just like food; they come in the same category. We have an industry that makes drugs that is given special privilege, being permitted to call a commodity by a name which it really should not have (an alias). An alias is meant to be deceptive or to conceal identify. This is what a brand name does to a drug.

For instance, recently there has been considerable discussion about Panalba. The Journal of the American Medical Association has an advertisement on the back cover. If I were a psychiatrist and not dealing with infectious diseases—we do have infections in surgery—I would not know what Panalba is. Many physicians have no idea what is in Panalba. Yet here is a name appearing in the advertising on the back of the leading medical journal.

Now, the only persons that can do it—there is no scientific group that can do what I am going to propose—is Government. For instance, in medicine we can police ourselves. In the hospital we have a Tissue Committee. If a doctor does unnecessary surgery we can call him and say, "a normal appendix is reported by the pathologist. Explain why you took out a normal appendix." And he has to give a written explanation.

So as physicians we can police ourselves in many ways. But getting rid of brand names is something we cannot do. Now, if you get rid of all brand names and use the generic name, in large type on a bottle, and put underneath it the name of the company that makes it, and if they have a trade name and they want to use it to put that in parentheses in fine print, this is fine. This would not inhibit a physician from prescribing a commodity that the patient should have, nor will it forbid the physician from specifying a particular manufacturer. For instances, if you go to a supermarket and you want tomato soup you can buy Campbell's, you can buy Heinz', you can buy Van Camp's—these are some of the brands. I do not shop any more. I used to. But when I was a boy we had a grocery store, and I remember these brand names. But tomato soup is tomato soup. You can pick your brand. If the Government would decree (drugs are so vital to the health of the Nation) that from now on drugs should be called by their given names, the names that really belong to them and by nothing else—this will not hamper the physican at all. He can still practice the way he wants to. If he has confidence in a particular pharmaceutical firm he can specify that pharmaceutical firm's product. There are certain people that prefer products of one firm over those of another.

For instance, in my own field we buy ether. Ether is made by several firms—Mallinckrodt, Squibb—I don't know whether Merck is still marketing ether, but they did have it—Squibb has labelled across the front of the can "Copper plated." When you seal the can the copper absorbs the oxygen preferentially. No oxygen left in the ether. Some air dissolves in the ether and is sealed in the can. The oxygen is not there to act on the ether, and the ether is preserved. So copper is actually a stabilizer. For that reason, I preferred Squibb's ether. When we open a can we do not have to use it all. We used part of it and then discard it. Since then other firms have found other ways of handling this problem. But I sort of got used to Squibb's ether, because of the copper plating and I prefer it. If I went to an institution