

and used expert groups and advisory committees. We have some of the best minds in the country to help us make the wisest decisions possible in the interest of all of the American people.

There have been some problems in the past, and many of these have been resolved. Much progress has been made, and more is in store, and many countries of the world are adopting our system.

Any agency making the difficult decisions we are called upon to make—all of it is from the critics, and the critics have never taken the time to adequately inform themselves about what is going on. They have been making unfounded charges, and they are often urged on by those few in the industry who could be better served through a weak Food and Drug Administration.

We welcome any constructive recommendations, and we want the American system to be the best in the world.

Senator NELSON. You are asking the signers of the statement for the basis of their complaints?

Dr. EDWARDS. Since we have never received any documentation from them, we have never communicated with any of them. I am sending each of them a letter to ask them, or welcome them, if they would be willing to come in and sit down and let them discuss their problems, let us discuss our problems with them. And I hope they will accept our invitation.

Dr. SIMMONS. Mr. Chairman, we have some of the specific questions that you have asked the Commissioner to state, in his statement, and we can go into that at this time if you would like, or go into them later, about the charges made by the Dripps Committee.

Senator NELSON. Yes, we did give you some questions to respond to.

Do you agree with the Medical Tribune that the decline on the number of drugs out on the market is due to FDA policy?

Dr. EDWARDS. I think, without any question, that the decrease in the number of "new drugs" has been due to FDA policy. This doesn't mean that this is necessarily bad, as you pointed out a little earlier.

Dr. SIMMONS. The decline of new drugs is falling worldwide. This is not a new or unusual phenomenon. It is due to a lot less combination of drugs being marketed here and overseas.

As to the charge that research has been stifled, that is somewhat hard to believe.

If you consider that we have in the Bureau of Drugs approximately 1,500 New Drug Applications. There is a lot of research going on in this country. There have been a lot of drugs approved in the past few years, but there is a reduction in new drugs which is a worldwide phenomenon.

As far as this country being deprived of useful drugs, I think we can honestly state we know of no instances—or maybe a rare isolated instance—where this country does not at least have one, and usually more, of the same kind of drugs on the market that are available overseas. There is at least one kind of every drug available in this country that is available overseas. I would say that the statement that we are depriving the public of useful drugs is unfounded.

We do have drugs under study in which we found them lacking something, and they are being marketed overseas. That is the negative aspect to that whole picture.