which he could place some credence, he would use it to treat the patient more effectively and save the patient money.

I go out and talk to physicians and small communities around the State and I believe this. They say, "If you can give us proof that this product is as good, we will use it."

At the present time they have faith in the major pharmaceutical manufacturers. They are used to depending on their statements as statements of truth, and you have to bring something equally authoritative, if you will, to show them another side of the story.

I also believe that the average pharmacist is honest, and will pass the savings on to the patient.

In any event, armed with a generic prescription, the patient is back in the marketplace and he can shop around for lower drug prices.

Senator NELSON. Did you say earlier in your testimony that 90 percent of drugs on the market have been created——

Dr. WILLIAMS. In the last 10 to 15 years.

Senator NELSON. Ninety percent in terms of numbers?

Dr. WILLIAMS. Ninety percent that are prescribed.

Senator NELSON. Ninety percent of the prescriptions?

Dr. WILLIAMS. Ninety percent of the prescriptions right, are for drugs which are new drugs within the last 10 to 15 years.

Senator NELSON. Are you saying 90 percent in terms of numbers or 90 percent in terms of the money spent in the field?

Dr. WILLIAMS. As a matter of fact, I can't remember which it was.

Senator NELSON. I don't think there is any doubt but what you raise here a very serious question of great public interest.

Now, your hospital, for example, has its own formulary. You have the benefit of your specialists in all the various fields participating as well as pharmacologists and pharmacists. You have an opportunity for clinical and scientific observation with experts in many aspects of clinical medicine. So with considerable safety and a controlled situation, it is possible then for the doctors there to rely upon your formulary and prescribe from it, and you have an attentive, intelligent group who are continuously evaluating and revising the formulary.

That is the situation, is it not?

Dr. WILLIAMS. That is the situation, and many drugs undergo months of discussion before we introduce them into the formulary, and sometimes even here, even for our group, finding the information to make the choice is difficult under our present system.

Senator NELSON. And many other formularies around the country, hospitals in New York and elsewhere follow this same procedure and the doctors who work with it are able then to be relying upon a formulary that is established by some reliable, distinguished, knowledgeable people in the field. The private practicing physician doesn't have that opportunity.

Dr. WILLIAMS. Unfortunately, no.

Senator NELSON. Even though you have your formulary committee, you aren't able to do double blind tests, for example, on various drugs that you use yourself, so what you do have is the information and experience of a number of doctors in various fields, and that is what you rely upon, plus whatever studies are made around the United States that come to your attention.

Dr. WILLIAMS. That is right.