"Your Family Nationally syndicated newspaper column: Author, Physician."

Editorial Advisory Board, "Medical World News."

Medical Editor, "AAFP Home Study Self-Assessment Program."

Medical Consultant for Current Health.

PMA Commission on Sales Training Program.

Parliamentarian for AAFP Congress of Delegates, 1977-78.

President—American Board of Family Practice, 1979.

FARMINGTON, CONN., January 31, 1979.

Subject: Congressional action on Darvon.

Mr. LOWELL WEICKER,

Russell Senate Office Building, Washington, D.C.

DEAR SENATOR WEICKER: Would you please see that a copy of this letter (inclosed) gets to the proper Congressional committee people, if you yourself are not involved in the hearing on Darvon and if possible, let me know who they are. I am strongly opposed to removing Darvon from the market or even putting it on the dangerous drug list (which would mean a visit to the doctor every time the prescription was filled).

There is no truth to the statement of one of Ralph Nader's men that Darvon or one of its compounds is no more efficacious of relieving pain than aspirin.

I have been ill and in severe pain for the last four years and if it were not for Darvocet (Darvon and tylenol combined) would have had to take a more severe analgesic which would have been addictive. My husband is in 24-hours-a-day pain because of heart surgery and there is no drug on the market today that he could safely take except Darvon. For Mr. Nader to say that aspirin is just as good as Darvon is merely a theoretical statement by someone who has not been in pain year after year. I have noticed that after four years of being on Darvon, that the drug is not addictive, for when pain is not present because of my recovery, I simply forget to take the pills because they are not needed.

Even if the statistics were true and not slanted in an adverse direction, limiting the use of Darvon does not solve the problem for those people who are in constant pain—it would force them to addictive medication. I assume that there are a great many in pain caused by arthritis who would present the same argument I have put forward. My 80-year-old mother is one such person and taking Darvon

out of reach of people like her would cause terrible hardship.

I can only conclude that Mr. Nader has launched this campaign wrecklessly without giving any thought to those people who need this drug, and would have second thoughts if he were one of the tens of thousands of peple who must live with pain every day of their lives. Mr. Nader's action is a reprehensible cheap try for publicity and I believe his statistics are faulty. He should look into statistics on how much relief this drug offers safely to suffering people. Please see that my arguments against banning or limiting the use of Darvon are heard by the necessary people. My husband concurs with the thoughts of this letter and so thanking you in advance, we are:

NORMAN R. TOFFOLON. SHIRLEY I. TOFFLLON.

ELI LILLY & Co., Indianapolis, Ind., January 26, 1979.

Hon. GAYLORD NELSON, Chairman, Select Committee on Small Business, U.S. Senate, Washington, D.C.

Dear Senator Nelson: As requested in your letter of January 15, 1979, to Mr. Richard D. Wood, I am enclosing responses to items one, two, three, and four. In addition to the enclosed response to item one, we are still compiling more published and unpublished information, which we will provide you promptly. The material supplied in response to item three is confidential commercial information which has not been publicly disclosed, and we respectfully request that the Committee preserve its confidentiality.

Sincerely yours,

EDGAR G. DAVIS, Vice President Corporate Affairs.