

But simply because a drug is new, it is not necessarily better than those already available, safer or even just as good. Often it is even less effective and sometimes more hazardous than the parent drug.

Now, this is the important part, I think.

But they also do harm by their very existence in the drug market. I take the stand that as a general principle everything that adds to the difficulty in dealing with and understanding drugs also makes drugs more dangerous. Thus, the excessive number of needless drugs constitutes a present danger. We can make the useful drugs both less dangerous and more efficient by weeding out the useless, the ineffective and the duplicates, and by so doing, make it possible for the physician to learn in depth about the potent drugs he will prescribe for his patients. We must add only those new drugs that really add something more than their mere presence.

How do you feel about that particular statement by Dr. Modell?

Dr. EDWARDS. In general, I certainly would agree with him. Unfortunately, we lived for several decades in which this basic principle was not either appreciated or was not observed, and I think it is going to take us some time to put some rationality back, if I can use that word, back into the drug scene, and it is a difficult problem and one that I really sincerely believe that we are slowly coming to grips with, but it is going to take some time.

Mr. GORDON. Has your agency adopted any measures to give technical assistance to small business enterprises? What I have in mind is to assist small firms in meeting FDA requirements, as, for example, when a patent expires, or to assist small firms to start producing drugs so as to make them available on a more competitive basis? Have you done anything along these lines?

Dr. EDWARDS. Dr. Simmons can speak to that in just a moment. We certainly are making every effort possible to assist the manufacturer, small and large, in coming to grips with some of our requirements. We do not have a specific body or unit within the Agency that deals only with this particular problem.

I would only say that I wish we had, but again in the allocation of rather scarce resources we have not felt justified in developing a unit such as this. But I think it makes some sense.

Would you want to add anything to that?

Dr. SIMMONS. No.

Senator NELSON. Has the number of inspectors that you have to inspect plants increased, decreased, or remained the same in the past half dozen years?

Dr. EDWARDS. It has gone down. We have fewer inspectors today than we had 5 years ago.

Senator NELSON. Do you happen to have the figures with you?

Dr. EDWARDS. No, but I can certainly provide them for you.

Mr. Goodrich points out that while our total resources have gone up, the additional resources are in other programs. They are in some of the Public Health Service programs that we now have, such as the Shellfish Sanitation program and the Milk Sanitation program, but in terms of the actual number of inspectors that we have in our food and drug program the number has actually gone down.

I can provide you with those specific figures, Mr. Chairman.

Senator NELSON. I would like to have them for the record.

(The subsequent information was received and follows:)