care and doctors' offices or diagnostic purposes, that all of this is properly utilized.

Mr. GROSSMAN. May I just ask one final thing. You talked about the detail man, saying that it was the best practical method thus far devised, and you also talked about advertising. I was wondering what are the chances in terms of practicality of devising some type of objective formulary or compendium with FDA approval, maybe using the FDA, maybe using the Physicians' Desk Reference with the FDA, and would this work? In other words, do you think it would be valuable to the doctor? Could he use it? Is there a more objective way to get this information to the physician without having him rely on the advertising and the detail man exclusively?

Mr. SQUIBB. That is a tremendous question you have opened up there. We could start over again on that. Of course, there are two things in your question. Compendium and formulary. They are not the same thing, nor for the same purpose. You have to separate them. I think the compendium idea is feasible. You can do it. I think it would be a waste. I do not think it is practical in concept of use.

Mr. GROSSMAN. You do not think that the doctors would really use it?

Mr. SQUIBB. He would still have to continue to depend upon his other sources for information even though it is there. It is hard to take that position because it seems you are sort of against knowledge, not against the compendium. I just do not think in practice it is worth the millions it would cost.

A formulary system for the Government, of course, is something else again. And here, as I have said before, I think a formulary system is inevitable for the Government, now that it has decided to pay for medicine to the extent it has. I think the Government will produce, if not now in present legislation, in subsequent legislation, a formulary. I think it will be a rather large formulary in terms of scope. It has to be because it covers a large area. It is not just a local problem or even one major hospital problem. But I think it has to be. When you take money and you decide to spend as much money as the Government decides it is going to spend, you have to set down ground rules, and a formulary is simply the ground rules for spending the money.

Mr. GORDON. Mr. Squibb, are you acquainted with the PMA advertisement in the November issue of the Reader's Digest?

Mr. SQUIBB. I received one.

Mr. GORDON. Have you seen it?

Mr. SQUIBB. Yes, I have seen it.

Mr. GORDON. I wonder if you would give us your comments about it. What is your opinion of it in terms of its technique and its content?

Mr. SQUIBB. That is a big question, too. I think the technique is old-fashioned and very disappointing. The one case history, as an advertising manager I would not have approved that technique. I think it could have been much smarter and more effective in carrying out the message. I think the technique of mailing something out without proper examination, and I have read the testimony, of course, and have heard the arguments about trying to or leaving off the advertising designation, is most unfortunate. I think this is a most unfortunate thing, because again the industry should take special precautions