

Senator NELSON. And you are referring in this comment of yours about the 1962 act only to that aspect of the act?

Dr. MILLER. That is right, a page and a half of those two pages were concerned with official names; half a page was concerned with what I believe is the real problem, getting improper names assigned to new drugs. That is where the real problem is.

Senator NELSON. I thought you were referring to the whole act.

Dr. MILLER. No, I am not at all talking about the whole act. There were some other unfortunate parts about that, too, one of them being the extension of certification that we just talked about a few moments ago; but this subject of nomenclature was an area in which the Congress was not very well informed. There was very little discussion actually on that part of the act, and no one came up with quite the right formula by the time it went to the floor.

As a means of improving communication of information of all sorts on drugs, no one can quarrel with the one-drug, one-name concept. However, this best of all possible worlds is clearly unattainable. First of all, most drug substances are chemical entities and as such are known by names that are generally lengthy and comprehensible only to those highly trained in chemistry. The fact that few of those who deal with drug products are so trained makes it imperative to coin other, much simpler names. Disagreement seems to exist on whether these other names are nearly simple enough.

I would like to insert here a comment with respect to this element of simplicity. One factor that works against very short names is the principle that the names should show any important interrelationships that exist between the drugs. Thus within the group of the sulfonamides, the wonder drugs of the 1930's which gave man the first means of combating pneumonia and other serious infections, all non-proprietary names of the sulfonamides start with the prefix sulfa. There are sulfanilamide, the original member of the series, and those that have now replaced it, sulfadiazine, sulfamerazine, sulfathiazole.

If we were to undertake to shorten the name of this large group of drugs by chopping off the prefix sulfa, we would at once lose an important common bond of identity. Many other examples of this sort of thing could be cited, but the essential point is that brevity in drug names could come only at the expense of the informative capacity of the name. Bits of information are conveyed by syllables, and syllables are useful only if they are recognized and can be fixed in memory rather readily. But those of us who have undertaken to coin drug names learned quickly that the way to any really simple nomenclature is strewn with roadblocks of all sorts. Chief among these blocks is the existence of so many names that are in use or have once been used; trademarks may not be infringed and old names may not be applied to new drugs because of the confusion, that would result. In short, just as old skins are not safe for new wine, old names are useless for new drugs.

A second point is that critics seem never to take into account the fact that catchy, two-syllable, contrived names like Kodak or Ansco come to mean cameras only as the result of costly and ceaseless advertising. Hundreds of two-syllable trademarks are in use for drugs but they have mnemonic value only because they are heavily promoted. No non-proprietary name, short or lengthy can compete for public acceptance