Senator DOLE. The reason I raise the question is because of an earlier question by the chairman, that it is a temptation on the part of the investigator to make improper findings depending on whom he represented. It might also be a factor in the amount he is paid.

I also understand that he made reference to a certain prisoner in Alabama who perhaps was paid too much for participation in testing. I am wondering what he was paid, what the going rate was in Alabama. Perhaps this may be in the report which we may receive.

Senator NELSON. $1 a day.

Dr. LEY. Dr. Lisook tells me that the fee varies depending on the test, and I suspect, as usually is the case, on the number of times the prisoner has to be bled. But an average figure across the board would be somewhere about $1 a day.

Senator DOLE. I understand that in the State of Kansas, there was some testing done in the Kansas State Prison at Lansing, but it was terminated by prison officials partly because prisoners could make more money taking pills than by working and some preferred to stay in their cells and take pills than engage in any other activity.

I also understand that in the State of Wisconsin, one of the prisoners has gone to court demanding the minimum wage.

Senator NELSON. A very progressive State.

Senator DOLE. Right; but it is a very real factor and I am not certain whether you can compensate anybody properly. I assume all the tests, most of the tests in institutions are in the phase 1 category, is that correct?

Dr. LEY. Most of the prison-type testing is in phase 1; yes, sir.

Senator DOLE. Now, out of 15,000 new drug investigators, there have been a total of 11, I guess, suspended. I assume there are two possible answers. One is that this is only one-tenth of 1 percent of the total, that the obvious response might be that you do not have an opportunity or the facilities or the funds to properly review the other 14,989. Is that a fair assumption?

Dr. LEY. I am not satisfied with our total effort in this area today, Senator. This is a problem, of course, with every administrator, trying to balance one need against another. I would like to see more effort in this. On the other hand, I do not believe that anyone can be expected to visit every one of the 15,000.

There are other aspects to this overall problem that are equally important. Another one would be that we need some more effective means of getting information directly to the clinical investigator.

This pamphlet is an example of the effort, of our direction. It is not a translation in terms of lay language. But it is a good job. I would like to see this type of information distributed more widely to the investigators by FDA rather than rely totally on the sponsor to provide this. But there are educational activities which are very important in this area which I think we should be doing more of.

Senator DOLE. Well, assuming that a law is passed, the one the chairman is interested in, now pending before another committee—this is not a legislative committee—there is still no assurance there would not be some mistakes. The passage of a law in itself does not assure anything.

Second, there should be a presumption that drug companies are seeking good quality drugs and that the investigators are generally