You know we tend to be a little more concerned about the smaller companies and tend to take it for granted that when we deal with a "large company," we are secure about the quality controls. We have to recognize that in both the great brand and great pharmaceutical houses and the smaller one, much needs to be done to secure the safety and the potency of the drugs.

Senator NELSON. One of the things that concerns me as chairman of the subcommittee is the assumption that is made by so many people in the medical field that if it is a generic drug, especially one produced by a generic house, it is assumed that there is something suspect about its quality.

The FDA's own tests of 4,600 drugs demonstrated that, with respect to the brand-name drugs, there was a 1 percentage greater miscalculation either over or under potency than there was with generic drugs. That is a rather bothersome statistic to me when you consider that the assumption is made throughout the profession that somehow generics are suspect, and brand names are accepted when in the only tests available in recent years the generics came out slightly better off on this test of potency than the brand names.

Dr. CHERKASKY. Well, I don't think this is accidental. I think that there has been a deliberate attempt, successful, to raise serious question about the generic drugs and the not-so-well-known drug manufacturers, which has made the doctor and the public insecure and I think what you are in a position to do is to establish the security of the physician and the public with regard to drugs, no matter who makes them.

Senator NELSON. Do you think it is feasible and worthwhile for the FDA to commence a program of taking the most frequently prescribed categories of drugs and contracting in one way or another with distinguished hospitals and laboratories to do clinical and chemical testing, so that the medical profession, on the basis of these studies, can have confidence in all drugs on the market? Do you think this is a feasible project?

Dr. CHERKASKY. I think it is feasible, it is reasonable, and I happen to believe it is long overdue and absolutely essential that it be done, Senator. I think that if we take this one step, we will move quite a way to rationalizing the whole drug situation. In any way I could I would support that kind of activity on the part of the Federal Government and the FDA. It is essential.

Senator NELSON. And do you see it as practical for them?

Dr. CHERKASKY. Yes.

Senator NELSON. There would be no problem, for example, for your hospital to participate in that kind of a program of double-blind testing in order to come up with clinical evidence?

Dr. CHERKASKY. I think you would find that every one of the very large number of great institutions and medical schools that we have in this country would be willing and clearly able to undertake these kinds of studies and to settle the questions definitively. I would like very much to see that done.

Senator NELSON. What page are you on?

Dr. CHERKASKY. Page 13, the story of David Bird in the New York Times on July 24. He is reporting what had happened at the previous day. Drugstore owners decided not to comply with the city of New