Dr. WILLIAMS. When one uses a drug which is not necessary, the cost to the patient, the unnecessary cost to the patient is the total cost of the drug, whether it be trade name or generic.

Senator HATFIELD. Yes; but there could be dollar cost and also health cost.

Dr. WILLIAMS. Very serious health costs.

Senator HATFIELD. And the health costs can be far more expensive than the dollar costs.

Dr. WILLIAMS. Yes; as expensive as fatal. May I add one word here which is not in my statement. There is another problem. Mostly we have been dealing, as you mentioned, about the private contract between the doctor and the patient, and attempting to extend our studies and our findings at Grady Hospital over into the general area of drug use. But there is a growing amount of money in this country being spent by the Government, tax money, for drugs, drug vendor programs.

Grady Hospital is one example, but the State drug vendor program the Federal Government is pouring millions of dollars into, some $4 million into Georgia alone this year.

Here another problem exists that is a little bit different from the ordinary private contractual relationship between the patient and the doctor and the pharmacist, if you will, the question of whether or not the patient pays for a useless drug, if it is nondangerous, which the doctor may prescribe, and which may do the patient, give the patient excellent benefit in terms of a placebo reaction is really to me not so much of a moral problem.

The question whether the State should pay for a drug which in medical literature has again and again stated is useless in the treatment of patients, I think, is a different problem. I think it has a different level or morality, and I think this is something that this committee should consider in a sense as two separate problems.

There is another area of abuse here, and this is true in our practice at Grady Hospital, when the doctor who I said I believe is concerned about the cost of medication to his patient realizes that the Government is going to pay for the medication, he becomes, since he is fallible, much more prone to prescribe a drug with less consideration than he might otherwise do.

Sometimes this can be good, where he will prescribe a drug which may be good for a disease than he might have withheld for the patient who couldn't pay for it. But sometimes it can lead to a large increase in needless and useless prescribing by the medical profession, and this is something which this country faces in the future as an increasing share of the drug bill is paid for by tax-supported agencies on a local and a Federal basis.

Senator NELSON. Thank you very much, doctor. Excuse me. Senator Scott?

Senator SCOTT. I think the questions I had in mind, Senator Nelson, have been well covered, and I have no questions.

Senator NELSON. Does committee counsel have any questions?

Mr. COUGHLIN. I have none.

Mr. GORDON. You mentioned on page 1 about the cortisone-type drug which cost $167 per 1,000.

Dr. WILLIAMS. Right.