Senator Nelson. Senator Weicker?

Senator Weicker. A great deal of attention has been given to the effectiveness of propoxyphene compared to other analgesics. Commissioner Kennedy noted the most popular propoxyphene containing products are those products containing other analgesics such as aspirin. Does the combination of propoxyphene with aspirin produce a synergistic result that a double dose of aspirin would not?

Dr. FURMAN. When you say "synergistic" that implies that 2 plus 2 equals 7 or 8. I think the feeling is that the combination of the two produces a greater analgesic effect than either one alone, and that is not

a synergistic effect.

There is a very sound pharmacologic reason for combining propoxyphene, which is a centrally acting analgesic agent in the sense that codeine is, with something like aspirin or acetaminophen, which has a

peripheral site of action.

There is evidence that the reason aspirin is effective is that it blocks the synthesis at the site of pain, injury, or wound, of agents such as prostaglandins. By combining centrally acting agent such as propoxyphene with a peripherally acting agent such as aspirin, you have the best of two worlds, so to speak. You can get effective analgesic in most instances with doses that do not elicit unwanted side effects, and it is quite understandable and quite reasonable that the combination product would be the more popular one because it makes the most sense.

Senator Weicker. Can all those persons who now use propoxyphene safely use other analgesics, such as aspirin, or codeine, to obtain the

pain relief they get from propoxyphene?

Dr. Furman. The key word in your question is "safely." There are individuals who, because of disease states or idiosyncracies, can take one analgesic and not another.

I do not think one would be wise to make a blanket statement that those who receive analgesia from propoxyphene can safely switch to

codeine or aspirin and expect to get the same analgesia.

Senator Weicker. Dr. Finkle's study showed that most of the deaths associated with propoxyphene involved use of the drug in combination with alcohol or other drugs such as tranquilizers. This raises what seems to me to be an entirely different problem than the one that has been layed at your doorstep during the course of these hearings.

What is your view insofar as what the pharmaceutical industry, or the FDA itself, can do in regard to educating the public in this area? Dr. Furman. Well, we have educated, and will continue to educate, physicians in respect of the proper use of propoxyphene products.

We are in the process of modifying our package literature to provide the physician with more adequate information on the management of overdose; but I think what you are touching upon, Senator Weicker, is the overall problem of a pill-popping, drug-abusing society. If one takes a look at the suicide rate per 100,000 in the United States over the last few years, one gets really quite depressed at the realization that thousands of people are killing themselves one way or another. Some of these individuals are using drugs; but, I submit, is the situation improved if they sit in a car with the motor running and the garage door shut, or blow their brains out with a gun, rather than use a drug to do this? We still have a societal problem of considerable dimensions.