Some Hon. Members: On division.

Clause agreed to.

The Deputy Chairman: Shall the preamble carry?

Some Hon. Members: On division.

Preamble agreed to.

The Deputy Chairman: Shall the title carry?

Some Hon. Members: On division.

Title agreed to.

The Deputy Chairman: Shall I rise and report the Bill?

Some Hon. Members: Agreed.

Bill reported.

• (1850)

Mr. de Cotret moved that the Bill be concurred in.

Some Hon. Members: On division.

Motion agreed to.

Mr. de Cotret moved that the Bill be read the third time and do pass.

Some Hon. Members: On division.

Motion agreed to and Bill read the third time and passed.

Mr. Speaker: Order, please. May I suggest that we wait one minute for the House to clear and that those who wish to leave, do so expeditiously.

PROCEEDINGS ON ADJOURNMENT MOTION

[*Translation*]

A motion to adjourn the House under Standing Order 46 deemed to have been moved.

HEALTH—BREAST IMPLANTS—REQUEST FOR STRICTER CONTROL AND ADDITIONAL RESEARCH FUNDS

Mrs. Suzanne Duplessis (Louis-Hébert): Mr. Speaker, I would like to speak today about an important problem which affects more than 17,000 women each year in Canada, including 7,000 in Quebec. I wish to call the attention of the House to the breast implant studies submitted to me a few weeks ago by Dr. Robert Guidoin, an eminent researcher at the Experimental Surgery Department of the Université Laval in Sainte-Foy.

As a woman, I am very sensitive to this serious issue, which jeopardizes the health of many Canadian women each year. I made a statement about this last week and asked a question to the Minister of National Health and Welfare (Mr. Epp) to find out what had been done following my many interventions in this regard.

If I raise this issue once more today, it is because I consider that all Members of this House should be made aware of the urgency of undertaking a vast study program on breast implants used by surgeons, and especially on the need to regulate the quality of these implants.

Indeed, Mr. Speaker, the Department of National Health and Welfare now provides no control over silicone implants used by surgeons.

Research clearly show that, during the two years following the initial operation, inadequate silicone implants can rupture or leak, causing considerable damage to the tissue of the patient who must then be hospitalized for additional surgery.

Mr. Speaker, the optimism with which the use of medical silicones was greeted has now been tempered by caution in view of the various types of evolutive complications associated with them, such as calcification, distortion and proliferating encapsulation.

Of the implants examined, 21.7 per cent have shown signs of encapsulation, and this does not take into account the fibrous capsules sent by themselves. A slight difference was noted between intact and damaged implants. Intact implants showed fewer fibrous capsules, or 13.9 per cent, than the damaged ones, which showed 38.2 per cent.

As for mineralization, it was found present not only in the fibrous capsules, but even on the very surface of the implants. Of all implants examined, 48.1 per cent showed mineralization of the implant itself and 11.8 per cent of the fibrous capsule. The conclusions of the analyses show that intact specimens seemed to be more mineralized than the damaged ones. The proportion was 50 per cent in the first case and 40 per cent in the second. In addition, implants of the Heyer Schulte brand showed 80 per cent mineralization compared with 38.1 per cent for Dow Corning brands.

The results of these analyses show the serious problem raised by this surgery. After such an operation, the health of women is seriously threatened and this raises grave doubts about the safety of medical practices in this type of surgery.

• (1855)

That is why, Mr. Speaker, I feel it is urgent to make additional funds available in order to undertake immediately a major research program to remedy a situation which jeopardizes the health of thousands of women each year. I also ask the Minister of National Health and Welfare to establish very precise regulations to adequately control the implants used by surgeons.