Dr. Beaver. The prescriptions have gone down a little since then. If something like this were done and combined with a big black box up at the front end of the label and slapped into all the advertising pinpointing what the real risk of this drug was in terms of overdose and death, it might get physicians to use the drug in a bit more conservative way in terms of the amount prescribed, the kind of people they would prescribe it for and so on and it would generally alert them and this would be a useful option.

Senator Boschwitz. Is the medical profession pretty much aware

of the problems that have been discussed here?

Dr. Beaver. I think perhaps the single, most important function a hearing such as this serves is to create a public awareness of this kind of problem; so it is all over television and things like that and people, including physicians, will be asking questions and trying to find out more about it.

Senator Boschwitz. Senator, I do not want to hold up the doctor who wants to leave at noon. I would also like to leave at noon but I

might ask Dr. Adriani one question.

Would you address yourself briefly to Dr. Beaver's point that when the patient goes to a doctor and that patient has already been taking aspirin—to identify with this, my doctor normally does not charge me \$25, but then the only thing the doctor does is confirm that I should go home and take two aspirin; famous last words of medical advice—is what the doctor does important psychologically or should that not be a consideration?

Dr. Adriani. I do not think so. Here you have a drug inferior to aspirin. In prescribing, you want to prescribe the ideal medicine to a patient, and the best drug available for him irrespective of how he busy it, whether he buys it by prescription or over-the-counter.

Aspirin is bought over-the-counter. It is the best drug we have for arthritis. There are certain drugs like nitroglycerine and adrenalin which should be prescription for asthma and angina. The asthmatic can get adrenalin over-the-counter since he may need it in a hurry and not have time to get a prescription. The public is becoming more and more aware of what we do in the practice of medicine and the mistakes we make in medicine. They know aspirin is a good drug and do not object to buying it over-the-counter when told to do so by a doctor. Patients know what they are getting on prescription. The days are disappearing when a patient did not know what was being prescribed but now we have more and more full disclosure of everything.

Senator Boschwitz. Sorry to hold up, Dr. Newman. I see your testi-

mony is a little shorter.

Senator Nelson. Dr. Newman, you may go ahead. Your statement will be printed in full in the record and you may present it however you like.

STATEMENT OF MICHAEL A. NEWMAN, M.D.—Resumed

Dr. NEWMAN. Thank you.

My name is Michael A. Newman and I appreciate this opportunity to testify about the safety, efficacy, and usefulness of propoxyphene, or Darvon.