

*Medicare*

medical care plan podiatrists and oral surgeons must be regarded as being included in the term "medical practitioner."

I wish to deal particularly with podiatrists but I think my remarks will apply equally as well to oral surgeons. Under provincial statute the podiatrist now performs surgical excisions of cysts and tumours under anaesthesia, also treats fractures, sprains and dislocations. He provides medical and surgical care for the feet. He is a trained medical specialist in diseases and ailments of the foot. If podiatrists are not included in the term "medical practitioner", in my opinion this would be discrimination against a legally licensed branch of the medical profession.

In presenting this argument I refer to briefs already submitted to the minister, and I am sure he will recognize many of the points I will be making. I quote from a brief submitted to the minister by the Canadian Podiatry Association in which it is stated:

Podiatry is that specialized field of medical practice which is concerned with the prevention, diagnosis, medical, surgical, mechanical, physical and adjunctive treatment of, and the prescribing for, all diseases, defects and disabilities of the human foot—

It also says:

No practitioner of any branch of the healing arts receives the intensive training in the field of foot care as does the podiatrist and no other branch is as equipped to deal with these problems.

At another point it says:

Aspirants for a career in podiatry must meet high standards of preliminary education, take at least two years of university training in arts and sciences, similar to a pre-medical course, and successfully complete four years of the podiatry course prior to the award of a degree.

A little farther on it refers to a comparison of educational training as between medicine and podiatry and gives the following statistics. It shows that the basic medical course takes 2,288 hours compared with 2,076 hours for podiatry. For pharmacy and therapeutics the figures are medicine, 198 hours, podiatry, 186 hours; for clinical sciences, medicine, 2,682 hours, podiatry, 2,740 hours; and for the complete four year course of scientific study, medicine 4,970 hours and podiatry 4,548 hours.

It also states:

In the accredited colleges of podiatry, all medical and basic science departments are headed and, in the main, taught by medical teachers affiliated with medical schools or medical specialists in private practice.

[Mr. Pascoe.]

In another section the brief states:

Before the granting of a licence to practise, the candidate must pass the examinations of the medical or podiatry board of the province or state in which he wishes to practise.

The provinces of British Columbia, Alberta, Saskatchewan, Manitoba and Ontario have legislation governing the practice of podiatry. Quebec is in the process of obtaining a podiatry act.

The brief also states:

Podiatry does not contend that a medical services insurance plan must include benefits for foot conditions in the contract to be written. If the government chooses to sponsor a plan which excludes such benefits, this would be within their rights, and all practitioners of the healing arts would then fare the same. However, if reimbursement for the care of foot conditions is contained in the policy, then the carrier must recognize the right of any licensed podiatrist to treat, if so selected by the insured...

The medical profession constantly reminds the country of the shortage of physicians and the need for more men to handle the heavy patient loads. Increased utilization of the services of the podiatry profession results in freeing the doctor of medicine from the care of the feet, thereby allowing him to spend his time caring for the other ills of humanity.

I submit, Mr. Chairman, that the inclusion of podiatrists within the meaning of the term "medical practitioners" is not an extension of medical services as envisaged in the legislation. The inclusion of podiatric services would not result in a greater outlay of money from the federal treasury because the surgical treatment of the foot, if not performed by a podiatrist, would have to be performed by some other medical practitioner. I am sure there will be a scale of fees established under this legislation and that the cost of treatment by podiatrists would not be more than the cost of foot treatment by other medical practitioners. I repeat and emphasize that the podiatrist is a medical practitioner.

In this connection I would like to quote from an editorial which appeared in the Canadian Medical Association Journal, written by Dr. J. H. MacDermot, in which he said:

(the podiatrist) is now a trained professional man with rigid training . . . It is clear, then, that the modern (podiatrist) is a specialist in his own right . . . So we cannot deny the (podiatrist) of today an equal status with the dentist as a recognized part of the medical structure . . . He is really a trained specialist, a trained medical specialist, in diseases of the foot.

Dr. Philip Lewin in his book, "The Foot and Ankle", says:

Podiatry is the practice of diagnosis, medical, physical and surgical treatment of the ailments of the human foot.