Mr. DUFFY. I am just curious if you know of any schools where this is not the policy.

Mr. MARTIN. Well, of the 26 medical schools that we have complete information on, not one.

Mr. DUFFY. Not one in 26?

Mr. MARTIN. Not one of the 26.

Mr. DUFFY. How many medical schools are there——

Senator NELSON. What about that 26? I did not understand your answer.

Mr. MARTIN. Of the hundred medical schools, or 98 at this time; we have done an in-depth survey on 26 to find out what the extent is. Those 26 all have to have administration of approval before distribution.

Senator NELSON. The rest do not?

Mr. MARTIN. Well, the rest we do not know.

Senator NELSON. I see.

Mr. MARTIN. I would assume it is a very high percentage. I mean the first 26 we know about are a hundred percent.

Mr. DUFFY. Are you going to be completing the study to the point where you will know how many of these 100 schools do require approval?

Mr. MARTIN. We should know exactly by the middle of August.

Mr. DUFFY. Would you be good enough to supply that for the record? [1]

Mr. MARTIN. Yes, sir.

Senator NELSON. On the whole question of the relationship of the profession to the industry, which is an issue we have been discussing, the relationship starts obviously with the freshman medical student in one way or another. Maybe this is not a fair question since you are not a practicing physician, but what makes me curious about the resulting influence of prescribing practices is the recent case of the evaluation of fixed combination antibiotics. In this case so far as I can find out, there is no scientific literature that supports the use of the fixed combination antibiotics. I am not aware of any medical school which supports the use of fixed combinations. The United States Pharmacopeia does not list them. The Council on Drugs, as I mentioned, the former chairman of the council, Dr. Dowling, and the current Chairman, Dr. Adriani, are all critical. All the scientific evidence, and all the literature so far as I am aware is critical. The companies that sell fixed combination antibiotics could not produce for the National Academy of Sciences-National Research Council any controlled scientific studies to prove their efficacy.

How would you explain the fact that nevertheless they are widely prescribed?

Mr. MARTIN. Well, I think your opening statement included the fact that I was not a practicing physician. I can suppose, and I think I have pointed out, one of the reasons is information to the physician. I think the supposition is made by most practicing physicians, certainly by students, that if a drug is on the market, the Food and Drug Administration had said that it is at least an acceptable preparation. And indeed the approval of these drugs by the Food and Drug Administration previously indicated this—I think the recent action to take 75 of these drugs off the market sort of defines this problem. I mean we

[1] This and other supplementary information, when available, will be incorporated in a subsequent volume.