

Senator NELSON. I would not want to mention when and where, but I was on a trip to a convention and everybody on the trip got Darvon. Nobody got an aspirin or anything else. He was given Darvon.

On the question of placebo on animals, that may be so, but it is very difficult to explain the false pregnancies that dogs sometimes get.

Dr. FURMAN. Makes it a very interesting business.

Senator NELSON. Thank you very much. I appreciate your taking the time to come. If you have anything you wish to add to the testimony we would be happy to receive it for the record.

Dr. FURMAN. Thank you.

Senator NELSON. Our next witness is Dr. Louis Lasagna, chairman of the Department and Professor of Pharmacology and Toxicology, University of Rochester School of Medicine and Dentistry.

The committee is pleased to have you come today. Your statement will be printed in full in the record and you may proceed any way you desire. We are already at 12:30, but we need to complete our testimony, so we will proceed.

STATEMENT OF LOUIS LASAGNA, M.D., CHAIRMAN OF THE DEPARTMENT AND PROFESSOR OF PHARMACOLOGY AND TOXICOLOGY, UNIVERSITY OF ROCHESTER SCHOOL OF MEDICINE AND DENTISTRY

Dr. LASAGNA. My name is Louis Lasagna. I am professor of pharmacology and toxicology and professor of medicine at the University of Rochester School of Medicine and Dentistry. For over a quarter of a century I have engaged in research on analgesic drugs, and have written extensively in this area.

I appreciate this opportunity to share my thoughts with you in regard to the suggestion that propoxyphene constitutes a major drug abuse problem and an imminent hazard to the health of the U.S. public.

Propoxyphene is unquestionably an effective analgesic drug, either when given alone or in combination with such drugs as aspirin or acetaminophen. This judgment was reached by the Analgesic Drugs Panel which I chaired in the late 1960's for the National Academy of Sciences-National Research Council at the request of the FDA Commissioner, and is an opinion still supported by a review today of the world literature on pain-relieving drugs. It is unfortunate that some who are concerned about the euphorogenicity or toxicity of propoxyphene feel constrained to deny the ability of propoxyphene to relieve pain. Millions of patients have taken, and continue to take, propoxyphene for its analgesic properties. No placebo effect can explain its popularity.

It has been known for years that while propoxyphene, like any drug which affects the central nervous system, can be abused by some individuals, the risks of such abuse are minuscule. National and international expert advisory committees have repeatedly taken up this issue since the original marketing of the drug, and have never seen a need to reclassify propoxyphene as a drug with high addiction liability.

More recently, drug-associated fatalities have been observed in individuals taking excessive doses of propoxyphene, especially in combi-