But we have no regular system for the whole population. We have no good examination of children. The examination for the draft is simply for purposes of rejection and if people are found to be ill all we do with them is to turn them away. The only defects that we remedy are ones that occur within those who are drafted or who enlist for the Armed Services. Of course, there are some industries that take this kind of responsibility.

Of course, we need to check up on the use of drugs. We need a periodic checkup; we need ways in which we could register, which again could be done now electronically. Somebody was put on this particular drug on May 9, 1969. Automatically, say May 9, 1970, these people will come up the way, you know, a well behaved dentist sends

you a little note saying "6 months since I saw you."

But we can't expect this to be done with the existing medical facilities in this country without help, because the average practitioner is too busy and harassed and he has no way of getting at the information and he doesn't know which drugs you ought to watch for a follow-up and which you ought not. That is one side, that is one answer to your question.

The other answer to your question is I would want to be convinced that it did him any harm to take this drug that he was taking for years. There are many people who have taken perfectly useless drugs all their lives, the drugs have kept them nice and well because they believed

in them.

Now, if one could demonstrate that the drug itself was bad for one biochemically or inordinately expensive and therefore making a drain on one's budget, I think one can make a case. There are people who believe when they get up in the morning they need a cup of coffee. There are large numbers of people who believe they simply cannot function, they can't think, they can't act without that coffee. Now, there is no proof whatsoever that one cup of coffee supplies all that energy and considerable organization. Would you take that cup of coffee away from them? They also believe after they have drunk that cup of coffee they are alert, bright-eyed and bushytailed and ready to deal with the world? Now do you want to take these away from people? I don't see any reason for taking them away merely because there is what we call psychological dependence. If there is an addictive dependence which means you have to continually raise the dose and if you get biochemical addiction, this is a different problem but looking at the psychotropic drugs this potential addiction is true of some and not others.

(The complete prepared statement of Dr. Mead follows:)

EXCERPTS FROM THE TESTIMONY OF MARGARET MEAD, CURATOR EMERITUS OF ETHNOLOGY AT THE AMERICAN MUSEUM OF NATURAL HISTORY AND ADJUNCT PROFESSOR OF ANTHROPOLOGY AT COLUMBIA UNIVERSITY

My credentials for discussing this subject are: I am an anthropologist who has concerned herself with the relationship between culture and practice, in the fields of technological change, nutrition, medicine, specifically, nursing, psychiatry and community mental health. Institutionally, I am Curator Emeritus of Ethnology, in The American Museum of Natural History, Adjunct Professor of Anthropology at Columbia University, and Chairman of the Department of Social Science in Fordham University new liberal arts college at Lincoln Center. I have been for several years, Visiting Professor Anthropology in the