

July 6, 2008
The Honorable Tony Clement
Minister of Health
202 Main Street West
Huntsville, ON, P1H 1X9

Dear Minister Clement,

Following your office's recent communication with my editor and myself at Vitality magazine I am herewith sending you the announced questions that you may wish to have for purposes of an interview with you or for an article you may wish to write for publication in Vitality Magazine. These questions address some of the core issues specifically of bill C-51, many of which also apply to C-52. Two questions deal with C-52 which are also included because the two acts involved require consequential amendments and, therefore, both are likely to be part of your responsibility. Thank you very much again for contacting Vitality Magazine in this matter.

Yours sincerely,

Helke Ferrie
KOS Publishing Inc & writer for Vitality Magazine

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Senators of the Canadian Government
Miscellaneous media
Miscellaneous public interest groups

QUESTION TO THE HON. TONY CLEMENT, MINISTER OF HEALTH

By Helke Ferrie, Vitality Magazine, July 2008

Question 1: How would bill C-51 ensure that the current enormous backlog in natural product applications would be dealt with as expeditiously as applications from pharmaceutical companies are handled?

Question 2: Notwithstanding your recently proposed amendment, which would add a definition of natural health products as a separate item to C-51, the following question remains relevant because the rest of C-51 remains unchanged: On what basis (legal and scientific) are natural health products even part of C-51, along with implants and pharmaceutical drugs? The latter two are known to science internationally to be toxic to varying degrees, while natural products are known not to be so. You have been repeatedly quoted in the media giving the example of the alleged liver toxicity of Black Cohosh as a reason for including natural health products in this bill. You may have got this information from the Health Canada website which, on this matter, had not been updated for the past 4 years, and the information was incorrect and incomplete even back then (see details in the introduction to my enclosed book *What Part of No! Don't They Understand?*). The presumption of toxicity in natural health products (i.e. natural-source vitamins, essentials minerals, essential fatty acids and the like as supplements or in therapeutically high doses) is not backed by any verifiable science. On the other hand, the presumption of non-toxicity has been established many times over by standard science and recently also by a court decisions made in 2006 in the International Court of Justice. Furthermore, the US law known as DSHEA is supported by the FDA laboratories and research information upon which Health Canada relies as primary sources. So, on what basis did the Canadian government decide to treat all therapeutic products as potentially harmful and continue to retain natural health care products as part of C-51?

Question 3: On what legal/constitutional basis was it thought appropriate to include in C-51 and C-52 provisions that allow the Canadian government to adopt food and drug laws and regulations from foreign governments into Canadian law without parliamentary and public debate? And to do so by way of Governor in Council decisions which are not open to public scrutiny? The definition of "government" in C-51 expands the commonly understood notion of our Canadian government, consisting of people elected by Canadians, to include "a government of a foreign state or of a subdivision of a foreign state, or an international organization of states" as well as "an industrial or trade organization". None of these Canadians can be assumed to have consented to by way of a democratic process.

Question 4: On what basis was it thought not only appropriate, but even possible, that the Minister (of Health and Agriculture) could be able to decide, with or without

expert advice, what kind of clinical research may be permitted in Canada? Perfectly good rules governing clinical trials already exist throughout the world; universities have ethics committees, and international medical journals require registration of trials in accordance with existing standards. Any element of supervision in that process and the application of risk-benefit considerations seems not only unjustified, but also quite improper because such interference cannot possibly be part of ministerial duties or expertise. For example, while it is reasonable for government regulation to demand safety standards in the engineering of highway bridges, government cannot reasonably be involved in the progress of research involving materials science and construction principles of such bridges without being in danger of becoming a prejudicial force. So, why is this approach taken all of a sudden in medicine?

Question 5: Why is most of C-51 designed to exclude public debate? Almost all proposed practical measures appear to be placed into the arbitrary powers of Governor-in-Council decisions which are not in public view. Why? Seeing the greatest disasters in medicine over the past three decades were caused by pharmaceutical drugs, now the leading cause of death, it seems very strange that the little bit of transparency that did exist and was able to reveal these disasters, should now be reduced such as to disappear from public view almost entirely.

Question 6: The troubling issues in C-51 also apply to C-52. However, the most astounding aspect of C-52 is that those items which are shown in the appended schedules are already outlawed and the list is very short – this is bewildering. The European Union is currently reviewing more than 60,000 chemicals, all of which have enough information on them to require such a review which may result in almost all being outlawed. Why does Canada not share that same list in the interest of public health, seeing the EU is a trading partner of close to 500 million people?

Question 7: Both C-51 and C-52 appear to be designed to protect Canadians from perceived toxic threats coming from outside of Canada. However, the universally known fact is that Canadian foods in particular are perceived to be toxic by other nations. Our foods are contaminated by neurotoxic gender-bender carcinogenic antibiotics, hormones, rendered slaughterhouse waste residues, genetically engineered plants, and pesticides – all unacceptable to the EU and other countries to the point of their readiness to defy the WTO court on these matters. Worldwide, toxicity would be dramatically reduced if instead of the undefined concerns shown in C-52 about foreign contaminants, Canada would clean up its own food supply instead. If Canada was to bring both the Food and Drugs Act and the Hazardous Products Act in line with contemporary scientific knowledge and public opinion, C-51 and C-52 would not ignore Canadian demands as well as the EU, Australia and Japan. The minor incidents involving contaminated toys and toothpaste from China were dealt with perfectly well under the current Hazardous Products Act. Why are these acts not brought up to date with totality of the currently known facts and public demands?