Senator JAVITS. I think you have helped us very much, Doctor, and I am very grateful to you.

Thank you, Senator Nelson.

Senator NELSON. I would like to continue with the question I raised a few moments ago about the availability of the information accumulated by your hospital on adverse drug reactions. As I understand it, you publish a quarterly bulletin, and furnish that information to the FDA.

Dr. CHERKASKY. Yes; and we also furnish that bulletin to all of our physicians.

Senator NELSON. In what form is this bulletin on adverse reactions? How would you characterize the scientific status? In other words, do you have some evaluation as to whether it is a peculiar reaction of a particular patient? Do you include all the clinical information that you gather?

Dr. CHERKASKY. Yes, we try to determine whether it is the drug, whether it is the patient, whether it is his particular disease, and so forth.

Senator NELSON. And if you are using a drug and you get an adverse reaction, do you attempt to decide whether it is due to the peculiarities of the particular patient?

Dr. CHERKASKY. Or the drug.

Senator NELSON. Of course, we are going to have Dr. Goddard here and he can speak better to that perhaps than you, but do you know whether or not any place in the United States centrally collects adverse-drug-reaction information, collates it, and makes it available for physicians?

Dr. CHERKASKY. I would say to you that the FDA, so far as I know, is the one area that does that, and tries to make that information available.

Senator NELSON. Is there some place where a privately practicing physician, without the benefits of a drug formulary committee, can find out very quickly whether there is clinical evidence of adverse reactions for any drug?

I realize that the advertising in the Physicians' Desk Reference and in other places may cite adverse reactions, but is there any place where all of this information is gathered together and evaluated? Does the AMA do it?

Dr. CHERKASKY. Dr. Goddard can address himself to this authoritatively. It is, however, quite clear that an effective continuous method of informing the doctor about these sorts of things is not yet available, and should be.

It would seem to me that under governmental aegis we would have to make sure that this kind of information is forcefully available to the physician.

Senator NELSON. Senator Hatfield.

Senator HATFIELD. Doctor, I would like to just go back to a little bit of the testimony you were giving to Senator Javits a moment ago. Did I understand you to use the word "destructive" in reference to and in identification of, the drug advertising program? There was a destructive factor?

Dr. CHERKASKY. In some ways, yes, Senator. That is what I said.

Senator HATFIELD. I would like to have you spell that out a little