of drugs alone. It has to do with the whole problem of continuing edu-

cation of the physician.

Then I go on to note in my prepared statement that one of the things that needs to be done is that the FDA and the medical schools and teaching hospitals and responsible drug manufacturers ought to get together to take this mass, this huge mass of data and numbers of drugs and bring it down to some kind of manageable level and provide simplified, clear data, and arrange for the doctor to have easy access to proper information. I talk about closed-circuit television, but we must use all kinds of methods. We talked about this earlier, some new method of providing a continual education for the physician with regard to drugs and drug usages.

Senator Nelson. How do you suppose that a closed-circuit television

system would work in educating the doctor?

Dr. Cherkasky. Well, for example, if we had something like this in the city of New York, and if we get some of the better medical schools and hospitals together, we could run a seminar daily or three times a week, in which we would talk about the drugs, what drugs are out, what drugs are best used.

For example, we had a discussion at lunch, we decided that even though we had 400 ethical drugs in our formulary, most doctors only

use $2\overline{5}$, 30, or 35 drugs.

It is an illusion to believe that the doctor has at his disposal all those thousands of drugs. He can't make use of them because he doesn't understand how to make use of them. We could, by use of closed-circuit television, have programs from week to week about different disease entities, and then talk about the drugs related to those diseases, which ones are available, and which ones are the sound ones.

We must, not only in drug therapy, but in connection with the entire continuing education of the physician, develop some kind of creative mechanisms of communication to keep them abreast.

Senator Nelson. You are thinking then that you would have a pro-

gram to be given at certain regular time intervals?

Dr. Cherkasky. Yes.

Senator Nelson. During the day, so many days a week?

Dr. CHERKASKY. Right.

Senator Nelson. Some announcement of what the subject matter was to be?

Dr. Cherkasky. Right.

Senator Nelson. The doctor could set aside some time in his office and get the benefit of this current information on some subject?

Dr. Cherkasky. There are all kinds of educational devices that we could use. For example, the doctor could probably call up at his request information having to do with drugs of certain kinds. I think we have got to think through a body of material and a method of communication sounder than what we have now.

Senator Nelson. Doctors and pharmacologists have testified before the committee that there ought to be a national compendium which would have the approval of the FDA and which would list all drugs by generic name and brand name, list the purpose and clinical use of the drug, and list the known side effects so that any doctor could open up the compendium, start with the generic name, and select whatever