Dr. MAGEE. In total I don't know.

Senator NELSON. Total number of prescription drugs?

Dr. MAGEE. I have no idea. It is probably an astronomical figure. Antihistaminics are an example of molecule manipulation. The bulk of them have got similar structures. Antihistaminics, when they appeared, did look like a breakthrough. They were disappointing, but even so, most major drug companies have their own antihistaminic under a trade name.

Senator NELSON. Is there any substantial therapeutic difference among them?

Dr. MAGEE. Not really. Some of them, for example, produce less depression than others. Obviously, if the physician knows this, he will prescribe the one that produces the least depression, because this is one of the undesirable side effects.

Senator NELSON. How would he find that out?

Dr. MAGEE. Well, the way things are managed at present, this is found out only in the course of time. It is found out if one reads medical journals. In the course of time papers are published giving comparative data. This ultimately gets into the pharmacology textbook.

Let's say I am teaching my course next year. A new antihistaminic has appeared on the market and is being prescribed. I would find it well nigh impossible to assess this for the students.

Senator NELSON. Supposing it is an antihistamine that has been on the market for 4 or 5 years; where would you look?

Dr. MAGEE. If it has been on the market for 4 or 5 years, I can find it probably in the pharmacological journals, and in the clinical literature.

Senator NELSON. How difficult a research job is it to find it?

Dr. MAGEE. For me it wouldn't be very difficult, because we have in our libraries indexes of medical and scientific literature. I could look this up in the index and find the literature. We have publications like the Medical Letter, and I could perhaps find it in that. But for a man practicing, it might be very difficult indeed.

Senator NELSON. There isn't any easy reference place where he could look under antihistamines?

Dr. MAGEE. No.

Senator NELSON. And find out which one was the present or——

Dr. MAGEE. No; not that I know of. If he treats patients with a drug, he might in the course of time arrive at an evaluation, if patients have had antihistaminics before they would probably tell him that they feel drowsier with this particular preparation than with previous ones, but it would be hard for him, in my opinion, to assess a drug's comparative depressant activity just from the literature that is available from the drug company or from the detail man.

Senator NELSON. All right, please proceed.

Dr. MAGEE. Recognizing the right of the sick to treatment and the dismal fact that medicine in this country is not up to par, particularly when the patient is poor, we should have the best medicine in the world. I think the time has come for a reappraisal. The present patent laws and the methods by which drugs are merchandised and advertised are not in my opinion in the best interest of the patient.

Who, for example, is benefited by the present quinine monopoly? The resultant price increase may be good for business, but it is bad