



## 39th PARLIAMENT, 2nd SESSION

EDITED HANSARD • NUMBER 085

CONTENTS

Wednesday, April 30, 2008

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### C-51 – Food and Drugs Act

**Ms. Judy Wasylycia-Leis (Winnipeg North, NDP):**

Mr. Speaker, I am pleased to join in the first round of debate on Bill C-51, a bill to amend, in large measure, the Food and Drugs Act.

I bring to this debate a lot of skepticism but it is a healthy dose of skepticism based on the history of this whole aspect of Health Canada and our regulatory regime in Canada.

It will be no surprise to the House to learn that this is the fifth attempt by government in the last decade to overhaul the Food and Drugs Act. Four times before the Liberals attempted to do so and each time they failed. Why? They failed because the community spoke up and demanded more accountability from government and much clearer answers around accountability and regulatory authority.

Members will recall Bill C-80, a draft piece of legislation that was supposed to do much of what we have before us today. That bill was supposedly attempting to modernize our food and drug provisions, bring us into the 21st century and bring our rules and our regulations in line with modern day science.

It did not take too long for Canadians to quickly figure out that this was a ruse. It was an attempt to make Canadians believe the government would be on their side but was in fact loosening its hold over regulations, minimizing its role and moving us away from what has been an entrenched part of our history, and that is a bill that regulates the safety of food and drugs in such a serious manner that it is part of the Criminal Code.

That legislation operated on the basis of the do no harm principle, the precautionary principle, which means that we do not allow products on the market unless there is evidence that they are safe beyond a reasonable doubt. That is the do no harm principle. It is not the buyer beware principle. It is not the risk management model that we have seen with the Liberals before and with the Conservatives today.

There is a marked difference between the do no harm principle and the risk management model. Do no harm means that we put people and safety first. The risk management model means that we can only go so far in ensuring Canadians' safety so

we will allow the products on the market and then we will see what happens. It will be up to individual Canadians to determine whether or not it is worth taking the risk. It will be up to the corporations that produce the products to regulate themselves and decide if they are in line with the standards on paper.

The risk management model is not a proactive regulatory model that puts the needs and concerns of Canadians first. It is a model that puts the needs of big pharma, large corporations and global capital forces ahead of ordinary citizens. It is a model that makes guinea pigs out of Canadians.

We have had our share of offering up people as guinea pigs for large pharmaceutical corporations. I do not need to tell the House about the incidents in our past, especially when women were treated as guinea pigs. Thalidomide comes to mind as does Depo-Provera, breast implants and the list goes on.

We need to ask ourselves some questions. If we cut through all the rhetoric and tough talk about putting safety first and modernizing our system, are we better off? Are we any closer to the kind of system that Canadians thought we had and expected to have, which was abandoned by the Liberals?

It was abandoned when, in 1997, the former minister of health, Allan Rock, in his first gesture as minister of health, killed the federal drug laboratory, the only independent federal research lab in this country for testing on a post-market surveillance basis. It tested whether drugs that were on the market were safe and whether there were any negative consequences when that drug was combined with certain foods, other drugs or natural health products. It was a lab that performed a very important safety function in our country.

That was the beginning of a whole string of actions taken by the then minister of health, Allan Rock, and subsequent Liberal ministers of health to dismantle our regulatory system and move us away from the do no harm model toward a system where corporations pay for their drug approval processes. The bulk of the fees for our drug approval process comes from the corporations themselves.

Scientists at Health Canada have seen numerous incidents and they said that enough was enough. I think of Dr. Michèle Brill-Edwards who spoke up about being cornered to approve something she thought was not safe. She had to leave Health Canada to have any sense of integrity intact.

There were many others. Who can forget the whole group of veterinary scientists who stood tall about the tampering with food products and the adulteration and modification of veterinarian drugs? They were chastised, disciplined and lambasted by the Liberal government.

Whatever happened to the government being a bastion of independent, objective science that operated on the basis of the constituents it is supposed to serve? Whatever happened to government for the people, by the people and of the people? Nowhere is this more important than when it comes to the food we eat, the drugs we take because of medical conditions and the water we drink to sustain us and yet in those areas the government has abandoned us in large measure.

Today we are supposed to believe that the Conservative Government of Canada has such integrity, courage and vision that it is offering us a blueprint for a do no harm precautionary model around drugs and food. I bring to this debate a dose of healthy skepticism because I have seen nothing from the Conservatives to date that leads me to believe that the government is on the side of ordinary Canadian families and is not on the side, first and foremost, of the big corporations and their profit margins.

I have not seen that when it comes to housing, education, health care, women's equality, people with disabilities, the environment, jobs and child care. I have not yet seen the government stand up for Canadians.

**Mrs. Irene Mathysen:** Nor will we.

**Ms. Judy Wasylycia-Leis:** My colleague from London—Fanshawe says, “Nor will we”. That is why I bring to this debate my concerns.

However, that is not to say that there are not some good provisions in this bill. I do recognize that the government has moved a significant distance from the days of the Liberals. Ironically, this legislation is more proactive than the Liberals ever presented to this House. However, it still has lots of problems and it still does not mean we will be supporting it but it is a step forward.

I would like to point to a couple of those initiatives. The bill has provisions for the recall of drugs and food products that have contaminants. The bill sets out hefty fines for corporations that do not reveal problems or side effects with drugs. There is new emphasis in this bill around ensuring that government has the tools to protect Canadians. I commend the government for those initiatives and I support those aspects of the bill that take us forward toward what I consider fundamental to this whole debate and that is a do no harm approach when it comes to food and drugs.

However, beneath those specific clauses and the fine words of the press release that the Prime Minister and the Minister of Health presented to Canadians about safety first, there are enough concerns to make me and others suspicious of what the government is all about and where it is trying to lead us.

We only need to look at a couple of the areas that we have heard about to date. I hear some of my colleagues on the Conservative benches chuckling. I do not think they would chuckle if they were to listen to the words of Dr. Barbara Mintzes, who has brought to the attention of the House a clause in the bill that appears to move the government closer to direct to consumer advertising. That is so well documented that some of the officials have already said that they acknowledge that is a problem and maybe it needs to be addressed.

Why is that important? Do we want to see another \$6.3 billion added to our pharmacare bill? Do we want to see big pharma pushing their drugs on Canadians without scientific basis? Do we want to see full-blown advertising in this country, as is the case in the United States?

Is it not enough that we have this grey area where drug companies can find a loophole and advertise all they want the lifestyle and create the appearance of something helping this person without naming the drug. We need only to look at the Viagra ads. They are pretty clear and impressive and they have led to all kinds of people demanding prescriptions for certain drugs from their doctors without necessarily a basis in terms of either their condition or the science available.

Direct to consumer advertising is just one of the problems in the bill that will make us very cautious about supporting it. Unless this loophole is closed and there is a firm commitment from the government to absolutely close the door to direct to consumer advertising, which not only means where we are today but going back and closing the door in terms of the loophole, there is no way in the world we should support the bill because of the ramifications it would have for our entire health care system, a system where costs for pharmaceuticals are now outstripping all other aspects of the system.

I will give another example. We have heard mentioned in the Chamber today the words "lifecycle approach" to drug surveillance or "progressive licensing". It all sounds great, innovative and progressive but we need to realize that underneath it all there could very well be an agenda to speed up the approval of drugs at the front end and create the illusion of safety or the reality of safety at the other end.

However, what does it matter when we have already digested a drug that is not safe and has produced serious health consequences? Can it be that the government has listened to the drug companies when they say that they would rather deal with expensive lawsuits and pay out big money after being sued than to put in the money that is needed at the front end to ensure that the drugs are safe in the first place?

The real question we have to ask today is the one Alan Cassels and others asked in the media when the bill was released. Would this bill prevent another Vioxx? Would it stop a situation where hundreds of thousands of people are dying because they took a drug without realizing there were serious side effects unrelated to the condition for which they were taking it? What in this bill would stop that? Where is the inspection force? Where is the apparatus? Where is the infrastructure to make that happen? Where is the

commitment from the government to deal with contaminated drugs coming into this country? How will the government handle another heparin, a contaminated drug from China? Is it prepared to send inspection officers to manufacturers in China? Is it prepared to put surveillance officers at the border? Is it prepared to take seriously the side effects that Canadians talk about? Is it prepared to act the minute there are serious reactions to drugs?

I hope that is the case. I do not know if that is the case. I do not know if this bill would do that. I want to keep an open mind about that. When we get to committee, I want to ask those questions. Witnesses will testify. We are going to seriously study that aspect. The fundamental bottom line when it comes to this bill is, is it going to stop another Vioxx? That is the question. How will it do it? Will it do it in time? Will it really make drug companies provide the information that they may have held in secret which may reveal something? Would it have been able to get out of Merck Frosst the information around Vioxx that it kept secret that would have prevented hundreds of thousands of deaths?

Those are two areas of concern. There are others.

We have received hundreds of letters from people concerned about natural health products. We have been inundated with letters and communications expressing concern about this bill and whether or not there is a hidden agenda to bring natural health products under the rubric of drugs, after the huge battle we have had in this House for a decade to have a separate category for natural health products. This is something that the Conservatives took up with a vengeance some 10 years ago, which led to a health committee discussion and a report, which led to the establishment of a third category, which led to some reasonable approach to dealing with natural health products. Unfortunately, both the Liberals and the Conservatives since then have botched the whole plan. We now have hundreds of thousands of natural health products waiting in line to be assessed and licensed.

The question here is, is this a way to get around that? Is this an attempt to deal with the backlog like we have seen with immigration? Perhaps it is similar to the budget implementation bill and slipping immigration into that bill. We do not know.

Needless to say, when it comes to this area, there is nothing more important than how we protect people in terms of the drugs and the medications they have to take and the food they have to eat. It is the job of government to put safety first, to ensure that products on the market are as safe as possible. That means a proactive government, tough regulations, adequate resources, a government with the will to make safety fundamental and to put people before drug profits.

**Mr. Brian Fitzpatrick (Prince Albert, CPC):**

Mr. Speaker, I was astounded to listen to the member's presentation and the one from the Bloc as well. I have come to the conclusion that maybe we should have a special law that prohibits big corporations from distributing and selling prescription drugs to NDP members and their supporters, and maybe Bloc members as well, because we would not them to take something they feel is unscientific and would not have any benefit.

Let us be clear. For every drug cleared through the clinical trial process, there are literally thousands of drugs that do not get to first base. This is not a slam dunk process and it costs an awful lot of money. There are a lot of other safeguards. The EU has a clinical process that is very tough. The Japanese have one that is very tough. The Americans have one that is very tough. If manufacturers fail in the United States, they get through the entire process and get a drug approved but if they make a mistake, they can be financially ruined by the American tort system.

However, for members of this House to say that we are just allowing drugs on to market without any due diligence or any comprehension for public safety and that there is some great conspiracy between members of Parliament and the drug companies to foist all these poisonous and toxic drugs on people is total nonsense. I cannot believe the member actually believes that. I do not want to disagree too strongly with her opinion because it might insinuate that I am challenging her intelligence.

**Ms. Judy Wasylycia-Leis:**

Mr. Speaker, this is a very serious matter, not a laughing matter. It has to be debated in the context of the health and well-being of Canadians. I make my comments with all seriousness and based on significant input from many Canadians.

As I also said, we will pursue every one of those concerns at committee to determine the legitimacy. No one is making generalizations without basis in fact. No one is casting aspersions without any reason.

We are here today with one of the most important pieces of legislation this Parliament has seen in a long time. We are questioning on the basis of evidence that has been provided to us. I do not need to tell anyone how many Canadian lives are put at risk every day because we do not have an adequate safety system right now. All I have to do is read through the papers and list off numerous cases.

Maybe the member is interested in this one, if he is not interested in some of the others. It is a recall order for a product for erectile dysfunction. This is Libidus, an unauthorized product promoted on the manufacturer's website as treating erectile dysfunction, saying it does not produce health risks. Well it does. Where is the government?

How about Evra, a birth control product for women, a patch that produces blood clot risks. Why is that? Why are young women at risk right now as we speak?

What about the drug to quit smoking that came out not too long ago, Champix, which produces all kinds of psychiatric side effects?

What about as I mentioned, heparin, in which contaminants were found after production in China?

What about all of these examples? Does it not matter? Should Canadians not feel safe? Is that not what we are here for? It is not to put people at the will of the marketplace and let them take chances. It is about trusting government, and if we cannot trust government when it comes to the safety of the drugs we have to take and the food we have to eat, then when can we trust government?

**Mr. Steven Fletcher (Parliamentary Secretary for Health, CPC):**

Mr. Speaker, unlike my colleague from Prince Albert, I actually love the loony left. The loony left allows average Canadians to see the ridiculousness of the arguments. I commend the member on the passion of her case, but I think the member knows that she is mistaken on numerous points including the suggestion that products or drugs coming onto the market are less safe. This bill does not deal with that. The drugs that have come onto the market are under the same regime with or without this bill. That is important for the member to know.

On the issue of direct consumer advertising, the member also knows that this government is in court to prevent direct advertising of pharmaceuticals to the Canadian market. The member knows that and this bill in fact strengthens the government's position on that.

I would also like to read to the member proposed section 2.3 of the bill:

The purpose of this Act is to protect and promote the health and safety of the public and encourage accurate and consistent product representation by prohibiting and regulating certain activities in relation to foods, therapeutic products and cosmetics.

We can see that the intent is in the best interests of Canadians. I would ask the member to put aside the worries about the black helicopters, put away the tinfoil hats and come to committee with an open mind. All the other parties are. We are. If there are reasonable suggestions for amendment, we will listen to them. Will the member come to committee with an open mind and listen to the facts and read the bill for what it is, an improvement to the health and safety of Canadians?

**Ms. Judy Wasylycia-Leis:**

Mr. Speaker, you will know that I have already said that we come to this whole process with an open spirit, wanting to know if in fact the substance of the bill meets the rhetoric of the government. We enter the process willingly and with open minds.

I just wish the hon. member were open to some of the concerns being raised because when he suggests that this is about the loony left speaking, he is insulting thousands of Canadians across the country who are raising concerns. He is actually casting aspersions on Dr. Mary Wiktorowicz. He is casting aspersions on Joel Lexchin, on Dr. Barbara Mintzes, on Dr. Steve Morgan and Alan Cassels, many people who came to our committee and expressed their concerns. So, I hope he is open and I hope he is willing to actually amend the bill when those concerns have been substantiated.

**Hon. Larry Bagnell (Yukon, Lib.):**

Mr. Speaker, another one upon whom the Conservatives could have cast aspersions is one of my constituents who asked questions. I wanted to ask the government, but it is not putting up any speakers, just the minister who introduced the bill, so I cannot ask the questions. Maybe the member could answer just three concerns that this constituent put forward.

Will this new law be used to abuse and punish special interest groups, minorities, religious groups or others? Why do the bureaucrats want seizure warrants without judge approval? With fines being increased a thousand times and seizing authority without a warrant, is Bill C-51 meant to bankrupt and silence its target audience?

**Ms. Judy Wasylycia-Leis:**

Mr. Speaker, those are all questions that need to be addressed by the government and vetted at committee. I certainly hope the member will encourage those who have raised these concerns to present them in writing to the committee or in fact to attend our committee hearings.

I hope that we will have a wide open, serious, indepth review of the bill in terms of all of its aspects, because when it comes to judicial oversight and RCMP investigations, as he has mentioned, these are very serious issues. When we are talking about direct to consumer advertising, progressive licensing, natural health products, oversight, investigative forces and discretionary powers, all of those issues are critically important in an area of such fundamental importance.