In many of the Nation's leading hospitals, when expert physicians have served on pharmacy and therapeutics committees to select the drugs needed for both inpatient and outpatient therapy, they have generally found many if not most of these duplicative drugs and combinations to be unnecessary. These products have been found generally unnecessary by physicians providing medical care to the armed forces. They have been found generally unnecessary by leading clinical pharmacologists.

If these items were offered at prices substantially lower than the products they duplicate, they would provide at least an economic advantage, but in most instances they are introduced at the same or even higher prices.

The development of such duplicative drugs or combination products cannot be considered an inexpensive fringe benefit. Each requires laboratory research, clinical trials, and the accumulation of sufficient data to demonstrate to the Food and Drug Administration that the new product—although it may not represent any significant therapeutic advance—is at least safe and efficacious.