maintain close cooperation with the drug companies—I would not deny that 1 single minute, because we are dependent upon drug companies in a great way for the development of new products and for the refinement of products—yet we are totally independent in our opinion and decision as to how effective those products are.

Senator NELSON. I wasn't suggesting that at medical conferences the profession did not call upon its most distinguished members to present the best possible papers on all aspects of medicine. I don't suppose you could find experts who would be willing to say anything other than what they believed in at these conferences, and I could not expect that anyone in the profession would think that any other presentation ought to be made in medical conferences. I was raising the question as to what the publications themselves really say about practices in the industry. For example, what kind of prominence did your publication give to the FDA findings on 4,600 drugs in which the generic came out better in terms of potency than brand names?

Dr. ROSENOW. May I try to clarify a little bit how this operates. If a physician or a clinical investigator interested in that report would send to our journal an article that he wanted to put in here about that, then our editors would do this.

Now, sometimes our editors look for these things themselves, and would write an editorial about this. I am quite sure that in this particular instance this was not done. And we do not have a mechanism where we screen every single release that comes out from the Food and Drug or from any of these other agencies. But our editors would not hesitate to put this in if they felt and their editorial staff felt that this was important information for our members to get.

Senator NELSON. The point I am making is that the argument—that you must rely upon brand names, that you cannot trust generics, that generics are not as good as brand names—that that argument is widely spread to all the medical journals in this country, it is advertised and widely spread to physicians in promotion. And here comes a study that is a significant one, it is a very significant study by the FDA of great importance to the medical profession. My point is—I have not looked at your journal, you may have run something, I am not addressing myself specially to your journal on this question—but this finding was rather massively ignored so far as I was able to determine. And all I am saying is that if you have this kind of relationship, don't you end up, because of the closeness of such a relationship, as a matter of human nature, muting the criticism of the independent industry whose relationship is so close? It seems to me that through years and years and an expenditure of millions of dollars, that doctors have been convinced, as Dr. Pollard said in the beginning of his statement, that they can rely upon the consistency and the potency of the brand name more than the generic, that all the journals ought to have a positive moral responsibility to run big editorials saying, it has been found that the claim made by the brand name people does not stand up.

Now, if it were a separate, completely separate situation—for example, when we introduced the legislation involving tire safety, a number of journals hit the issue real hard with editorials, big stories about the tires being put out by the automobile manufacturers. It is a shocking story, they ran it big, but they are not relying upon their support from the independent industry. But here is a case where