detail man in showing—in explaining his product to the prescriber, and the sales material, if we can get ahold of it, that is used within the company in educating the detail man, the bulletins, the training bulletins, and training things of that kind.

This investigation has just started and will be pursued until we get enough information on this important aspect of drug promotion to have some judgments on it. And this is where we are at the moment.

Dr. LEE. We really don't know enough at the moment, Mr. Chairman—and I think that you have really highlighted this area as a singularly important one. It is one where we will be attempting to get the kind of information that is necessary to make wise and sound judgments.

Senator NELSON. You don't have any notion of when that aspect of your task force study will be completed?

Dr. LEE. This is not a task force function, this is a responsibility of the Food and Drug Administration, and it is an ongoing responsibility.

Senator NELSON. And the remaining investigation of this specific point now?

Dr. LEE. Yes, sir.

Senator NELSON. I had just one more question. The minority counsel raised the question about the testing of drugs by the FDA. It occurred to me that you might have been thinking of the program launched by Dr. Goddard to take a certain number of commonly prescribed drugs and work up a comparison of equivalency among the various compounds—the various makes of the same drug. Is that program proceeding now? What is the status of it?

Dr. LEE. Dr. Silverman, do you want to describe the current status?

Dr. SILVERMAN. I think, Senator, that it might clarify the situation if I could throw a few dimensions of this ball game into the testimony.

There has been a good deal of discussion, sir, about the magnitude of this problem, with the possibility that many hundreds or thousands of drugs would have to be tested, and that this would be beyond the present or possibly the future potentialities of the Government. The actual situation is far from this, sir. I think I can illustrate this best by indicating the actual number of drugs that might require testing. We have looked at this very carefully in terms of the drugs which are now used by the elderly. We have studied the top 400-odd, and with very minor exceptions, these would probably apply to the population at large.

Senator NELSON. When you say hundreds, are you talking about 400 different——

Dr. SILVERMAN. Drug entities, which may represent many times this number of products.

Of these, approximately 70 percent or more are still under patent. There are no generic equivalents legally on the market. Of the other 30 percent, a number have chemical or physical characteristics which would make them seem less essential for testing.

Here we have set up our own series of priorities. We have taken those drugs which in the first place are, in our terminology, critical drugs, involved at least potentially in lifesaving situations or in the control of seriously diseased conditions.

Among those, we have taken those which are in solid form, tablets and capsules, and the general feelings based on the state of the art is