Dr. DAMESHEK. Yes, I suppose so, but advertising might be construed as a form of brainwashing and I doubt that intelligent people, whether they are presidential candidates or doctors, should be brainwashed to that extent.

Senator NELSON. But, they might be.

Dr. DAMESHEK. Oh, yes.

Senator NELSON. You were just near the end of your statement.

Dr. DAMESHEK. Should a simple—I say here in my typed statement "to restrict the drug solely to hospital practice would not do very much because about half of the doctors in the country are in hospitals and they are apt to make as many errors of judgment in this regard as outside physicians." Well, I think it might do something. We discussed this previously. Should a simple method such as including the diagnosis on a prescription blank not prove successful, then a more radical approach might have to be used—one which almost completely restricts the drug to situations which are wholly acceptable for chloramphenicol therapy and for chloramphenicol therapy alone, as determined by one or another agency or committee. When lives are to be placed in jeopardy, even a few lives, one realizes, I should say this, that the reactions to this drug are few, relatively few, in comparison to the number of administrations, and this has been pointed up by many as an excuse for giving the drug. But in a democracy such as ours, every life is worth a great deal and the individual who does get this disease, aplastic anemia, is more apt to die than not, and, therefore, it seems to me that, even though the reactions are very few, the lives that are lost from this drug, whether they are 100 or 200 a year in this country—I do not know the statistics—those are well worth saving and since the great majority of drug reactions have occurred in the past in response to the use of the drug for minor infections, I think we could save some lives, and each life is worth a lot and when the person does develop aplastic anemia, it is a poor comfort to that individual to say, well, 10,000 people took the drug and only you got it.

Senator NELSON. Well, of course, if it is a case where it should not have been prescribed in the first place——

Dr. DAMESHEK. Well, it makes it all the more binding, all the more upsetting. When lives are to be placed in jeopardy, every precaution however frustrating, is desirable.

Well, that is the end of my statement and I——

Senator NELSON. Doctor, we appreciate very much your thoughtful statement. I have a few questions I would like to ask.

You, as well as a number of other experts in the field, have recited cases of serious side effects occurring in patients who should not have received the drug in the first place. It has been estimated by some that approximately 3,700,000 people in this country are given chloramphenicol annually for one reason or another. Considering the restrictions under which you and many other experts believe the drug ought to be administered, do you have an educated guess as to how many people legitimately should be receiving chloramphenicol in their treatment annually?

Dr. DAMESHEK. No. I think Dr. Best probably has some statistics.