

Senator NELSON. This is in place of the figure \$41?

Dr. SHAPIRO. Yes, sir.

Senator NELSON. And when you say family doctor, are you talking about all family doctors in the country?

Dr. SHAPIRO. Yes, sir.

Senator NELSON. What is the total of the family doctors by that mathematics?

Dr. SHAPIRO. 68,000.

Senator NELSON. And your publications go to about 40,000 of those?

Dr. SHAPIRO. No, sir. We cover them all. GP goes to 32,000 and the American Family Physician goes to the remainder.

Senator NELSON. There is no duplication?

Dr. SHAPIRO. No, sir.

With this \$18, what can we do for the individual doctor? We can deliver, to the door of his office or his home, about 84 original scientific articles and 240 well-edited abstracts. We can also tell him about the government medical programs and about hundreds of postgraduate study programs. In short, we can provide him with more useful information than we could if we sent him a first-class letter every day. We think it is \$18 well spent—by both the Academy and the pharmaceutical industry.

Allow me to touch on another point which involves liaison between the Academy and the pharmaceutical industry. In January, we started publishing a six-installment course on the "Diagnosis of Diabetes." The course was programed to our specifications by a firm in New York City. However, it was made possible by a no-strings grant from the Upjohn Co.

What does Upjohn get for its money? A small credit line, a letter of appreciation, hopefully some satisfaction—and that is about all. Please note that the course is concerned only with the diagnosis of diabetes—not the treatment of diabetes.

Senator NELSON. May I ask a question at this point?

Dr. SHAPIRO. Yes.

Senator NELSON. What would your view be of the reason for Upjohn sponsoring such a program if there is not any credit in doing that?

Dr. SHAPIRO. As an important cog in the health team, the pharmaceutical industry feels that this is necessary. They are totally involved in continuing education.

Senator NELSON. The only question I would raise—and I do not say that there are no public spirited people in all industries, I am sure there are—but tolbutamide is Orinase, is it not?

Dr. SHAPIRO. Yes, sir.

Senator NELSON. And that is the only drug of its kind in the marketplace, is it not? There is no other tolbutamide but Orinase?

Dr. SHAPIRO. Not to my mind.

Senator NELSON. So would it be fair to say that there is a benefit in the promotion of their drug Orinase?

Dr. SHAPIRO. There would be an indirect long-range benefit to them as well as to all other manufacturers of oral antidiabetic drugs, or insulin. Basically we are hopefully uncovering unfound diabetics who must be treated, not necessarily by Upjohn's product.

Senator NELSON. I know. But Orinase is the only tolbutamide in the market, and it is under patent, and it is only made by Upjohn.