

Senator HATFIELD. Aha, we are back to the AMA again.

Dr. GARB. We are back to the AMA again.

Now, unfortunately, the AMA gave up its seal of approval program years ago, which I think was a dreadful mistake.

Senator HATFIELD. That is what I am trying to get at, Doctor. It seems to me that we have to get a believable——

Dr. GARB. Exactly.

Senator HATFIELD. A believable stamp of approval.

Dr. GARB. Yes, sir.

Senator HATFIELD. And to me the word "Government" in itself does not necessarily answer all these problems.

Dr. GARB. I like that word "believable." I think that is a fine word and I like it very much.

Most of the time, however, the differences between drugs of different manufacturers are not apparent, or are trivial.

For example, what are the differences between Miltown, Equanil, and meproamate sold by McKesson? If there are differences, how does the doctor find out about them? They are not described in the medical journals, in medical textbooks, or in PDR. How does the doctor decide which of these preparations is best for his patient?

What I am getting at here is that we are told that one drug may be put up in a somewhat different size of granule, that it may have more sugar in it than another drug, that it may be ground up a little differently, et cetera, and that only the physician can tell which of these drugs is best for his patient.

Well, I have heard this argument now for about 7 or 8 years, and so I began to wonder about it, and I have asked the question, how does the physician find out, and I have not been able to find out any way. There is no way to find out, unless perhaps if you write to the company's main offices directly. I have here, for example, a series of the package stuffers that are used for drugs.

These are supposed to contain all the pertinent information about the drugs. These are supposed to be the most complete thing which the doctor gets, more complete than any ad, for example.

I have here the one for Miltown and for Equanil, both of which are meproamate. They do not tell you anything about which pill has more sugar in it or which pill has different size granules or anything else, and in fact I have a whole stack of these package stuffers, and none of them tell you this. So I do not see how this argument can apply.

It seems to me that if any group of drug manufacturers wish to use the argument that their brand name drugs are better because of certain differences, and that the doctor knows what these differences are, they should show how the doctor finds out these differences. They should be required to put those differences in writing in these package stuffers.

I have some of these here, if anybody would like to check them.

Senator NELSON. The trade association claims there are 20 to 30 ways in which one drug is different from another. Is it not likely that in whatever ways they differ, if they meet Pharmacopeia standards, the difference does not really make very much difference?

Dr. GARB. I think the differences are trivial, but my point is I do not know that they are trivial, because I cannot find out what they are. I have never been able to find out what the difference is between one brand of the drug and another brand of the drug.