

Another Saturday afternoon—

Senator LONG. Doctor, let's just get that straight. At that particular time we must have had to evacuate about 20,000 people, right?

Dr. ADRIANI. Easily, if not more, because the evacuation went on for 3 or 4 days after the hurricane.

Senator LONG. And as you said, a great number of these people had to be pulled out of the water.

Dr. ADRIANI. That is right.

Senator LONG. So here they were taking certain medicines which they needed to take. But with this fraud of not permitting the patient to know what he is taking, and this trade name fiasco, these people did not know what medicine they were taking. They needed it but they didn't know what it was. And you were in no position to find out what it was that they needed, is that right?

Dr. ADRIANI. That is right.

Senator LONG. Now, if we found ourselves at war and had a bomb hit or another Hurricane Betsy, or something of that sort, we would have the same problem all over again, wouldn't we?

Dr. ADRIANI. We sure would.

Senator LONG. And so the patient needs medicine, without it he may be in serious difficulty, might even die, and yet you can't find out what it is because of this farce, this hocus-pocus, this shell game that prevents the patient from knowing what medicine he is taking?

Dr. ADRIANI. I will give you another example. One Saturday afternoon I was in the hospital. A patient was brought in from Raceland with 10 bottles of different colored pills with the name of the doctor but with no identification of the pills. The doctor took out his PDR, and tried to identify them by the pictures in the book. I said, "Call the doctor or the pharmacist to find out and you will know exactly what they are from the number on the prescriptions."

Now, if those medicines had been labeled he would not have been put to that trouble—I may say this, also the (AMA) Council on Drugs when I first joined it, strongly urged that labeling be applied to all prescriptions doled out to a patient. I make this recommendation in my prepared statement—so the patient knows what he is getting. You know, years ago doctors had few drugs and did not know what to use. They used herbs and that sort of thing, and resorted to hocus pocus medicine. Today, we have specific remedies with specific actions. And today patients know about these; they can read, they are not morons.

The opponents of labeling say they will use the pills again at a later date or give them to friends. This is a lot of nonsense. I am not going to use a pill if it has been on the shelf for a couple of months, because one is not sure of its efficacy.

I had some erythromycin which I carried around in a suitcase. I didn't know that the label had expired. I was advised to take it, but the infection that I had was not going away. I ran out and got a fresh supply. And right away the infection subsided. So there ought to be an expiration date on drugs. There ought to be expiration dates also on the containers given to patients.

You cannot give too much information to a doctor, to a patient, to the family when you prescribe something. You just cannot do it.