Anybody wish to comment on it at this moment?

Senator LEVIN. To put it more sharply, are your views shared by your colleagues, in your various areas of expertise, who have had the kind of background that you have had and done this kind of research that you have done?

Dr. LEWMAN. In the field of forensic pathology, yes.

Dr. MOERTEL. I think in the field of clinical pharmacology, my views are shared by those knowledgeable in research studies of analgesics.

I do feel that there is a problem in education, and I wish I knew the answer to that, Senator.

I think it is very important but the problem is that as we survey the physicians who prescribe drugs, we find that most of their education is achieved through the drug companies themselves, the detail man being the most effective educator. When we get to the other education media, they really do not have as strong an impact on the physician as we would like them to have.

I agree there is a problem here.

How you address the problem I think is very difficult.

I do not know the answer to that.

Dr. HUDSON. To the same point, between the efficacy of drugs, and the frequency with which they are used, it is not very good.

There are some drugs that are not so popular, and others that are, and we are talking about what has been referred to as part of advertising, and partly of whatever it is that captures people's imagination as far as things inducing them to purchase or to prescribe medication.

Senator NELSON. Your observations in response to Senator Levin's question are the same as the responses we have gotten over a period of 11 years from distinguished pharmacologists who have been asked that kind of question, and the same as the findings of various studies that have been done respecting the prescribing practices of physicians.

Thank you very much. I appreciate your taking the time to testify.

Dr. LEWMAN. Thank you.

[The prepared statement of Dr. Lewman follows:]

STATEMENT OF LARRY V. LEWMAN, M.D., FORENSIC PATHOLOGIST, MULTNOMAH COUNTY, OREG., MEDICAL EXAMINER

PROPOXYPHENE-RELATED DEATHS IN OREGON

HISTORY OF PROPOXYPHENE-RELATED DEATHS IN OREGON

There has been an alarming increase in the number of propoxyphene-related deaths in the state of Oregon since the mid-1970's. Propoxyphene was by far the number one cause of fatal drug overdose in the state during 1976, 1977 and 1978; and the numbers have been on the increase until the latter half of 1978. The statistical increase is best reflected by comparison with the other most common agents causing drug overdose deaths, namely barbiturates and intravenous narcotics (heroin). During 1975, propoxyphene-related deaths approximately equalled deaths from the barbiturate group, and deaths from intravenous narcotics outdistanced both by a factor of about 1.5 to 1. During 1976 and 1977, propoxyphene deaths approximately equalled the combined total of narcotics and barbiturate deaths during both years. The computer print-out for 1978 has not yet been completed, but it is my impression that propoxyphene-related deaths exceeded the combined totals of narcotics and barbiturate deaths by a wide margin this past year.