In the year before Darvon was put in schedule IV, March 1976 to February 1977, there were 459 deaths related to its use.

In the first year of schedule IV, March 1977 through February 1978, the number was 510.

Although there appears to be a decrease in deaths during the latter part of 1978, these data underestimate the eventual numbers of reported deaths, since all 1978 reports are not completed and sent to DEA until well in 1979.

In other words, if we look now, early 1979 or late 1978, or a year ago, early in 1978, if we looked at the last part of 1977, we would see what appeared to be a fall-off in deaths, not only due to Darvon, but anything else, simply because in terms of getting all these coroners' reports, it takes well into 1979, before they are complete. So that each year, if you look in January, it looks like everything is getting better, not only for Darvon, but for everything else.

If you look later in that year, there have been many more reports filed, so that at this time, all we can look at is the period up to the early part of 1978, where the data is complete, and that period of time, that 1 year after as opposed to the 1 year before, putting into schedule IV, really does not suggest any change.

There has been a fall in the emergency room visits, which I see the Justice Department will discuss in their testimony, but this has not, at least as of yet, been accompanied by any evidence of decrease of fatalities.

The prescribing has gone down from I think 33 million to 30 million over the last year or so.

It still is very widely prescribed.

Does that answer your question?

Senator NELSON. Yes.

Dr. WOLFE. As stated in the petition to HEW rescheduling Darvon in schedule II only makes sense if it is possible to identify a group of people for whom the substantial risks of the drug are outweighed by the questionable benefits, taking into account the availability of aspirin, codeine, and acetaminophen, all safer and more effective.

I am still unable to identify such a group of people and therefore believe an imminent hazard ban is the preferable way of meeting this serious problem.

Senator NELSON. Let me go back to that previous question.

Are you saying that DEA releases the statistics from the last quarter of 1978, which are not complete, and subsequent to that when all of the records are in, some time during the following year, they update that last quarter?

Dr. WOLFE. Yes; I think they have been very cautious about that.

Senator NELSON. Is that what happens?

Dr. WOLFE. That is what happens. They release on a fairly regular basis all of this data, but they point out, particularly for the last few months, that the data with respect to deaths is often understated, because they have not gotten all of the reports in yet.

Senator NELSON. As you say, if you look at any year in the past several years, it is the same pattern?

Dr. WOLFE. Yes.

Senator NELSON. Because Lilly has a chart that indicates a rather dramatic lowering.