industry and the medical profession. And I just wonder how vigorous anybody can be in raising this kind of an issue when the relationship is so close. I do not know of any circumstance in human relations where the relationship is close financially and socially or otherwise in which the parties are inclined to be as vigorous in their criticism of each other as they are if there is no relationship. It is just in the nature of the human animal. And I think it will always be so. This is one of the questions we are raising. When the drug industry makes such a major point of this lack of equivalency between generic and brand names, they have been able apparently for one reason or anotherthe reason I think is that the relationship is too close—for one reason or another they get by without having the major authoritative inspective body in this country, the American physicians, and their journals and their spokesman, rising up and saying, they have been pushing this phony propaganda for 20 years. And now we find a study which shows that they have been fibbing to us. I would think that this would be a major, important point right off the bat. The whole profession ought to be told that they have been living by a propaganda pitch which the drug industry has promoted for years, and here is an answer to it. Why not?

Now, I say that the inclination is to draw the conclusion that the relationship is so close that criticism by the profession of the industry has not occurred in the past and will not occur in the future. Individuals, yes, we have had them before the committee. But that is the

problem that this relationship raises, I think.
Dr. Pollard. Senator, if I interpret your point, it is whether or not generic versus trade names is the answer to the whole drug prob-

lem. And I am not sure that even you believe that.

Senator Nelson. I am not saying that is the answer to the whole drug problem, I am just saying that the assertion has been made for years by the drug manufacturers—and now here is a scientific report of major consequence which refutes the claims that have been made for years by the brand-name companies. And the general profession is

quite silent about the matter.

Dr. Pollard. Let us interpret that with a little bit of caution. Because this comment that the profession has said nothing about it, I will still go back to the point that I made, that where we spend our time in the medical profession is evaluating drugs and reporting upon their complications in our scientific meetings. Now, perhaps we have not touched on generic versus trade name as the key to the whole drug problem. And I still think what we have attempted to do is to keep the doctor educated about his drugs, what they are, and what their applications are in a very fair and open way. And that is where we have been beating our drums, as it were. And maybe we have not made a great issue about the brand name versus the trade name. Frankly, I do not think we have any strong feelings about it one way or the other. There probably are other studies that would take generical named drugs, make studies of them and find disturbances there. Just because one chooses one or the other I do not think necessarily will resolve the whole drug problem. It may help it, but I do not think it will resolve it. And I think what the medical profession is after, what we in the college of physicians prefer, is that the physician be left to make his own choice.