Dr. Shapiro. No, sir; we do not ignore it. I mentioned earlier our section on practical therapeutics which is serving for drug therapy education to our readers, and which is written by medical faculty members. And they may be laudatory or they may be critical. And we do not have editorial privilege on these, we print them. And we have many critical practical therapeutics articles.

Second, the advertising we are carrying is not only the business aspect of what a corporation is selling, but it is a service to our members to bring them more detailed information than they may have on a visit from a detail man, if you will, or present some use of a drug in an article where the actual total insert is not printed. So we are using this

as a service to our members.

Senator Nelson. But the point raised in this one, Doctor. President Richard Furlaud of Squibb made a presentation to the committee in defense of the system of dual prices under which a medicine prescribed by brand name can be very expensive, but prescribed under its generic or chemical name can be quite inexpensive. On this economic issue—which is critically important, the point is critically important to the manufacturers—your publication gives them four and one-half glossy pages. Have you ever run four and a half glossy pages on what they charge overseas and what they do at the Defense Supply Agency, and how they offered to sell at one-tenth, one-twentieth the price to Defense Supply in competitive bidding versus what they are charging the pharmacies where the doctor's patient goes? If you can run Furlaud's stuff, why not the other?

Dr. Shapiro. I have asked Mr. Kemp—it seems to me that we did run something on Defense Supply prices, but I cannot be certain. Editorially I would state that our editorial staff could easily work up such a presentation. And I would be most happy to bring this up before the board of directors and see if we will direct them to do so.

Senator Nelson. I think that would be laudable. But the point I am making is that this pattern of treatment of the drug industry is the same throughout, roughly the same throughout all the publications, the medical journals, and the medical press. And that is a historical fact right up to this day. That certainly leaves unresolved the question of the effect of the close relationship. I do not think anybody has suggested that they are directing, or dictating. It is just the question of—if I have just like you—a good personal friend, and he has some faults, they "ain't" half as bad as the same faults in someone I don't like. And if I am economically dependent upon somebody—that is human nature—I am not as critical of the person I am economically dependent upon as I am of one I am not dependent upon. I think that that is recognized universally among human beings, and that is why you have independent audits in Government and in industry, the board of directors is not permitted by the stockholders to audit their own books, because they are pretty friendly to each other, and the errors and mistakes would not be exposed. And in exposing what is wrong in Government, if you left it up to the Congress or the Legislature to tell the country what is wrong with what they are doing, you would never hear about it. Because there is a special interest in not exposing what is wrong. It strikes me that this is the kind of case this presents. When you look at what happens editorially and in the news within the journals themselves, that kind of picture shows up, does it not?