Dr. ALFANO. I know, but when you do use it as a lifesaving drug, you have nothing else to use. This is it.

Senator NELSON. As you probably know, the National Academy of Sciences has said it is not the drug of choice for any case. But indications have been that it is only to be used if the disease is serious, if no other drug will do the job, and only if the disease will respond, the organism causing the disease will respond to this drug. But that is not the way it has been used.

The AMA itself is aware that 90 percent of the people are getting it for nonindicated cases and they still accept big drug ads promoting the drug. You would think the AMA would require them to put a big box in the ad saying, "This is being widely misprescribed," that they would run headline stories saying, "Doctors are misprescribing this drug and killing people with it"—would you not? Or else refuse to take the ads on the ground that the promotion has resulted in the misuse of the drug. What's the answer there?

Dr. ALFANO. I don't believe they have substantiated these claims by individuals and when they have, the medical profession will do something. I don't believe they have gotten it down to that, that only 10 percent of the cases are prescribed right. This has not been proved.

Senator NELSON. That is true.

Dr. ALFANO. I am not aware that the medical profession is—but it should be working toward that end—coming up with the facts as far as they can to determine which way they should act concerning certain drugs.

Senator NELSON. Five of our witnesses, doctors, stated that it was their guess, their best guess, that it was about this way, based upon what they have seen, each of them having a wide experience with the drug.

Dr. ALFANO. No, Dr. Dameshek; he is a hematologist. He would have the end result of a complication, not a wide use of that particular drug in his patients. I do not believe he would use it at all.

Senator NELSON. When he sees a patient and 90 percent of them got the drug for nonindicated cases——

Dr. ALFANO. That is retrospect, also. There is another problem in there. Looking back, you can get 10 doctors, a hundred doctors, you will not find they all agree 100 percent as to the course of treatment, type of drugs. Medicine has considerable variation in treatment and methods of treatment. You can have experts all disagreeing.

Senator NELSON. That is correct. But when you get one of them testifying that in every death he had seen from aplastic anemia, not a single patient had received it for an indicated case—if you see all five of them testify along the same line, so they conclude as they look at people with aplastic anemia that if nine out of 10 of them are getting it for a nonindicated case, that might give you a pretty good guess that where nine out of 10 people did get it for a nonindicated case, they just didn't get aplastic anemia.

Dr. ALFANO. No, I would not say you can project it that way on just a small sampling of indications. At least, I would not accept it that way.

Senator NELSON. Please go ahead.

Dr. ALFANO. Awareness of the name of a manufacturer by the physician and indeed by the patient is in the best interests of the public. The manufacturer must produce a drug of the highest quality