certainly will be taking full vantage of the results emanating from your hearings and from your deliberations.

In 1978, of the 1.4 billion prescriptions dispensed in retail pharmacies, 31.2 million were for products which contained propoxyphene. In this country, 59 companies now market approximately 150 products which contain propoxyphene alone or on combination with other substances.

Propoxyphene is an abused drug and its abuse can and does lead to physical dependence, and you have heard testimony that it is perhaps half as effective as codeine. DEA needs to identify and evaluate the scope and extent of drug abuse in the United States. DAWN, the Drug Abuse Warning Network is one of the major indicators of drug abuse in this area. There have been a number of comments on the Drug Abuse Warning Network, and I would like to say that we are in our seventh year with this system, which when taken into proper context as an indicator system, has proven to be very valuable in terms of showing what the current situation is in the 24 cities which are reporting.

I will comment on that a little more later in my testimony in terms of the earlier comments here.

Now, in the DAWN program, the emergency room mentions relative to all drug mentions in DAWN has remained essentially constant over the past 3 years, ranging from 2.4 percent in 1975 to 2.2 percent of all drug mentions in 1978.

In terms of frequency of being noted in emergency room reports, propoxyphene ranked seventh in 1975, 1976, and 1977.

The next year, 1978, propoxyphene ranked eighth because phencyclidine came into more prominence.

Propoxyphene ranks third behind heroin and alcohol in combination with other drugs in terms of drugs associated with death in DAWN ME reports.

This confirms comments here this morning, indicating that propoxyphene was the highest cause of death among legitimate drugs.

Based on information received since January 1975 from medical examiners who have consistently reported to DAWN, the number of propoxyphene-related deaths is as follows: 1975, 502; 1976, 429; and 1977, 598.

It will be 6 to 9 months before we have complete data from medical examiners regarding deaths in calendar year 1978.

This data incidently is updated monthly based upon reports in from the medical examiners; however, because of the lagtime, it does take a good 6 to 9 months.

The data we have, as I have indicated, through the end of 1977, indicates the problem has remained at a high constant level through that time, and the first 3 months of 1978 continues to remain at that high level.

Senator NELSON. Did you hear Dr. Wolfe's testimony?

Mr. DURRIN. I certainly did.

Senator NELSON. Did you agree with that?

Mr. DURRIN. Yes; I do.

Senator NELSON. Does it take some months into the next year to get the statistics of the final quarter?

Mr. DURRIN. Yes; we worked closely with Dr. Wolfe and his staff in terms of furnishing them with information.