The recommendations that we make are based on data. I have personally read these studies, and the argument they gave, and the references, and so on. And I have had access to them. Other council members may have not. But most of them are more informed than I am. And they are familiar with them. A mixture is not good. You are exposing a patient to something that he may not need. These are not innocuous drugs by any means (the antibiotics).

Mr. DUFFY. I think we understand the arguments, Doctor. I am just trying to understand the foundation for the statement.

May I ask you just one other question. I think your statement was that you were aware of the documentary evidence and material that was used in arriving at this conclusion. In your opinion does your council's endorsement of this material give it any greater weight?

Dr. ADRIANI. I don't quite understand you.

Mr. DUFFY. Does the fact that your council may have read this material briefly, and agreed with it, make it any more valid than the actual research?

Dr. ADRIANI. You mean if we had access to the material to study it? I do not believe it really would. I think they would come to the same conclusion that I have come to in reviewing these. We are reiterating the general premise is that all of the fixed combinations are irrational. Even something like this (referring to bottle of APC's) is not rational—there are some combinations that are here and have been here for a long time. You could leave out phenacetin. And a lot of people are just given that without the aspirin. This is a combination that somehow got into general use. And once something has gotten into general use it is hard to stop it. And it has just gone right on. The combination has been with us a long time.

If you look at the National Formulary they have one that is called Alkaline mouthwash. It is just as good as the mouthwashes you buy for a dollar and a quarter. The council reiterated its previous statement, the standard they have had, that the AMA does not review or include in its monographs of new drugs, in its reference books any combinations of drugs. And they further go on the premise that mixing antibiotics is a hazardous thing, because these drugs are more dangerous in many ways than other drug combinations.

Mr. DUFFY. Thank you, Doctor.

Senator NELSON. Just to pursue that for a moment, do any of the members of your Drug Council serve on any of the five antibiotic panels?

Dr. ADRIANI. The membership of those panels is secret, with the exception of the chairman. And I don't know whether they do or not. They have not revealed their identity.

Senator NELSON. They will be published?

Dr. ADRIANI. They will be published? We probably will find some council members on there. I am pretty sure that some council members have served because you will find that members of the council serve other committees they have been on the USP and N.F. and other groups. As a matter of fact, I was on the USP long before I got on the council on drugs.

Senator NELSON. To put this in proper perspective, isn't this the situation. The drug council came to the conclusion many years ago that fixed ratio combinations were not efficacious, and that it was irrational to prescribe them, is that right?