

Dr. ADRIANI. Yes. The doctors can do it themselves, because we always say, if you don't do it, then somebody else is going to do it for you. Some policing is important, and the medical profession can do it.

Senator LONG. Just what local level do you mean, the State level or the city level?

Dr. ADRIANI. Right down at the hospital itself. At Charity, we have a pharmacy committee. We have this drug list book. We update this book periodically.

Senator LONG. But take that hospital on the north shore of Lake Pontchartrain, they don't have many doctors, and they don't have a large staff, just a few people there. Are they in a position to do that same thing, or would it be better to have somebody do it for them?

For example, I don't know how many doctors they would have at that Covington Hospital, but it couldn't be very many. What would you recommend for St. Tammany Parish?

Dr. ADRIANI. You see, there is a commission called the Joint Commission for the Accreditation of Hospitals. Everybody wants to be approved by the joint commission. You have to be approved if you want to collect medicare money. And that "green stuff" talks. In order to be approved you have to have a pharmacy committee. If they would make these committees more active, as I say in my statement, then they could police drug utilization in a hospital better.

One of the things that ought to be brought out again is about the overuse of chloramphenicol. You can find out from the pharmacist that Dr. Blank is using five times as much chloramphenicol as someone else. You can call him in and say, what are you using this for?

The pharmacist called me one day and said, "You know, we used \$3,000 worth of plasmanate this month." This is a product made from plasma, where it has been pasteurized.

We checked and we found that three resident doctors on the surgery service had used all this. I called them and said, "You are overusing this product and have to have an OK from me every time you want it."

And so we stopped its overuse. This policing can be done at the local hospital level, and at the county society level.

I make a statement that I don't think any doctor should own any stock in a pharmacy or a pharmaceutical house. This is a conflict of interest. When I signed up as a consultant for the FDA I had to submit a list of the stocks I owned, and swear that I did not own any stock in any pharmaceutical firm.

Senator LONG. In other words, the doctor ought to be in a position where he has no financial advantage in giving one product over another product?

Dr. ADRIANI. Absolutely.

Senator LONG. So he ought to be in a position like that of Caesar's wife, where he is totally above suspicion, whether he is giving you one firm's drugs or the other firm's drugs?

Dr. ADRIANI. When you go down to buy a suit, you can buy whatever brand suit you want. You are buying the suit and make the decision. If I give you a prescription to buy a drug you need I make the decision; you are paying for the drug. And if I say, "Use Squibb's," or some other firm's product then I am making a decision as to whose product you