times where none exists and unfortunately for good medical practice this may lead physicians to the use of unnecessary or even unsafe drugs."

Dr. WILLIAMS. Yes, sir, that is correct. I would repeat that statement. Senator Hatfield. When you say "unsafe drugs," then you can't say that physician is acknowledgeable about what he is prescribing. He

wouldn't knowingly prescribe unsafe drugs, would he?

Dr. Williams. No; I think the difference here comes in my statement about lack of knowledge of comparative value of drugs. I said the average physician has no knowledge of the comparative efficacy of a group of drugs in the same class. I think unfortunately detailing pressure has resulted in the use of unnecessary and unsafe drugs, but I don't think by the average physician.

I think by a smaller group of the medical profession. There is no question about what it happens. This has been documented in the misuse of penicillin, and a widely used agent, nicotinic acid, which is given to a great number of old people in this country for dilating their

cerebral blood vessels.

The information in the medical literature would indicate that nicotinic acid doesn't dilate cerebral blood vessels, and this information has been there for years. But they have no source of getting this information as opposed to the detailing pressures of the companies that are selling the nicotinic acid.

Senator Hatfield. And under No. 4 on that same page where you

say, "And Dr. Neil Moran"—

Dr. WILLIAMS. Yes.

Senator Hatfield. Who indicates there that some detail man is telling a physician what drugs to use for which diseases, you are talking there then not about generic drugs but brand name drugs?

Dr. Williams. Either brand name drugs that do not have another maker, or a brand name drug that may be sold by other companies under another brand name. This problem of generics, all trade name drugs also have a generic name.

Senator Hatfield. Yes; so I understand.

Dr. Williams. So detail men only advertise trade name drugs. Some of these may also have generic equivalents under other trade names;

yes, this is true.

Senator Hatfield. But it does seem to me that you have given us at least an impression in certain statements here which would lead one to the conclusion that there are physicians today prescribing drugs, which as you indicate in one place could be unsafe, in another place which have been prescribed on counsel of a salesman. This puts us back to the question of whether or not a physician is truly following the highest standards of practice based upon his information, based upon his understanding. It, therefore, should become a concern for the medical practitioner and the medical profession as well as those of us here on this committee who have been besieged by the economics of all this. I think we need to concern ourselves with the economics, but there is this factor to me that is even more preeminent and takes priority over the economics.

Dr. WILLIAMS. They are inextricably intertwined.

Senator HATFIELD. That is right.