Speaker, given the serious implications for all Canadians of not knowing all of the major known health hazards, given that the Canadian Lung Association is an authority on this subject, and given that the Department of National Health and Welfare anticipates the implementation of this regulation shortly after the New Year, I would ask the Minister to instruct his Department immediately to require that all of the major known health hazards be displayed on each cigarette package, and displayed not on a rotational basis, one at a time, but all of the time, for the safety of all Canadians.

● (1200)

Hon. Jake Epp (Minister of National Health and Welfare): Mr. Speaker, I think the Hon. Member might want to re-examine that suggestion. If all these warnings were placed on the same cigarette package, given his age and mine we might need even more help to read them all because of their size.

This Government brought in Bill C-51, which has been recognized as legislation leading the world with respect to both the message and also the space for the message on packages and cartons, as well as billboards which presently do not have warnings. These warnings

have been stiffened compared to the ones originally considered. As well, there are two tranches to those warnings, which must be considered in light of our trying to get them into the marketplace for January 1, 1989.

I believe when he sees the warnings he will see they are not only in keeping with the health objectives of the Government, but specifically with the commitments we made under Bill C-51.

Mr. Speaker: There will be a single question from the Hon. Member for Windsor—Lake St. Clair.

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PHARMACEUTICAL INDUSTRY

DRUG COMPANY'S OFFER OF COMPUTERS TO DOCTORS

Mr. Howard McCurdy (Windsor—Lake St. Clair): Mr. Speaker, my question is addressed to the Minister of National Health and Welfare.

According to Dan Burns, Vice-President of Squibb, in an effort to meet the promise to double research in response to the imposition of the new drug patent legislation on Canadians, Squibb and Company are offering a \$2,000 personal computer to each doctor who prescribes Capoten, its expensive anti-hypertension drug, to ten or more patients.

What is the Minister's view of this transparent bribery, and what action does he intend to take?

Hon. Jake Epp (Minister of National Health and Welfare): Mr. Speaker, I remind the Hon. Member that Bill C-22, which he opposed so vigorously and which he said the industry would not respond to, has been responded to through expansion of research and development exceeding \$1 billion. We needed that money in this country and we needed to put ourselves on the leading edge of drug research. That has happened across the country and I am very pleased that the Bill is working so well.

With respect to the gentleman's specific question, he knows that the medical associations are self-policing professional associations. As I understand it, a letter has been sent from the OMA to various physicians involved in the program. From my Department's point of view, obviously we do not encourage any process that would be seen as inducement. We believe professionalism should be the hallmark of any action taken by physicians.