were indicated in about 1 percent of the cases.

I have a note here that Dr. Bradley thought 20 percent and Dr. Weingrad 10 percent. I believe Dr. Davidson testified that they had the largest university based diabetes clinic in the country. Is that your memory?

Dr. CROUT. As far as I know, yes.

The CHARMAN. I think that was his testimony. You may recall he testified that since they used the oral hypoglycemics for many, many years, it was hard for them to conclude that they have been wrong, but they concluded they were. And he testified that they had taken everybody off the drugs. As I recall, he said they got better results by managing his patients with diet alone than when they were using the oral hypoglycemics.

Do you remember that testimony?

Dr. CROUT. Yes.

The CHAIRMAN. Are you aware of whether or not that is the experience in other clinics?

Dr. CROUT. I think that is a common opinion among many good diabetologists. And I think that actually Dr. Bradley would harbor the same opinion, I believe, and you could confirm this with him, that his figure of 20 percent represents his opinion of the number of diabetics who might need drugs if greater emphasis were given to diet. So we do not contest those figures at all.

I would point out that nobody to my knowledge, including Dr. Davidson, has ever published in the medical literature sharp studies on this issue. Dr. Davidson's views are largely in testimony before this committee, not in the medical literature. So real studies to define

1 percent, 10 percent, 20 percent are not available either.

Mr. GORDON. I think Dr. Davidson also published an article in the journal of the American Medical Association recently, did he not?

Here it is: May 26, this year.

Dr. Crout. I think it was a comment. But to really present the data that were presented before this committee in a full published form has not occurred to my knowledge.

The CHAIRMAN. Go ahead Doctor.

Dr. SCHMIDT. In addition to the Biometric Society report, other information has recently become available. First, the UGDP has published recently their detailed report of the results of the phenformin study. In addition to reporting that cardiovascular mortality and total mortality were greater in the phenformin-treated group than in the other treatment groups, the report presented evidence that phenformin therapy resulted in increased blood pressure and heart rate, thus suggesting possible mechanisms by which this drug might influence cardiovascular mortality.

Mr. Gordon. Dr. Schmidt, are you saying here that the benefit-torisk ratio of phenformin is even more unfavorable than for the other

oral hypoglycemics?

Dr. Schmidt. Yes, that would be the conclusion one would draw

from this study, yes.

Mr. Gordon. In a study published in a book called "Controversy in Internal Medicine" by Winegrad, Clements and Morrison, University of Pennsylvania School of Medicine, Dr. Allan Winegrad,