

D.B.S. is the Division of Biologics Standards, another agency within the Department of Health, Education, and Welfare. It has responsibility for plasma programs, but its officials contend that its regulations cannot be used to protect blood donors.

"Aside from the welfare of the [prison] subjects," Dr. Jennings observed, "the question of validity of the studies may still be raised—especially the possibility of concurrent testing of drugs."

"Concurrent testing of drugs" apparently refers to testing more than one experimental drug on the same person at the same time. Dr. Jennings could not be reached for elaboration on this point.

Attached to the memorandum was a list of some 175 experimental drugs tested by Dr. Stough and an associate. The list also named the companies for which the work was carried out.

This information had been repeatedly sought by The New York Times when it was preparing an article on Dr. Stough's operations. The article was published in last Tuesday's editions.

The memorandum and the list were made available by the staff of the Senate Subcommittee on Monopoly of the Small Business Committee after part of the information had been given by the agency to a medical newspaper.

In the form that the list of drugs and companies was provided, it was generally meaningless. Many of the drugs were listed by code names and there was no indication of what Dr. Stough reported about them.

It is understood that most of his reports were favorable even though a number of the drugs involved were controversial. Some have been criticized on the ground that they caused serious side effects.

The Food and Drug Administration may provide a more comprehensive view of Dr. Stough's tests when officials appear before the subcommittee at a special hearing scheduled for next Tuesday.

Senator DOLE. Did the FDA give the key to the code to any outside person, or did the FDA break the code for any outside person?

Dr. LEY. The listing in the code as so stated is only for purposes of this list. The file for each one of these products contains a complete disclosure of the components of the medication. We did not, to my knowledge, make this information available in the public area, nor should we.

In many cases, the products are listed as a generic or a trade name. The code is used frequently in investigational work early in the investigation prior to the coining of a trade name for a product. But we did not provide the compositions corresponding to the codes to the press or to the public.

Senator DOLE. Do you know whether or not—do you know, Dr. Ley, when this list of drugs was furnished to this subcommittee?

Dr. LEY. I do not know without questioning the staff. I do not know.

Senator DOLE. The reason I ask the question is that much information furnished to the subcommittee reaches only certain members of this subcommittee and is rarely made available to the minority side. This is unfortunate, hence I wonder if this was given to the chairman or Mr. Gordon, a majority staff member, with any restrictions on its usage with reference to information? Were there any restrictions placed on the report when it was made available?

Dr. LEY. Ordinarily, such items as this are provided to several committees having oversight or general interest in agency operations. Some committees, without mentioning them, I think have files that are as good or sometimes better than ours.

Senator NELSON. May I respond to that question so Senator Dole will have it clear?

Dr. LEY. Yes, sir.

Senator NELSON. The statement, the release was made public to the medical press. After it was made public, the committee counsel, who