

Dr. FINKLE. It has been asserted that the number of deaths caused by propoxyphene is now greater than those from heroin. This question was addressed at each of the study sites. At most sites this is simply not true; and in those areas where propoxyphene is detected in unexplained death cases with greater frequency than heroin/morphine this is clearly a function of the dramatic reduction in heroin fatalities in almost all areas of the United States since 1976 and not related to a supposed increase in propoxyphene cases.

Again, this points to a need for careful examination of individual cases before general, epidemiological inferences are drawn.

The report—and this statement—certainly do not exonerate propoxyphene as a safe drug; it is of major concern to all toxicologists. There is no absolutely safe drug, and it is irresponsible to condemn a valuable pharmacological agent before accurate data are available to place its adverse effects in perspective with those of other similar drugs, and current forensic and clinical toxicology experience.

If I might digress; the memorandum to which you referred, Senator, is a report to myself of that study and the principal findings of the followup study. I would now like to add one thing. You will notice that in my view a very important study site is at Dallas City and county, and the Institute for Forensic Sciences at Dallas was included in the followup study and was also in the original study. An important letter was sent to me by Dr. Vincent DiMaio who is the deputy chief medical examiner at that office. The letter came to me too late for inclusion in my prepared statement and I would now like to read it into the record and include it as part of my testimony.

Senator NELSON. Go ahead.

Dr. FINKLE. The letter was originally addressed to Dr. Wolfe in response to a letter Dr. Wolfe sent to Dr. DiMaio. It reads:

I am in receipt of your letter dated December 18, 1978, concerning the Health Research Group's petition to the DEA requesting transfer of propoxyphene to schedule II of the Controlled Substances Act.

It is my opinion that the danger of propoxyphene is overinflated. Propoxyphene like any other drug can kill if misused. Accidental deaths from the use of propoxyphene are rare. Most alleged accidental deaths are drug abuse deaths. Any drug abused is dangerous. More common than drug abuse deaths with propoxyphene are suicides. I do not think that by making propoxyphene difficult to obtain, one will decrease the rate of suicides. One will just change the drug or its use. All one has to do is compare the method of suicides in different areas of the country to realize that access to drugs would make little difference in the suicide rate.

In the latest data from our office propoxyphene accounts for nine deaths; six of these were determined to be suicidal gestures. Along with your letter was a copy of a letter to Joseph Califano, Secretary of Health, Education, and Welfare. This was apparently a public letter released on Tuesday, November 21, 1978. I think your cause might be taken more seriously if in this letter you had not included data that was incorrect.

On page 3, table 2, you list the propoxyphene-related deaths from July 1973 to December 1977. I am afraid that I cannot believe any of the figures in that table. The reason I do not is that for Dallas you indicate that there were 80 such deaths in that period of time. I would like to inform you that from January 1973 to December 1977 in Dallas there was a total of only 30 deaths due to propoxyphene. An additional 25 individuals died of a combination of multiple drugs and also had propoxyphene detected in their blood.

If you include both, then the maximum number of cases would be 65 rather than 80.