

C-30, an act to provide supplementary borrowing authority for the fiscal year 1980-81. I wish to give notice that, at a future sitting of the House, I shall propose a motion, pursuant to Standing Order 75C, to allocate one additional sitting day to the second reading stage of the said bill.

Some hon. Members: Closure.

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QUESTIONS ON THE ORDER PAPER

Mr. D. M. Collette (Parliamentary Secretary to President of the Privy Council): Madam Speaker, the following questions will be answered today: Nos. 165, 166, 244, 319, 320, 594, 692, and 870.

I would ask that the remaining questions be allowed to stand.

[Text]

NATIONAL HEALTH AND WELFARE—CAFFEINE

Question No. 165—**Mr. Cossitt:**

1. Is caffeine considered by the Department of National Health and Welfare as the drug consumed the most in Canada in various forms and, if not, what is such drug?

2. Is it an established fact that caffeine can often cause cardiac arrhythmias?

3. Has the department any evidence that caffeine may cause cleft palates and other deformities in unborn children, still-born babies and spontaneous abortions?

4. Is the Department aware that the United States Food and Drug Administration has tested caffeine on rats with the result that some have been born without toes?

5. Is caffeine regulated by any federal law and, if not, for what reason?

6. What level of caffeine, in the department's view, can be consumed daily by the average individual without causing physical harm?

7. Is the department considering the labelling of products containing caffeine as potentially dangerous above certain amounts of consumption?

8. What amount of caffeine is in (a) ten ounces of Coca-Cola (b) one cup of coffee (c) one cup of ordinary tea (d) one bottle of Pepsi-Cola?

9. Is there evidence to show that caffeine can cause anxiety, tremors, higher blood pressure, inability to sleep and ulcers?

Hon. Monique Bégin (Minister of National Health and Welfare): 1. Definite evidence to answer this question is not available. However, the Department of National Health and Welfare estimates that on the basis of the amount used by Canadians, alcohol ranks first.

2. Caffeine may produce cardiac arrhythmias in some susceptible individuals.

3. The department is not aware of any evidence indicating that the ingestion of caffeine causes birth abnormalities in unborn children, stillborn babies, or spontaneous abortions. Two retrospective epidemiological studies of more than 14,000 mothers whose caffeine consumption was tabulated revealed no apparent association between caffeine consumption was tabulated revealed no apparent association between caffeine intake and abnormalities in their offspring.

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4. The department is aware of a preliminary study conducted by the United States food and drug administration in which fetuses were observed with missing digits when caffeine was administered at a massive dose level of 80 milligrams per kilogram of body weight by mouth to pregnant female rats. There is no evidence that caffeine consumption during pregnancy is associated with missing digits in human infants.

5. Caffeine is regulated in part B of the food and drug regulations, specifically table 8, division 16, restricting its use as a food additive to cola type beverages, the maximum level of use n to exceed 200 parts per million. Caffeine is used as a drug and is regulated in the same manner as all drugs.

6. Although it is known that reversible pharmacological effects of caffeine become manifest at doses in excess of 300 milligrams, there is no evidence that lasting harmful effects occur below the lethal dose of approximately 10 grams.

7. Based on the scientific data available at this time, the department is not considering the labelling of products containing caffeine as potentially dangerous.

8. (a) and (d) A ten-ounce bottle of cola beverage (Coca Cola, Pepsi Cola) contains approximately 40 to 50 milligrams caffeine. The caffeine content of an average cup of coffee is approximately 85 milligrams and an average cup of tea 50 milligrams.

(b) and (c) These values may vary slightly depending on the method and length of time of brewing.

9. Reactions in some individuals may be observed following the ingestion of excessive amounts of caffeine. These occur mainly in the nervous system producing insomnia, restlessness, excitement and tension, but these symptoms are readily reversible. There is no concrete evidence that caffeine induces high blood pressure or peptic ulcers.

HEALTH AND WELFARE—CALCIUM PANGAMATE

Question No. 166—**Mr. Cossitt:**

1. What are all the details possessed by the Department of National Health and Welfare regarding calcium pangamate, sometimes sold under the name of Nyamik 15?

2. Is the drug sometimes referred to as Vitamin B-15 and has it been classified as such in Canada or is it being considered?

3. To the knowledge of the department, have certain American doctors referred to it as vitamin B-15 and have they claimed that their studies have shown that it gives energy to a person within a 1/2 hour to an hour after consumption?

4. Has the drug, in the department's view, any valid use whatsoever and (a) if so, what are such uses (b) if not, is its promotion therefore questionable?

Hon. Monique Bégin (Minister of National Health and Welfare): 1. Calcium pangamate is a salt of pangamic acid which can be extracted from apricot kernels, peach stones and rice bran. It is found in many seeds and is also present in brewer's yeast, ox blood and animal liver.

2. Calcium pangamate is not a vitamin and labelling it as vitamin B-15 would be at variance with the food and drug regulations.