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there safe, toxicologically benign alternatives? This is a critical question to be answered before any precipitant action is taken. Few medical-science problems are solved by negative action, there is a need to maximize the medical assets of propoxyphene and minimize its liabilities through decisions based on clinical and pharmacological understanding; and with a refined, focussed system designed to carefully monitor its performance prospectively.

I am not an advocate for propoxyphene or any other particular drug, but a biomedical scientist who recognizes a critical need for a method of effective evaluation of human toxicology. DAWN is a valuable but blunt tool, not designed for this purpose but so often misused because it is the only instrument available. It is not good enough alone for toxicologists' purposes. A cool, continuous examination of toxicological facts as they become available through a prospective monitoring system is required; together with improved laboratory practice and applied research. The overriding purpose should be better medicine and improved public health through the dispassionate work of medical examiners, coroners and toxicologists. They are the ombudsmen of public health and their professional efforts deserve better than ill-considered interpretation resulting in hasty, self-defeating legal regulation.