

I was upset at the time by drug advertising, but found out, when I got to Chicago, that with the reorganization—the previous person in that job had left—and the hiring of myself, the function of control of advertising was removed from under the purview of the council on pharmacy and chemistry. So I would be employed by an organization which was advertising drugs in a manner that I could not agree with, and I had nothing to say about it. So I didn't take the job.

Senator NELSON. Do you know the reason that the AMA ceased to perform this valuable function?

Dr. WILLIAMS. I think the proliferation of drugs got to be so rapid and the problem became so huge that even attempting to do these analyses would have been a serious financial burden to the AMA.

Now, I have heard suggestions that since they accept all these drug ads and make over half of the income necessary to publish their various journals from drug advertisement, that they stopped because of this. I am not sure of that.

I think the problem just got out of hand and they could no longer handle it.

Senator NELSON. I will let you finish your statement. Go ahead.

Dr. WILLIAMS. Anyway, the AMA has abandoned this role, shows no sign of taking it up again.

I am frequently asked by retail pharmacists which generic house can be depended upon to supply good quality drugs. I cannot give them an easy answer. I suggested to pharmacists in a talk last year to the Georgia Pharmaceutical Association that if they really want to know what is a good generic drug, and I get asked this question all the time, which one should they buy, that although they can't do these analyses themselves, they certainly can as an association, do the analyses and put out a list of drugs which meet the standards they set.

I have seen no sign that they are interested as an association in taking out this function either. I think what we are going to have to have is something like a regular FDA newsletter which will go out to all physicians and pharmacists.

Let me back up here in the statement.

It would seem that the role that was formerly handled by the AMA must be assumed by a Federal agency, such as an information service, possibly a regular FDA newsletter to all pharmacists and physicians, utilizing information in FDA, NIH, Army, Navy, and Veterans' Administration files as well as consultation with outside experts.

The Medical Letter does a good job with what it does but its sources are inadequate for the job and the circulation is too small at the present time to seriously affect the prescribing habits of the Nation or of the physicians of the Nation.

Since writing this, I have had some thoughts that possibly this should be handled by contract support of the Medical Letter people and let them do the job as an unbiased group intermediate between Government and industry in the way that the Rand Corp. operates.

I don't know what the final solution will be. But in the end it must get to the physician and the pharmacist, critical, comparative information about the relative value of drugs and their relative prices.

I believe that the average physician is interested in the financial welfare of his patient as well as his patient's health, and I firmly believe that if he had the information available to him, information in