medical care, including medication, insures that every person will get what he needs at a reasonable price. If free samples are needed at all it is a sign that something is wrong.

4. Pharmaceutical companies should undertake a serious reconsideration of their promotional strategy. They should cease or drastically reduce published advertising and reflect the savings in lower drug prices. A year of drug advertising costs more than it would to send every doctor in the country to a year of medical school. Both the medical and legal professions prohibit advertising because they realize that it would interfere with their function of serving the public interest but also I believe because they realize that in the longrun the profession as a whole had nothing to gain. The drug industry is not the only one which ought to consider this example.

These suggestions could be put into effect by the medical profession and the industry without any legislation.

I am really convinced that the AMA could effect these modest recommendations with no difficulty at all.

One hopes that they will be receptive to changes. This committee has done a service by providing all points of view with the chance to be expressed.

Thank you.

Senator NELSON. Thank you very much for your excellent presentation, Doctor.

(The complete prepared statement and exhibits submitted by Dr. Pillard follow:)

STATEMENT OF DR. RICHARD C. PILLARD, ASSISTANT PROFESSOR OF PSYCHIATRY, BOSTON UNIVERSITY SCHOOL OF MEDICINE

My name is Richard C. Pillard. I am a physician, assistant professor of psychiatry at Boston University School of Medicine and head of the Basic Studies Unit of the Psychopharmacology Laboratory there. I am also the recipient of an NIMH Research Scientist Development Award.

As a researcher, teacher and practitioner of psychiatry I am concerned about advertising claims which are being made for psychotropic drugs. These advertisements appear in medical journals and in the free "throwaway" magazines which are sent to physicians. Most of them exaggerate the efficacy of the drug, extend its indications, or distort the evidence upon which its use is based. Almost none are properly balanced in the sense that the advantages of the drug are proclaimed while its limitations and side effects are minimized or not mentioned at all except in the package circular information required by law. More than this, I am concerned about the general effect which psychotropic drug advertising has on the prescribing habits of the psychiatrist and on the way he thinks about his patients.

Before elaborating these concerns I want to pay a tribute to the pharmaceutical industry. The field of psychopharmacology is only 15 years old but has already made an impressive contribution to the recovery of mentally ill people. This would, of course, never have been possible without the variety of high quality psychotropic drugs which are available thanks to the drug industry. I hope that my testimony will help to promote further achievement and not be considered an attack or a derogation of their accomplishments.

ANTIPSYCHOTICS

The most important psychotropic drugs are the phenothiazine chemical family, used in the treatment of schizophrenia. These are unquestionably effective and are, along with reserpine and the butyrophenones, the only treatments of proved value in this illness. There are approximately 17 phenothiazines currently manufactured most of which are heavily promoted because the market for them is very