no right on the part of anybody in any profession to act contrary to all authority.

Now, how it has come about I suppose is a very complicated business—history, advertising, busy physicians, all kinds of things.

But the fact is that innocent people are dying from chloromycetin, and a whole lot more I suspect than is indicated in any statistics I have ever seen—to say nothing about those hidden thousands of cases who are just ill the rest of their lives, but do not die.

Now, I think that if a profession fails in its responsibility, some-

body has to do something about it.

Dr. Goddard. Sir, I believe we have some creative ideas that we are

going to implement.

Now, I have already said that I am sure you will, after hearing these ideas, have reservations about how effective they can be. I have also suggested something to you this morning which has never been looked at before—that is the question of getting the Joint Commission on Accreditation into this. And they are a very powerful organization.

Now, perhaps through the combination of the things I am going to suggest to you, the suggestions I have already made, and the careful attention to this on a continuing basis, we can reverse a trend that is not only unfortunate, but unprecedented in the practice of medicine—and take the steps that will be needed to reduce the usage of this drug to a proper level.

Now, that is all I can suggest short of a significant legislative change. Senator Nelson. I think after all these years there ought to be a

significant change whether it is legislative or otherwise.

Now, you are going to receive a monthly report, I understand, of

how many grams are being marketed.

Suppose 1 year from now there are still 4 million people getting it who should not. What do you say then? Do you say we still go on killing people, but we do not want to interfere with anybody's right to prescribe this drug? Do we require the inconvenience of a few people having to go to the hospital annually who otherwise would not go?

What do we do a year from now?

That will make 19 years.

Dr. Goddard. Well, I would hope, Senator, that we would continue exploring these ideas with other segments of the medical community that are involved, and then reach a decision as to whether or not change was needed beyond what I can suggest based on our present legislative authorities. I cannot presume to speak for the medical profession of this country. I can only reflect the authorities that Congress has provided us, and take steps that we as an agency feel are enforceable—ones that will contribute hopefully to the solution of the problem. Beyond that, I have only suggested to you some additional steps that you might take. And I have viewed these hearings as a very healthy start at tackling this problem, Senator. And I share with you your concern that in spite of these steps I have mentioned we might very well not solve this problem in the next year.

Senator Nelson. One of the ideas that has been suggested here, which is worth exploring, it seems to me—I have no intention of interfering with the discretion of the medical profession. It is a great profession. But it would not be an interference, it seems to me, if we