where new agents are being introduced into therapeutics. It is in the interest of public health that we make rational scheduling decisions to forewarn the therapist of the dangers of the drugs he may prescribe and to assist him in their rational use. At the same time, inappropriate controls must be avoided since this would place unnecessary burdens on the patient. Our studies with stimulants have demonstrated that drugs which are structurally dissimilar to amphetamine can produce amphetaminelike effects and have abuse potential. A similar situation exists with substitutes for narcotics where a large number of synthetic and structurally unrealted drugs produce effects similar to morphine and heroin. Further, drugs which are structurally similar to amphetamine do not necessarily produce amphetamine-like effects. In this regard, we have only preliminary data on two recently introduced anti-obesity agents, cloretermine and mazindol. We have not studied phendimetrazine. Unfortunately, further data on these agents will not be obtained.

Mr. Chairman, this concludes my formal testimony. I will be pleased to answer any questions you and other members of the Subcommittee may have.