

macist initiate any kind of an action to inform this doctor or doctors of these changing situations?

Dr. APPLE. Senator, I would say that many pharmacists have done this over the past, and it is going on with increasing frequency, especially because, as we have mentioned in our testimony, the American Medical Association has asked the doctor to be conscious of what the patient is paying for his drugs, which has in itself motivated the physician to ask the pharmacist more questions. On the other side of the fence, we have, of course, the public itself saying to the pharmacist "Why do I have to pay so much?"

Now this particularly happens when, for example, you have a product that a physician can buy at a fraction of the price the pharmacist has to pay, and the physician may give that product to his patient, and subsequently that patient may go somewhere else or may need some and it is not convenient for him to get back to the physician's office, and the physician will say "Well, I will call your pharmacist. Which pharmacy do you want me to call?" And the patient will go there and the pharmacist will say "That prescription is so many dollars." Then, the patient will blow up—he will come right out and say "But Dr. So and So only charges me so much for the drug." Well, even removing the pharmacist's fee for the service he renders, the pharmacist must charge much more than the physician because the drug cost him much more.

Mr. STEEVES. I also have, Senator, from November 13, Drug Topics, a trade publication, which discusses what pharmacists think about generics. One paragraph says:

Asked if physicians discussed the use of generics with them, 81 percent of the respondents gave a negative reply. However, 38 percent reported having had such discussions with their doctor clients.

So I think that this would be one barometer of the number who may be involved in this type of activity.

Senator NELSON. Did I understand you to say that between the price paid by the doctor supplying the drug to his patients and that paid by the dispensing pharmacist, there is a differential in favor of the doctor? If the doctor decides that he wants to buy directly from a manufacturer, does he buy at a price that is lower as a matter of practice than the price the retail pharmacist has to pay?

Dr. APPLE. Sometimes that occurs. We know there are various promotional efforts that are directed exclusively toward the physician and that the pharmacist doesn't have the opportunity to participate in them.

Senator NELSON. But the individual practicing physician, unless he has his own pharmacy, doesn't as a matter of practice buy drugs directly; does he?

Dr. APPLE. Well, dispensing physicians are still a problem to our profession, sir.

Senator NELSON. But if he is a dispensing physician, does he buy at a lower price as a matter of practice than the pharmacist?

Dr. APPLE. In the case of many drugs, that is true, sir. I wouldn't want to categorically say it happens with every single purchase made by the physician, but in sufficient cases to cause the pharmacists serious relations with his patients.