

Drug Costs to Welfare Recipients

tures are equivalent to 95 per cent of expenditures on physician services. Outlay on prescribed drugs is estimated at approximately \$164 million in 1961, equivalent to about 43 per cent of medical services... Comparing again the period 1953 to 1961, the increases were 115 per cent for physicians' services and 81 per cent for pharmaceutical purchases.

The Hall Commission Report further pointed out that:

One extra day in hospital would cost more than the equivalent of four weeks supply of drugs and dressings.

Hall further concluded that:

Prescribed drugs must be included as a benefit of a comprehensive health care program for Canada.

I think that clinches the argument that we have been very tardy in not covering these people. I always feel that maybe half a loaf is better than none. Hall says this service must cover everybody. I would be happy if it covered those who need it, those who seek help, those in respect of whom it would be economic sense to pay for their drugs. We cannot afford, as a nation, to furnish a doctor and not furnish the rest of the treatment. A doctor sees a patient; he prescribes a life-saving antibiotic, but the patient may not have the money to pay for that drug. Just recently I saw a man who had been told to get certain drugs but could not afford them. Three weeks later he was admitted to hospital, where he is now fighting for his life. The turning point of his illness could come on Tuesday, and I will be phoning then to see what the situation is. It is a very interesting case of a person who could not afford the drugs that were prescribed for him. As a nation, we cannot afford that kind of thing.

Today we have people in white collar jobs still able to work at full capacity because of certain drugs. We have people in labouring jobs who are able to keep on working because of antibiotics, because of the heart medicines and the cardiovascular treatments we have developed. I cite the case of one man working in a factory in the city of Orillia. After he returns from work he has dinner, goes to bed and stays there until the following morning. For the past ten years he has been able to work because he take the medication that was prescribed for him, and rests as much as possible. He stays in bed all day Saturday and Sunday, and on Monday is ready for work again. By gosh, that fellow deserves a break and a pat on the back.

I ask for a display of the quality of mercy. I ask that the recommendations in the Hall Commission Report be implemented. I ask that we complete the treatment. We already pay the doctor, so let us now pay the drug costs of those unable to meet them. If hon. members agree to this it will be a soul-satisfying experience for them, knowing they are doing their duty by supporting a proposal that makes economic sense for the nation.

• (5:30 p.m.)

[Translation]

Mr. Gaston Isabelle (Hull): Mr. Speaker, I listened compassionately to the eloquent speech of the hon. member for Simcoe North (Mr. Rynard) on the motion he introduced in the House.

[Mr. Rynard.]

He outlined an interesting picture of the present situation of medicine in Canada, and he also dealt with all the problems involved in the technical and scientific development of medicine in 1971.

I am sure that he introduced that motion in the best intentions in the world, which illustrates his concern for the welfare of the less fortunate members of society. However, I must point out that, contrary to what the motion might lead people to believe, the federal government has not yet made any commitment in connection with the payment of drugs used by the poor. And I would have hoped that the hon. member would have taken the trouble to look more closely than he did perhaps at the provisions of the Canada Assistance Plan passed by the House in 1964. As he has often pointed out in his remarks some provinces may not have done their duty as far as the Plan is concerned, or used wisely the subsidies made available to them precisely for the type of services the member for Simcoe North has mentioned.

Once again the constitutional aspect of the health matters must be brought to mind. Must health services in Canada look like an incomprehensible mosaic? The central government must ensure the coordination of all health organizations.

To go back to the motion, it could have been divided into two parts. The first could urge the government to take steps to ensure free drugs to social welfare recipients. The proposal is simply inconceivable, considering that under the Canada Assistance Plan the federal government, as I said earlier, has already made appropriate provisions that do not interfere with the prerogatives of the provinces of which I shall try to give a detailed description.

If the hon. member for Simcoe North had made more thorough research, he would not have included the proposal in his motion. Instead he would have submitted his grievances to provincial governments that did not see fit to take advantage of the generous assistance they can obtain under the Canada Assistance Plan. I insist on this—because it is a vital point—the matter should come under the Canada Assistance Plan. Perhaps the provinces still believe today that it is inadvisable to draw from the apparently inexhaustible federal funds in the health field and in another important one, that is the Canada Assistance Plan, thanks to which those who suffer from poor health and who cannot be covered by another system can receive all kinds of treatments.

In the second part of the motion, it is urgently requested that progressive assistance be granted to persons with limited means who are covered by medicare.

Incidentally, I am pleased to see that the hon. member appreciates medicare enough to be willing to extend it to cover the paramedical needs of small wage-earners, and all the more so since the hon. member is a physician. This is auspicious for the medical assistance plan.

I might add, as a member of Parliament and as a doctor, since we have several things in common, that I regret to see him sitting on the other side. Nevertheless, if the hon. member had thought a little more before