before us now is whether there is still significant confusion about private product drug names. I believe that the answer is definitely affirmative, and to support my statement, I wish to offer a copy of an article by Doctors Azarnoff, Hunninghake, and Wortman entitled "Prescription Writing by Generic Name and Drug Cost," which appeared in the Journal of Chronic Disease, volume 19, pages 1253–1256, 1966.

Senator NELSON. The article will be received and will be printed in the record.

Dr. GARB. Here is the article.

(The article referred to follows:)

PRESCRIPTION WRITING BY GENERIC NAME AND DRUG COST

(Daniel L. Azarnoff,* Donald B. Hunninghake† and Jack Wortman, Departments of Medicine and Pharmacology, University of Kansas Medical Center, Kansas City, Kansas, and St. Francis Hospital, Wichita, Kansas)

When a problem reaches such stature that it becomes a subject for the cartoonist (Fig. 1), we can be assured that it is either a significant social or political issue or an absurdity. Many, many words have been written concerning whether drugs shold be prescribed by generic or brand name. A variety of reasons can be offered for both. One factor frequently listed as a reason for prescribing by generic name is the lower cost of these preparations. There is little doubt that the wholesale cost of many drugs sold by generic name to pharmacists is less than the same drug sold under a trade name [1]. The real question, however, concerns the cost of the drug to the consumer and whether or not the decreased cost of a generic drug is passed on to him. In a recent popular book by Morton Mintz [2], it is categorically stated that the price of drugs when prescribed by generic name is cheaper than the same drugs by brand name. This investigation will show that for at least one drug the statement is true in a large midwestern city.

METHOD

A *bona fide* prescription for fifty tablets (400 mg) of Miltown® (meprobamate) was filled and purchased at 23 pharmacies. At least a week later, a prescription for a similar quantity of meprobamate was taken to the same stores by a different individual. If the source of the medication was not discernible by markings on the tablet, the pharmacist was asked for the name of the manufacturing pharmaceutical company. In all instances, this information was made available.

RESULTS

The mean cost of Miltown at the 23 pharmacies was $4.94 while meprobamate purchased by generic name was $3.88, a saving of 21 per cent (Table 1). The mean cost at pharmacies of two chain drug stores was $4.49 and $4.40 when prescribed as Miltown and $2.93 and $3.22 when prescribed as meprobamate. This represents a saving of 35 and 27 per cent respectively. At pharmacies composed only of prescription shops and other individually operated drug stores, the cost for each prescription was higher, although the saving on generic name prescriptions averaged 17 per cent. At 18 of the 23 pharmacies, a generic name product was dispensed when ordered in this manner. Of these, only one charged the higher price of a brand name product while he dispensed a generic name product. Of the remaining pharmacies, the brand name products were dispensed at their regular price in three and at a higher price in two.

---

*Burroughs Wellcome Scholar in Clinical Pharmacology.
†USPHS Fellow in Clinical Pharmacology.