insist on simple, direct, easily-remembered names. Now there are certain problems that they have to face, because as you get more and more drugs, it becomes more and more difficult to devise simple names that don't conflict with other names, and that cannot be confused with them. But I would like to see generic names made as simple as possible. I see no reason for making them multisyllable or having lots of X's, Y's and Z's.

I am always amused by the fact that X, Y and Z are rather rare letters in most languages, but when you come to generic names of drugs, I would say about 75 percent of all of them have either an X, Y or Z in them and some of them have all three. Zoxazolamine has two Z's

and an X.

Senator Nelson. This is your field. Is there a possibility for a phar-

macologist to be familiar with all of the generic names?

Dr. GARB. It is possible for a pharmacologist to be familiar with the generic names. I don't know if it is possible to pronounce them.

Senator Nelson. So if we had to write it down on a prescription without looking up the spelling we couldn't do it in many cases; is that

correct? I don't want to test anybody here.

Dr. Garb. I think I would have some trouble. I think, however, that a physician who has a particular type of practice and who is only using say 40 or 50 drugs altogether would become familiar enough with them so that even with these spellings he could handle them.

Senator Nelson. Go ahead.

Dr. GARB. These names are difficult because of two considerations. First, most of them were invented by the drug manufacturers, who found it financially rewarding to make generic names hard to remember, pronounce or write, so that physicians would be more likely to prescribe by private product name. Until 1962, the FDA did not have authority to specify simple, meaningful generic names. It now has that authority.

The second reason is that the FDA has been slow about using its

authority to simplify generic names.

Senator Nelson. Are you referring to—

Dr. GARB. The old names.

Senator Nelson. The old names? Do they have the authority to go back now and establish simpler generic names than those that have already been adopted?

Dr. GARB. I believe they have. I am not a legal expert. My understanding of the law is that they do have that authority. If they don't,

they should have.

Senator Nelson. But they do have the authority to approve it—

Dr. Garb. The new ones.

Senator Nelson. The new ones. Does that sole authority rest with the FDA?

Dr. GARB. Yes. They have a mandate now.

Senator Nelson. Do they work in cooperation with any profes-

sional groups?

Dr. GARB. I believe they work in cooperation with the AMA and other groups because frequently they will take the USAN name and make it a generic name. I am sure there is a great deal of cooperation.

Senator Nelson. I guess that is a question for the FDA when they

come up here.