Dr. Crout. There are other sensing systems in our society that pro-

vide estimates of the degree of drug abuse.

The National Institute on Drug Abuse has information on data from household surveys, and surveys in schools, and that is among the information we want to gather.

I cannot present those data today. In any event, I think it is fair to say, having pointed out the limitations, that the total number of DAWN mentions is an index of abuse, street abuse in our society.

Senator Nelson. Just one second.

What do the ratios mean on that chart?

Dr. Crour. These are total mentions of abuse divided by total distribution of drugs during that period.

Senator NELSON. Total distribution?

Dr. Crout. Total DAWN mentions, total incidence related to abuse, divided by sales of drugs during that period, so a tall bar means for any given amount of sales, more drug abuse.

Senator Nelson. I see, but that would not tell you anything about one, if there were one, that was smuggled into the country from Mex-

ico, you would not know, would you?

Dr. Crour. No; that is one of the variables not reflected in this

figure.

I believe DFA will tell you, however, that today most of the domestic amphetamines do not come from across our borders.

It is legally manufactured and prescribed.

Senator Nelson. OK.

Dr. Crour. Both the numerator and denominator of this index are subject to considerable error, as I mentioned.

Nevertheless, even this rough approach is revealing.

Appendix II clearly shows that the amphetamines, including methamphetamines, and, to a lesser extent, phenmetrazine, are associated with more contacts with the DAWN system per amount of sales than are other anorectics.

Here you can see all of the other drugs clustered together.

This graph in appendix III illustrates the second point I wish to make. The graph again shows the ratio of total DAWN mentions, this time by quarter years, divided by the number of prescriptions for these drugs in the comparable quarter.

The anorectic drugs in this appendix have been grouped somewhat differently—that is, by their schedules under the Controlled Sub-

stances Act.

I point out along the bottom line, this is a time trend during 1973

through 1975.

The main conclusion suggested by this graph is that abuse problems are greater with the schedule II drugs than with the other anorectics, as shown by the line at the top, and that the rate of such problems appears relatively unchanged over the past 3 years.

Senator Nelson. And you are saying at the same time that the studies indicate that the nonamphetamine anorectics and the ampheta-

mine anorectics are about equally efficacious?

Dr. Crout. Yes.

Senator Nelson. Roughly as trivially efficacious, I will put it, and that the abuser—

Dr. Crour. Fair enough, sir.