

in a most notable and credible way, and I am just concerned that we work with them.

I am not here criticizing the doctors. I have great faith in them. I only want to see an active role on the part of the profession, acting through any channel or mode that it wishes to act through, both as individuals as you have appeared here, but also as a profession, because we need their counsel and we must have it, and I think they should be just as concerned about this problem as we who are political officials are concerned. In fact, they should be the first to be concerned, because they are most intimately involved and most technically qualified to counsel on this problem. That is my point.

Dr. GARB. Well, I hope it turns out that way.

Senator HATFIELD. You sound very, very encouraging this morning.

Dr. GARB. But again I would just have to wait and see what they say.

Senator HATFIELD. All right. Thank you.

Senator NELSON. I would like to interject for just a moment. We have had here, as you well know, in addition to yourself, a number of very distinguished authorities in the field of pharmacology and clinical medicine. They have all, without any exception that I recall, generally stated that there is great confusion in this field, that something ought to be done about it, and that it is a very serious matter.

I would like to say first that I am inclined to agree with Dr. Williams' testimony yesterday, and your endorsement of it, that it is a problem that needs to be dealt with at some central level. I don't think, for example, that it is a problem you can blame the drug industry for.

I am told there are a thousand or two who manufacture, at least several hundreds competing with each other, and under the law they have got to add some name to their drug. That is their responsibility, so there isn't any way for an individual company, and it is unrealistic to expect, the group to get together and settle this problem. In fact, they don't have the legal power to settle it. Fifty of them might agree on what the answer ought to be and then you would have 50 competitors who wouldn't agree and the confusion continues.

So I think that is the nature of the problem, and that is the reason for these hearings. It needs a careful evaluation. We need the best testimony of all the people who are involved, the medical profession individually and as an organization, the drug companies, the pharmacists, the retail druggists, independent professors and teachers in the field and that is what this hearing aims to do: to get the best information we can from all of these people.

I think I should clarify one point. The AMA as such or any professional group related to the AMA, has not asked to testify. Whether it would be appropriate at this stage or not I am not prepared to say, but none of them has asked to testify. I may have interjected a confusing note when I said we were discussing it.

What has happened is that Dr. Annis, former president of the AMA, wrote a letter to his Senator in which he said that he wanted to testify. This was as an individual. We weren't prepared to put him on forthwith as he desired because of our schedule. I was advised yesterday that he has now said he would come as a representative of the AMA. I guess he is on the board. So that is the only note I have received from them. It was after Dr. Annis requested to appear as a