Another smaller medical ad agency head made some of the same points:

"The value of Council Acceptance is greater for the small advertisers because it makes their products more valuable in the eyes of the physician. It is lessened, though, because of the trade name restrictions. This antagonizes many manufacturers, especially where several have been working on the same sort of drug over the same period of time.

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"More publicity should be given on Council Acceptance, directed at physicians, who generally know little or nothing about its meaning. This would increase the value of the Seal. Also, what Council Acceptance involves should be re-stated to the manufacturers, and consistent treatment should be given to all comers.

"There is too much discrimination and waiving of the rules for the bigger companies. Manufacturers never know where they stand on Council Acceptance on their products. Also, there is too much delay and too many refusals without giving constructive criticisms on products or copy."

A New York ethical drug manufacturer, who certainly would not be considered an opportunist, made the following rather typical comment:

"Since the new F&DA, Council Acceptance doesn't mean nearly as much as it used to. The AMA restrictions don't carry the same weight on new products as they did in the past. It's a good thing to have the Seal if you can get it without too much heartache. But it isn't necessary to have.

"JAMA is frequently left out on our schedules for new products because of Council delays. The F&DA *must* act in six weeks if your case is good. With the Council, it is two or three months at best.

"They want to quibble over copy—have a regular schoolteacher attitude. The Council's attitude is that the industry is a crook. The industry resents this attitude—that the Council is always trying to catch it doing something that is crooked. The biggest bone of contention is that they figure you are guilty till you prove yourself innocent."

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The criticisms of the Councils were practically never that the Council standards for products were too high.

Practically universally, however, the manufacturers and agencies were critical of what they considered the *attitude* of the Councils, their lack of standardization, and the two points which the advertisers considered pointless and archaic, the prohibition of the use of trade names and the refusal to accept any mixtures.

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Several of the manufacturers actually felt that the standards for products were not high enough. One of them put it this way:

"The Council Acceptance Seal is of no more value than the Good Housekeeping Seal. They are getting lax in their standards. It lowers my opinion of the Journal."

Another one said:

"Some doctors feel that the Seal has become too easy to get. For example, we have a good but very potent drug that has to be used very carefully. The specialists resent the fact that it has been okayed for GP's."

Sometimes the value of the Seal lies in the fact that if the manufacturer doesn't have it, his competitors use this fact against him with the doctors.

The larger ethical drug firms, for the most part, attach little or no value to Council Acceptance as a selling aid. One of the country's top drug firms had this to say:

"Being able to tell the doctor that a product is Council Accepted doesn't make much difference to us. The doctor doesn't place any particular value on the Seal. Our detail men do not even bother to tell the doctor that a product is Council Accepted. The fact that (NAME OF MANUFACTURER) makes it, carries more weight than the fact that the Council has approved it.

"In general, most doctors do not know whether a product is accepted or not. over 90% of the dotcors are in this category. If they did pay any attention to the Seal, they would ask about it. I do not recall a single instance where the doctor has asked whether or not our product was Council Accepted."

Three more comments, each following the pattern indicated above, but with slight variance, will suffice to give the sentiments of the firms and people with whom we talked. A New York medical ad agency head:

"The average MD doesn't rely on Council Acceptance, and knows little about it. He relies primarily on the company's reputation. Because it takes so long