2. The government should particularly refrain from taking a partisan position and establishing a "government line" in an area of medicine and science in which extensive controversy and debate exists among qualified scientists and/or physicians. In the present situation such a position has been taken despite the absence of corroborating studies which have reproduced the UGDP findings, an essential criteria in the establishment of scientific principles. Even if the UGDP study were beyond reproach, which the statement marked "Appendix D" will show it is not, the FDA should not adopt the singular position of one group if contradicting positions are advocated by other qualified scientists and physicians. With respect to the UGDP findings, strong controverting data and extensive comment, disagreement and experience among a large body of extremely well qualified scientists exists and is a matter of scientific record. Furthermore, in this situation the FDA has ruptured its own rule of fair balance in failing to present the other side of the issue in its mailings and statements, even as it has itself taken sides in the issue.

3. The single study upon which the FDA bases its action has been criticized on professional, scientific, clinical, statistical, and other grounds. Furthermore, FDA action did *not* properly reflect the criticisms and recommendations of its own medical advisory panel on the subject. In effect, despite repeated requests for over a period of a year from many different sources, the basic data of the study remain unavailable to the scientific community and the recent report on phenformin [1] presents an inadequate amount of protocol material to enable adequate scientific evaluation. The 6/23/1971 FDA Current Information Bulletin nevertheless made the general statement that "although this study considered only one sulfonylurea, tolbutamide, it raises serious questions as to the ultimate place of all antidiabetic agents in the treatment of diabetes mellitus."

This petition for a reversal and clarification of the FDA's positions as stated above is thus grounded not only on the basis of the fundamental principle of the separation of science and state, but also on the fact that legitimate scientific controversy exists and the UGDP study has been controverted by a large and leading body of specialists in the field as being more than just erroneous. In point of fact, the FDT has sought in this situation to regulate therapy on the basis of an experiment which is based on faulty methodology, which has disregarded many essential recommendations related to the true *therapeutic* application of the agents under study, and in doing so has extrapolated without valid statistical basis, thus flying directly in the face of the caveat of the authors of the UGDP study themselves, to wit:

"It should be noted that any conclusion reached in this study pertains only to the type of patient studied and to the specific hypoglycemic agents and dosage schedules used. Extrapolation of findings obtained in the UGDP to other dosage schedules of the same drug or to other chemically related hypoglycemic agents not included in this study must be made on a judgmental and nonstatistical basis." [2]

In addition, it was recently reported that Dr. Christian R. Klimt, the statistical coordinator of the UGDP study, stated that a similar trial of diabetic oral agents, which he will be conducting in Yugoslavia under FDA auspices, will employ a flexible dosage regimen and be confined to a symptomatic diabetic population. [3] The use of fixed dosage and asymptomatic patients are two of the serious limiting factors in the UGDP study (see Appendix D). This action by the statistical coordinator indicates the merit of the most serious criticism which has been levelled at the UGDP report.

It has also been reported that the protocol in regard to the double blind technique may not have been followed in every partcipating clinic for all patients (see Appendix D, Part 2).

Lastly, it should be noted that the conclusions of the study have been specifically rejected by the Canadian Food and Drug Directorate, the Canadian Diabetes Association, the British Committee on Drug Safety, the British Diabetes

[1] "Effects of hypoglycemic agents on vascular complications in patients with adult-onset diabetes," JAMA, August 9, 1971.
[2] "University Group Diabetes Program," *Diabetes* 19, Supp. 2, 1970.
[3] Drug Trade News, August 23, 1971.