Association signed by 10 or 11 distinguished clinicians, including Dr. Harry Dowling, and Dr. Maxwell Finland.

Despite that, all these formularies which are supposed to be based on scientific knowledge, included these fixed combination antibiotics.

If you are planning a rational scientific method to your selection, how do you explain that, and if that can't be explained, how do we have some assurances that, in fact, these therapeutics committees are using the best available scientific knowledge since a year ago they were violating all of the best scientific methods we know of to date in this country?

Dr. WELLS. I would like to approach the answer to that, Mr. Chairman, strictly on an historical basis. I think your history is correct. I think that we have done many things that were questionable and some of them quite incorrect in medicine. As time goes on we corrected these. I would be surprised if we are not doing many things now that are incorrect that we know not of. We will learn about them, and try to correct them as best we can later.

Beginning in 1946, in VA, we did establish this type of committee just to try to prevent as far as we humanly could this type of recurring error or at least to identify it as early as possible and make the corrections. But in the last analysis the whole practice of medicine is not really a totally scientific matter, but is in part an art of practice and there are many things that we do that do require correction.

I wish we had some way of anticipating those and also of acting on them more expeditiously and perhaps more totally at any point in time. But I think really what you are recounting there is a rather unusual type of thing over the entire history of the practice of medicine in the world.

I think it can be safely said that it was the middle of the first half of this century before a patient going to a physician had an even break as to whether he would come out better or worse. Now, we are gradually improving this situation and hopefully it will be much better in the next generation. But I think we have to face the fact that historically we have done things like going on with Panalba and other things for years and not be able to correct our fault until it was really quite late in the day.

Senator NELSON. But the problem of fixed combination antiinfectives wasn't an issue in dispute among the experts. They were in agreement, whether they were right or wrong, or are even now right or wrong. They were all in agreement for at least 5 years—and your own experts would say that. So far as I know, there is no dispute over the issue. When they finally got the Kefauver bill in 1962 and finally put together the NAS–NRC panels, that is what they came up with. They just reaffirmed what the best people in medicine had known for years and years.

So all I am saying is how come, then, that if that were the agreed-upon fact without dispute in the whole profession, these fixed combinations continued to be in the formulary. Mysteclin F and Panalba were still in there a year ago.

Dr. WELLS. I think what you say is very true, but it is also quite characteristic of the practice of medicine that it simply does not