

can make very significant accomplishments in this critical public health area. If you have no objections, we would like to use the development of this symposium as an example of this principle in action.

As one of the primary companies involved in the communications program toward physicians on hypertension, we have seen from a 1974 study from the National Heart and Lung Institute called "Hypertension Detection and Followup Study" that initial visits to doctors increased 38 percent for hypertension and hypertensive heart disease since 1971. The number of people with hypertension not aware of their disease decreased from 50 percent to 29 percent, and in a separate study of 760 clinicians published in the May 1975, issue of "Medical Opinion," it revealed that the number of physicians who take blood pressure readings increased in 5 years from 50 percent to 90 percent, that 73 percent of physicians routinely use laboratory tests for hypertensive patients, and that the number of patients now talking about hypertension with their physician increased from 9 percent 5 years ago to 36 percent today.

We are pleased to say at this time we are working with the National Board of Medical Examiners to produce a national self-assessment on hypertension for physicians under an educational grant from Smith Kline and French Laboratories. This is an outgrowth of our "Dialogues in Hypertension" program.

Every day we receive letters on one or more of our programs from physicians in practice who thank us for our contribution to their patient care needs. We are young and this industry is young. We have made mistakes. We have not always been able to include all the Food and Drug Administration criteria described in this statement in every one of our programs.

We are concerned, dedicated, and proud to be part of an effort where we have seen visible signs that in some small way we have contributed to an improvement in the quality of health care in this country and abroad.

Thank you for allowing me to share this with you.

Senator NELSON. Thank you very much.

Without personally commenting on the quality of the programs, since I have not seen them I am not qualified to judge them anyway, is it not true, nevertheless, that the drug companies are: (1) Involved obviously, because their interest is in promoting the sales of their products; (2) does not this type of system in which they distribute the programs and materials to the hospitals and the physicians themselves gives them a formalized relationship with the institutions, with the medical schools, if they use the materials, hospitals, teaching hospitals, other hospitals, give them a formalized institutional standing which strengthens their position in order better to promote the business that they are engaged in?

Is that not true?

Mr. CALESA. Well, Mr. Chairman, I do not think that it gives them a feeling of association with that particular university. I do think it gives them a better stature. I do think it gives them, let's say from an institutional advertising point of view, greater stature than someone else might have by virtue of the fact that they have sponsored a program that a multiple number of people are involved in.

But I have to go back again to the most fundamental issue, and