prepared than the individual practitioner to make judgment, "there is nothing to suggest that variations in formulations are causing any problems in the treatment of patients."

Mr. Conzen. I cannot comment on the findings of these scientists, pharmacologists, chemists, and physicians. All I can testify to is to

the quality and efficacy of our own brand.

Senator Nelson. The Chair, of course, won't argue with that. I am sure it is of very high quality, one that ranks with all the other 22 as meeting USP standards. But the Medical Letter is so concerned about the great price spread that they suggest the desirability of prescribing by generic name. Are you suggesting that the Medical Letter is not qualified to make a judgment about this, after the tests they have made and the consultations they have made with distinguished clinicians and pharmacologists around the country?

Mr. Conzen. Sure they are, but I have not seen any clinical evidence conducted by the Medical Letter or anybody else to prove that other brands of prednisone are therapeutically, in patients, more or less or

equally effective.

Senator Nelson. What we are really concluding here is that there is no clinical evidence to prove that any one of these 22 is any better or any less effective, including Schering's?

Mr. Conzen. That is right.

Senator Nelson. Isn't that correct?

Mr. Conzen. Yes.

Senator Nelson. Then, the doctor who is prescribing the drug for \$17.90, when Merck has one available for \$2.20 and Upjohn for \$2.25, is simply charging his patient a lot of dollars for a drug on which there is no proof that it is any better than these that are available at a cheaper price; isn't that correct?

Mr. Conzen. No; I differ.

Senator Nelson. Then we get back to where we started. What is

the proof?

Mr. Conzen. The proof is the abundant experience of a practicing physician of the results which he has achieved in his patients. Each patient, each case, differs, and if he is satisfied that he gets the best response with our product, Meticorten, he obviously feels justified to continue to prescribe it, notwithstanding the fact that he knows that there are less expensive prednisone preparations available.

Senator Nelson. What about the doctor who is prescribing Merck's

 $\operatorname{Deltra} ?$

Mr. Conzen. That is his judgment, but I believe their sales are very insignificant, and it is more of a service item probably than a widely prescribed brand product.

Senator Nelson. I don't want to put words in your mouth, but what you are really saying is that whatever doctors prescribe the most

provides a satisfactory scientific judgment of what is best?

Mr. Conzen. I would agree with this.

Senator Nelson. Since Schering is confident that its drug has greater therapeutic value than any of the other 21, why doesn't Schering sponsor clinical double blind tests versus half a dozen of the rest of these drugs, so that you would be able to come before the subcommittee and say that the clinical double blind tests prove that ours is the best? Since this is a very important, item, in the sales of your company, and it wouldn't be very expensive to conduct a double blind