

also medical research and the teaching of medical students, interns, and residents. Much of my research has been directed to ward clinical and laboratory studies in leukemia, pernicious anemia, and other blood diseases. I have been author or coauthor of more than 100 scientific publications, including articles in journals, chapters in books, and abstracts of presentations for professional meetings. In recent years my research interests have turned from hematologic topics toward the applications of statistics, mathematics, and computers to general medical research and practice. In keeping with these changing interests, on August 1, 1967, I became chief of the Midwest Research Support Center at Hines, Ill., one of four such regional centers established by the Veterans' Administration to offer consultation and support in experimental design, computer analysis and related areas to any medical investigator affiliated with the VA system. I have retained my appointment as associate professor of medicine at the University of Illinois on a nonsalaried basis. I have given up a partial consulting practice in hematology which I had up to that time.

Because of my dual interest in biostatistics as well as hematology, I was asked several years ago to become a member of the study group on drug-associated blood dyscrasias of the American Medical Association Council on Drugs, a group of volunteer hematologists. This group was concerned with the inferences which might reasonably be drawn from data submitted by diverse physicians to the previously mentioned registry. During my period of membership with this group, 1961-67, I played a major role in attempting to analyze and interpret various types of data which had been submitted to the registry. A principal study in this regard, prepared at the request of the study group, culminated in an article entitled "Chloramphenicol-Associated Blood Dyscrasias," published in the *Journal of American Medical Association*, volume 201, pages 181 through 188, July 17, 1967. I have a copy here and I believe that copies have been distributed to those present.

Senator NELSON. That is the one entitled "Chloramphenicol-Associated Blood Dyscrasias"?

Dr. BEST. That is correct.

Senator NELSON. That will be printed at the conclusion of your testimony in the record.¹

Dr. BEST. Fine. Much of what I shall say here will be based on that study of 408 patients who developed blood cell depression within 1 year of receiving this drug and who were reported to the registry during the years 1963 through 1964.

Senator NELSON. What was the source of these reports to the registry?

Dr. BEST. These are cases that are voluntarily submitted by physicians. The registry went through several phases. At the beginning there was a limited group of hematologists, about 50 over the country, who knew about the registry and who were contributing the cases they saw to it. After a period of time it was opened up and the attempt was made to get all physicians who would see a case to report it to the registry.

¹ See article, p. 2433, *infra*.