People who take these drugs unfortunately do not lose their interest in food.

Senator NELSON. Of course, if they take an interest in their diet, and they stick to it, they would lose as much as if they did not take the drug at all.

Dr. HENDERSON. That is correct.

These drugs act as distractors. They distract a person's attention away from the fact they want more food. That is all they are doing in my opinion.

It may even be questionable to say that they are anorectics, or that they are appetite depressants. A true anorexiant effect is seen in patients who are taking one of the cardiac drugs, such as digitalis. Sometimes these patients, after they have built up their blood concentration, simply do not want to eat, and cannot eat. They are not interested in food.

Now, of course, there is no way digitalis could or should be marketed as an anorectic, but indeed it has this effect—but it is a side effect.

Amphetamines are not anorectic in that sense, but because of the distraction, and the feeling that life is fun, surroundings are enjoyable and the person feels good maybe for that period of time, he or she does not have to eat to feel content. Eating behavior however, has not been changed by these drugs. Unless eating behavior, that is, one's attitude toward the cooking of food, and the eating of food does change then there is no long-term benefit from them. It is because of this, that I believe that these drugs have a very limited role to play in the management of obesity.

Mr. GORDON. I would like to read a statement from Dr. Jean Mayer, that he made before our committee 4 years ago, in 1972.

This is on pages 1264 and 1265, and he says:

> However, as far as the general public is concerned, I think we would be deluding ourselves if we thought that even with this association of obesity and disease the health considerations were, in fact, the primary motivation of our federal citizens who seek to reduce. The primary motivation is a cosmetic one rather than a health one, and we have to address ourselves to the problem of obesity knowing that in the mind of a great many of its sufferers we are dealing with a cosmetic problem at least as much as we are dealing with a health problem, and that the almost desperate motivation of many of the sufferers in seeking relief has much more to do with benefits which they think will accrue to them here and now in terms of attractiveness to the other sex than because of the benefits to health in the long run. * * *
>
> I am stating all this by way of a background because I think we have to realize that the motivation in the mind of the patient is often very different from that which is discussed when one speaks of obesity as a purely medical problem. * * *

Would you like to comment on that?

Dr. HENDERSON. Yes. Just 2 weeks ago, Mr. Gordon, I saw a university student who was grossly obese, who had said he had tried to diet, but had not succeeded in losing anything more than 1 or 2 pounds. I asked him about his motivation for wanting to be thinner. In the jargon of the campus, he said that the real reason was that he was not "drawing the birds" as well as he had before.

I did not quite understand, so he explained that drawing the birds means drawing the attention of young ladies. The reason he wanted to lose weight was that he felt he was no longer physically attractive to the coeds on the campus. I agree that a great deal of this need to be thin is cosmetic. Sometimes, however, cosmetic motivation is not