

intractable pain means. It means pain that is not easily relieved. It is a persistent pain that does not go away. That is a pain characteristic of cancer in many cases.

In my experience as a physician I had the privilege and the opportunity of being taught at the University of Toronto—which is not just a third-rate medical school—to use heroin. It was recommended and as a physician I used it regularly as an analgesic in my first few years of practice in obstetrics. It is a tremendous analgesic in obstetrics. It gives the patient a sense of euphoria. If it is combined with hyoscine it gives some amnesia of the events, which for many people is desirable.

I am not aware of any patients who became addicts because they had one or two shots of heroin during the course of labour. I do agree that there are other techniques available to control the pain of labour which makes it less necessary perhaps to use heroin. But where one wants to use an injectable analgesic in obstetrics, I would be disappointed if we in the House of Commons thought that we had enough expertise to say no, you can only use heroin for the intractable pain of cancer.

Let me cite another example, Mr. Speaker. Perhaps some Members have had senior family members who have gone into severe heart failure in the middle of the night when they sit up in bed, cannot breathe, are choking and spewing out bloody sputum from their throats. They are in terrible agony and anxiety. The first thing a physician does at three o'clock in the morning when the goes to see a patient is to give the patient something to stop anxiety. The quickest acting drug is heroin. Morphine is not bad, and many of us have used morphine for that affliction in latter years. Nonetheless heroin is used regularly in the United Kingdom right now for that purpose. It quickly relieves the anxiety a person has, which is very important if you are going to give the person proper attention for his basic cardiac condition.

I am putting in a couple of pleas to the Minister and to his officials to give some serious consideration to the protocol they are developing. I know the Minister will do this, but I plead with him that he not forget there other good uses for heroin beside its use for the intractable pain of cancer. It would probably be a little bit of a mistake for us here basically composed of lay people trying to say that heroin is a tremendous pain-killer, but let us use it only for cancer. If it is good for that, it may be good for some other conditions too. I hope the Minister will recognize that and allow the protocol to be broad enough in its considerations to allow other uses as deemed necessary by licensed physicians.

I speak very strongly in support of this private Member's Bill, but even more so in support of the Minister who has indicated his willingness to have heroin promptly legalized for use in Canada. I hope that all Members of the House—I know there are others who want to speak—will see fit to support this proposition today.

Mr. Svend J. Robinson (Burnaby): Mr. Speaker, I rise to support strongly the initiative taken today by the Hon. Member for St. John's East (Mr. McGrath). I will try to be

Narcotic Control Act

brief. I know there are other Members who wish to take part in this debate. I would like to underline the point made by the Hon. Member for Oxford (Mr. Halliday). It is in circumstances such as this that Parliament really operates at its finest. When a Member of Parliament, who in this case has been a Member for many years, takes an initiative and approaches it on a non-partisan basis, works closely with the Minister, whom I commend for his reasoned and sensitive response to this Bill, and Parliament collectively acts on a matter clearly of national concern, it is Parliament at its best.

Over 40,000 Canadians die each year from this terrible disease of cancer. I am sure most Members of this House have had close friends or family members who have been afflicted by it. I myself have lost two very close friends, one 24 years old who suffered long and great pain before death, initially in the hospital and then finally, when it was realized there was no hope, at home with his family.

I hope the Minister will look very carefully at the suggestions made by the Hon. Member for Scarborough West (Mr. Stackhouse) and other Members with respect to the possible conditions that may be attached to the use of heroin in these circumstances. If we accept, as I believe we must, the positive benefits of the use of heroin for terminally ill cancer victims, I believe it would be a mistake for us to restrict the use of those benefits to a hospital setting. Obviously we must recognize that there must be careful controls. Given that, Mr. Speaker, I hope the Minister will examine carefully the broadening of the possible use of heroin.

I know the sponsor of this Bill, the Member for St. John's East, spoke earlier this year in March very eloquently on this Bill and he said that he himself was touched in his own family. I believe it was his brother who died in great agony from cancer. We are responding here not just as parliamentarians but as human beings to a serious problem.

I would like to join in paying tribute to work done by Dr. Kenneth Walker, also known as Dr. Gifford-Jones, who led a national campaign for changes in this area of the law. I believe over 150,000 Canadians signed petitions initiated by Dr. Gifford-Jones through his column. Dr. Walker did appear before the Standing Committee on Health, Welfare and Social Affairs, as my colleague from Oxford indicated. In a very short but eloquent statement he underlined the importance of parliamentary action in this area. He noted that some of the most believable and convincing witnesses could not appear before the committee because they were dead.

He set out a series of facts which I believe are important. First, heroin is a more potent painkiller than morphine. It is superior to morphine when patients require injections. Heroin has the most rapid onset of any narcotic. English doctors have increased their use of heroin nearly four times during the last ten years and decreased their use of morphine. Heroin is prescribed by British physicians to treat heart attack victims, women having difficult labour, severely burned children and young children during the terminal stage of malignancy. Not just with respect to cancer, heroin has been found to be very helpful in other areas as well. It helps to calm apprehensive