

Senator NELSON. I am not going to run from it because you say we have talked about it before. Let's assume there was no advertising at all, for a moment, which I think would probably lead to the benefit of the profession. Let's assume that now, the only place you could find out about the use of chloramphenicol was to turn to Goodman-Gilman, turn to scientific literature, and they specifically describe its indicated uses, very limited, and they give its side effects, the blood dyscrasia that can result. Do you think doctors would end up prescribing it for something else if that were the only source of information?

Mr. HARRISON. I think that possibility exists. Let's understand the total picture here. Not only does the doctor go to the scientific information contained in publications for what we may call his postgraduate education on any of a number of matters, he also talks with his colleagues, he gets information from them, he attends meetings and so forth. So it is not only the scientific information that may be published; this is what was indicated earlier to you, I think, by Dr. Parrott. He was not indicating that advertising is totally without influence. What he was indicating is that it is another means of communication. And so we stated in our statement. But primarily, the physician receives his important information from the scientific literature, from the information he receives from his colleagues, from his own experience and education, and that information which he may receive in attending hospital staff meetings, county medical society meetings, and other kinds of conferences and meetings which are aimed at providing him with the same kind of information. This is the total picture.

Now, somewhere in this picture is a reminder ad that he sees from time to time about a certain drug and other ads about other drugs that perhaps compete with it. And this is the total picture and I think we can, each of us, draw upon our own experience as to how advertising relates to us.

I do not use any particular golf ball when I go out and play golf, but I certainly see advertisements with respect to different kinds of golf balls. They remind me of these particular balls; I may recall that ball when I am purchasing golf balls, but primarily, I deal in my own experience and the question of what the cost to me may be.

Senator NELSON. I certainly agree that there are a large number of very distinguished, very competent, highly qualified physicians in this country. I have never disagreed with that. It is a great profession. But I am raising the question of the influence of advertising. If advertising does not have an influence, it strikes me as strange that the drug companies spend about \$800 million a year on advertising and promotion.

But let us move to a different drug. Let's take Panalba. Panalba, as you know, is a fixed combination of tetracycline and novobiocin. I want to read to you the principles of advertising in the AMA Journal and then ask you to explain something to me.

Under "Mixtures of Drugs"—this is under the general principles—"Clinical and laboratory data should be submitted for review by the Office of Advertising Evaluation. Clearance depends primarily on showing justification for the rationality of the combination."