to have memorized what I consider to be a form of a code. Furthermore, the relationships between the drugs is often obscured and confused—not deliberately, but by the operation of the system.

For example, looking at this, how many people not knowing the system would realize that Kynex is the same thing as Midicel in terms of chemical nature? Well, if a patient has been taking Kynex and develops a drug reaction from it, he will probably develop the same reaction if he gets Midicel, since the activities of each are

absolutely identical.

The patient may know that in the past, after taking Kynex, he became ill. And therefore, if he sees a prescription for Kynex he might say to the doctor: "This made me sick last time." However, if he goes to another physician and receives a prescription for Midicel, is he likely to realize that the two drugs are the same? The chances are not. Will the doctor? Sometimes, perhaps, but not always. And I should add that there is evidence in the record that this is the case.

Senator Nelson. Just for clarification of the record, the list of seven drugs that you list on page 6 of your statement are not all the

same generic drug.

Dr. GARB. No, no, I have several groups there. Incidentally if I had a list of seven different kinds of beans you would know that they are all beans you see.

Senator Nelson. I can see they weren't, but it doesn't appear clear

from the statement.

Dr. GARB. Kynex is the same as Midicel; Miltown is the same as Equanil; Madribon is related to Kynex and Midicel, but is not the same thing.

If a doctor prescribes Achromycin for a patient with an infection and it doesn't help, might be switch to Tetracyn? Both are really tetracyline hydrochloride, and there are other private product names for the same medication.

The use of these private product names prevents the operation of a free competitive market in drugs. Few if any physicians can keep up with all these names, let alone the prices of each product.

Let us suppose that Equanil sold for 50 percent less than Miltown. A doctor accustomed to prescribing Miltown would be unlikely to change, if he did not know that Equanil was essentially the same thing, producing exactly the same result, but cheaper. I doubt if there are many physicians who know the composition of all the private product named drugs. In fact, I rather doubt if there are any physicians who know the composition of all those drugs.

The confusion which results from the multiplicity of private product names has been mentioned by many, and is thoroughly documented in the record of the hearings of the Kefauver committee. Should this committee wish, I will submit page citations. However, the evidence in the Kefauver hearings referred to happenings before 1961. The question