

This is called generic, or official prescribing, and means that the pharmacist may dispense any manufacturer's make of meprobamate.

A second way would be to write: Equanil.

This is called brand, or private product name prescribing and means that the pharmacist must dispense the product distributed by Wyeth.

The third way, which I consider the best way would be to write: meprobamate (Wyeth).

The pharmacist would then dispense the Wyeth product.

For at least 25 years, medical school facilities have been teaching and urging that prescriptions be written in this third way. Unfortunately, our recommendations have not been widely followed, and I believe that this lies at the root of most of the difficulties with drug prescriptions.

On May 11 of this year, I participated in a dialog on drug marketing at the University of Missouri, sponsored by the American Marketing Association. It was a most valuable experience.

One of the representatives of the pharmaceutical industry asked about the difference between prescribing Seconal or secobarbital (Lilly). Would the patient not receive the identical medication either way? My answer was "Certainly."

Senator NELSON. Who makes Seconal?

Dr. GARB. Lilly. Seconal is Lilly's brand of secobarbital, and my point was that if the physician wishes to have the patient receive Lilly secobarbital he should write Lilly secobarbital.

So this gentleman commented, "Well, if the patient would receive the same medicine, no matter which of these two ways the prescription is written, why quibble over the way the prescription is written?" And apparently many people think this point we have raised is a quibble, or some sort of ivory tower perfectionism that professors like to indulge in.

It is neither—it is an issue of major importance, and I believe that we medical educators have been remiss in not explaining why. Therefore, I'd like to point out the importance of the proper prescribing method. To a large extent it is a matter of numbers.

First, let us consider the number of drug names. Let's assume that there are 100 drug manufacturers, each making the same 50 drugs. If prescriptions are written in the meprobamate (Wyeth) fashion, the physician needs to know only 100 plus 50, or 150 names in order to prescribe any combination of any drug made by any company, and of course a physician can easily handle 150 names. However, if prescriptions are written by private product name, for example Equanil—the physician must know 100 times 50, or 5,000 names in order to prescribe any drug made by any company.

Senator NELSON. Any drug made by any one of these 100.

Dr. GARB. Right, any drug made by any of these 100; yes, sir. There are actually more than 100 manufacturers using private product names and more than 50 drugs. It was my understanding that the total number of different names for prescribed drugs is today somewhat over 7,000. I heard a disturbing report that I may have underestimated this, but 7,000 is I think a serious enough problem.

Senator NELSON. Are you saying there are 7,000 different drugs or 7,000 different brand names?