

# HOUSE OF COMMONS

Thursday, February 24, 1972

The House met at 11 a.m.

## ROUTINE PROCEEDINGS

### DRUGS

#### METHADONE AND AMPHETAMINES—STATEMENT ON ACTION TO CONTROL ABUSE

**Hon. John C. Munro (Minister of National Health and Welfare):** Mr. Speaker, the government, as many members are aware, is deeply concerned about the non-medical use of drugs and the effects of such use on the individual and on our society. As part of our program to combat this hazard through a balanced comprehensive strategy, I wish to announce important action in relation to two different types of drugs, the abuse of which has been a public health problem of major proportions in this country. I refer to action against the abuse of methadone and the amphetamines.

Methadone is an opiate-type synthetic drug which has become widely used in the treatment of heroin addiction. During the last year, staff of my department have received many reports of misuse and abuse of methadone. As a result of concern over misuse of this drug, the former Food and Drug Directorate of my department and the Canadian Medical Association established a joint committee in 1970 to investigate the proper place of methadone in the care of narcotic addicts. Concern about the abuse of methadone also was raised by the Le Dain Commission in its final report on treatment, which was submitted to the government a few weeks ago.

As a result of the recommendations of the joint FDD-CMA committee and of the Le Dain Commission, I have decided to restrict the availability of methadone in the following way: Physicians will be permitted to prescribe methadone only after they are authorized to do so by the Minister of National Health and Welfare. Those so authorized will be considered to be qualified by reason of expertise and the availability of necessary facilities and ancillary services to utilize methadone effectively in the treatment of heroin abuse.

In line with the recommendations of the Le Dain Commission, authorized physicians will be required to be associated with a specialized clinic. Requests for authorization will be considered by an expert advisory committee to be appointed by me in co-operation with the medical profession. I expect that necessary regulatory changes can be made and the methadone control program instituted within a few weeks time. The program should be fully operational by June 1 of this year. In the meantime I call upon the physicians of Canada to utilize restraint in the use of methadone.

• (1110)

Although smaller amounts of amphetamine are now being prescribed in Canada than a few years ago, considerable evidence has come to the attention of my department indicating the over-prescribing of these drugs by some medical practitioners. Considerable evidence also exists that the related drugs, phenmetrazine and phendimetrazine, are misused in a manner similar to that of amphetamines.

Medical authorities are agreed that the legitimate medical uses of amphetamines are extremely limited. They have at best only a minor role in rational drug therapy, primarily for the treatment of two relatively rare and obscure disorders, narcolepsy and hyperkinesis in children.

As a result of my grave concern about the serious public health implications of amphetamine abuse, I have decided that the use of amphetamines and the related drugs, phenmetrazine and phendimetrazine, will be limited to treatment of only those disorders for which they are indicated on medical grounds. Use of these drugs for treatment of obesity as so-called "diet pills" will no longer be permitted. Any physician wishing to prescribe amphetamines, phenmetrazine and phendimetrazine will be authorized by the Minister of National Health and Welfare to do so provided he wishes to use the drugs for treatment of bona fide narcoleptics and hyperkinetic children. In co-operation with the Canadian Medical Association and L'Association des Médecins de Langue Française du Canada, a list of consulting physicians will be drawn up to aid in verification of the diagnosis of these relatively rare disorders.

I am extremely pleased with the co-operation being offered to us by the medical associations of Canada in helping solve this important problem.

I am fully aware, as are other hon. members, that this action to control misuse of legally prescribed amphetamines does not directly affect use of these drugs by so-called "speed freaks" who obtain their drugs from illicit sources. Nevertheless, this action does indicate the serious light in which the government views amphetamine abuse and should have marked effects on an important aspect of abuse of these drugs, that by adults who obtain their drugs on prescription.

It will take a few months to work out the details of the amphetamine control program in co-operation with the medical profession. I expect, however, that the program will be fully operational by September 1 of this year.

In closing, Mr. Speaker, may I make a brief mention of another aspect of our total program to control the misuse and abuse of drugs. In January of this year, we invited parents and others receiving federal social assistance cheques to send for a free information booklet entitled "A Parent's Guide to Drug Abuse". Public response to this