I just wish every doctor had the same bias you have for the patient. And I think when they have reviewed your statement you will find a lot more who will share the same bias.

Dr. ADRIANI. I hope so, Senator. This is a very important problem. A patient will come to Charity, and we will give him a prescription. He does not have the money to buy what we prescribe. I remember one poor elevator operator, who was given a prescription for Orinase. It cost $14. The man was getting $200 a month and could not afford to buy it. I got Social Service to take care of it. They had been given some by Upjohn, a supply to give away.

I am a member of the Greater Cancer Association of New Orleans. We have a $12,000 fund to buy drugs for cancer patients. And one of the things that we have not worked out is a system of out-of-the-hospital provisions for drugs for patients. When you get them in the hospital, fine, you can give them all the drugs you want. But outside there is no provision made for them. And this is where a lot of these samples go. And it should not be that way. There should be some better system. One of the points in the Prescription Drug Task Force Report is how to implement this.

I do not know. I talked with Dr. Young, Commissioner Bonin's assistant. He says, "Louisiana will spend a million dollars a month on drugs for just on a handful of welfare patients." And that is a lot of money, $12 million a year for drugs, let alone other things.

Senator LONG. It is an outrage to make the poor people pay 10 or 20 times more than is necessary. And it is equally an outrage to put taxes on me or any of our other citizens to pay 10 or 20 times too much.

I can recall when I was a young lawyer practicing down at Baton Rouge, La., and a member of the junior chamber of commerce—or Lions Club. And we would get out there on the street corner and pretend we were Santa Claus, and help poor people pay medical bills, or fight cancer, and things of that sort.

But it is disgusting, when you take the Santa Claus costume off, to see some fellows getting rich stealing about half of that money when it was supposed to be for the benefit of the poor.

Serving humanity ought to apply to drug manufacturers just like everybody else. I want them to make a profit. And I think they do make a profit. I want them to make a good, honest, fair profit, no less than the average for all manufacturing by any means.

But the idea of letting them engage in practices to victimize the public which no other industry is permitted to do is pretty ridiculous.

Dr. ADRIANI. They are granted special privileges by allowing use of brand names. No other industry is allowed to do this. You call an automobile an automobile. You call a suit a suit. You don't give it a phony name. But when you buy a drug, then you get something like Panalba—I happen to be dwelling on that all the time—or Neosynephrine. You will have to get after these people and stop this.

The public should be told of the ill effects, and they should not be allowed to have misleading advertising in newspapers, TV, and magazines.

There is nothing that Commissioner Ley can do. As I said before, he is "hard up" for help. Where are you going to employ a doctor for $19,500, except some fellow that is too old to work, or is sick, or is a drug addict, or has other problems.