

The speedy donation was made possible by Utah's passage of the Uniform Anatomical Gift Act, which gives any patient the right to bequeath his body or organs for medical purposes. Because of almost nationwide adoption of the act—and changing attitudes towards transplants—surgeons long frustrated by a shortage of donor organs now foresee an increase in the supply.

Last week while discussing this problem with a transplant surgeon I was told of all the difficulties incurred in obtaining enough organs. This man specializes in urology and he said that in Canada at the present time it is estimated that 450 people are waiting for suitable kidneys and other organs that might be transplanted. A uniform act was adopted, as I mentioned before, at the conference of commissioners on the uniformity of legislation last summer in Charlottetown. This draft legislation was largely based on the proposed Ontario bill. I should like to pay tribute to the work of the special Ontario medical-legal committee headed by Mr. Allan Leal which has done a great deal of work on this subject during the last few years. However, in spite of this uniform draft bill being available to Canadian provinces, there is little indication that the matter has had much priority with provincial legislatures. Some of the ministers of health at the December meeting in Ottawa had never heard of the need for this kind of legislation.

It is not hard to document the number of people in Canada with serious kidney disease or haemodialysis, waiting for kidney transplants, or the number of people with impaired vision awaiting corneal transplants. However, statistics do not seem to impress governments as much as public opinion and demand for action. This would be one value of an ad hoc conference of people interested in the problem, to focus public interest on the need for such legislation across Canada. This conference would also provide a source of information on the need to provincial ministers of health, their departmental officials, medical associations and other interested groups and individuals.

There are at least two matters of concern to the federal minister of health which the provincial representatives would want to discuss. The first of these concerns the international transfer of human living tissue. Because of the geography of North America, much of the communication between surgical transplant teams is between Canadian and United States cities. For instance, if a surgical team in Hamilton has a patient dying of kidney disease and a donor bank at Rochester, New York, had a suitable kidney available, it would be rushed to Hamilton by police cruiser with no consideration for customs regulations.

It is obvious that transplant therapy is still very glamorous. However, when it becomes routine and transfers are carried out by commercial carriers there may well be problems in transfers of tissue at international boundaries. This matter should be considered by the people concerned and a formal arrangement made between Canada and other countries to facilitate the transfer of human living tissue. Another matter of international concern is the status of the wallet-sized cards which give a physician authority to use the tissue from accident victims for transplant therapy when they are away from their prov-

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ince or country of residence. There are 5,000 automobile accident victims in Canada every year and many of these involve our friends and neighbours in the United States. The status at the international level of these cards should be studied and an agreement between Canada and other countries made.

• (4:10 p.m.)

I have only touched on some highlights of the need I see for a national ad hoc conference on anatomical gifts. However, I believe from these remarks hon. members will be convinced that this is an area of law in Canada which is not only holding up medical research and education but is continuing human suffering and shortening lives. So I call on the Minister of National Health and Welfare (Mr. Munro) not only to be sympathetic to this problem but to act in a positive way, to convene this conference, to call together the best experts on the subject and the responsible provincial authorities for a meeting here in Ottawa. Only in this way will the needs of the country in this area of science and medicine be promoted and quickly adopted.

**Mr. Murray McBride (Lanark-Renfrew-Carleton):** Mr. Speaker, it is a privilege for me to take part in this debate, for two reasons. First of all, because the subject is one of cogent relevance to the present and is also becoming more and more important as scientific discoveries and capabilities improve; and, second, because the man in whose name this motion stands, the hon. member we do not want to follow that procedure". The corpse is members of this House, bringing to it a very fine reputation in the field of medicine as well as a compassion for the needs of people, and especially for improving legislation that will help out in human circumstances. I want to extend the basic motion that is before us. It has to do with uniform anatomical gift legislation within Canada and also across international borders.

The hon. member who proposed the motion and who has just spoken to the House referred in particular to portions of bodies of deceased people. But there is another dimension to this question, and I know he is aware of it, and that is parts of bodies from people who are still living. So we are concerned here with three things, and I will introduce the third. The first is the movement of cadavers or of corpses across international lines, or the freedom for medical people to remove from the deceased certain organs that can be used on one hand for research and on the other for people who are alive.

Second, the motion bears upon the removal from a living, healthy person of an organ, for instance one kidney or some other organ that they will donate to another person. Third, I want to raise a new dimension which I think makes this motion extremely relevant if not of crucial importance. I read recently that in one author's opinion the most urgent and exciting and, in a real sense, the most frightening breakthrough of our decade is that we have come to have the ability to develop life in a test tube, to sustain the development of embryos in incubators and to produce not only tissue but complete human embryos apart from the female body.