

The Food and Drugs Act contains clauses and sections with respect to advertising. It is illegal to make false, exaggerated or misleading claims about a drug or to create an erroneous impression as to its composition, character, value, quantity, merit or safety. The work of enforcing this section is considerable, since the advertising of drugs is very extensive. Control of advertising is limited to that directed at the general public. Advertising to the medical or pharmaceutical professions is not interfered with although it is not excluded by the Act. It is assumed that members of these professions can take care of themselves because of their professional knowledge and experience. The public on the other hand has no such knowledge and is rather easily deceived by clever advertising copy. People are conditioned to expect anything from science and at the same time are very conscious of their health. They make a receptive audience for almost any claim that purports to be based on laboratory or clinical research.

Recent publicity linking certain dietary fats with high blood cholesterol and high cholesterol with atherosclerosis has tempted some manufacturers of vegetable oils and their products to capitalize on the public interest in this controversy. These manufacturers have been warned that such advertising is illegal and it has been stopped temporarily, at least, in so far as advertising originating in Canada is concerned.

There is one basic difficulty in the fair and impartial enforcement of this requirement. The same prohibition does not exist in the United States, and American papers and periodicals are often read by Canadians while American TV and radio programs are available to most people in Canada. This example points up the need for international uniformity in food and drug legislation. The conflict between national laws extends beyond the field of advertising for both foods and drugs. Different standards and different labelling requirements among countries engaged in international trade present obstacles to that trade.

Some of the specific requirements in the Food and Drug regulations that apply to labels on drug packages are discussed here. The proper name (generic name, non-proprietary name) must be on the label but if there is no proper name, the common name. The proper name must be given immediately before or after the brand name and in type not less than one-half the size of the brand name. Thus the doctor is informed of the real name of the drug in the pharmaceutical form he is using. If it is a combination of drugs, the ingredients are to be listed by their proper names. There is a small committee of the World Health Organization that reviews non-proprietary names suggested for new drugs and makes recommendations for their use throughout the world.

The name and address of the manufacturer must also be on the label. It is very important for the physician to know who makes the drugs he uses since it is the ability and will of the manufacturer that counts and not the fact that he has a brand name for his product.

The regulations insist that lot numbers be given to all drugs intended for internal or parenteral use, which permits the tracing of a drug through the manufacturing processes and after distribution. It may be vital to know where a particular lot of a drug may be found if it is necessary to recall it promptly to prevent injury to users. Also, the labels of some reliable and potent drugs including several antibiotics and biological products carry an expiration date after which the drug is not recommended for use.

The Food and Drug Directorate administers another Act that is concerned with drugs. Drugs sold under the Proprietary or Patent Medicine Act are registered and their manufacturers are licensed. These medicines are household remedies and a complete list of ingredients is not carried on the label. Before registration is granted, the facts about the drug in respect to its composition and the claims to be made for it are carefully studied with the help of an advisory board consisting of two pharmacists and two physicians. All registrations are not reviewed by this board but only when there is doubt or when something new is proposed. There are many types of drugs that cannot be registered (narcotics, prescription drugs, new drugs, etc.) and the doses of other drugs are strictly limited in the interest of safety. Since provincial laws allow these registered medicines