

or "possibly effective" drugs. For example under the Medicaid program we found that in Mississippi during a 7-1/2 month period in 1970-71 nearly \$90,000 was paid for two prescription drugs classified by FDA as "ineffective" and one as "possibly effective". In Ohio, during 4 months in 1970, about \$138,000 was spent for 43 drugs classified as "ineffective" by FDA and in Illinois and New Jersey during 2 months in 1970 about \$99,000 was spent on prescriptions for 10 randomly selected drugs classified by FDA as "ineffective". See Appendix I for a summary of such drugs paid for in Mississippi, Illinois, Ohio, and New Jersey.

INFORMATION SOURCES USED BY
PHYSICIANS IN SELECTING DRUGS

In the 1971 hearings, the Subcommittee expressed interest in the sources of information considered by physicians in making their selections of prescription drugs.

Two studies, one by Milton S. Davis, Ph.D. and Lawrence S. Linn, Ph.D., under a Social Security Administration grant and the other by a Professor of Pharmacy and Pharmaceutical Chemistry, University of California, shows that detail men were the most important source of information to physicians.

The American Medical Association (AMA) in 1971 published a manual entitled "AMA Drug Evaluations" to provide physicians with a convenient source of information for the sound use of drugs. This manual contains an evaluation by the AMA Council on Drugs regarding the effectiveness of drugs, information on the pharmacology and therapeutic indications of drugs, and preparations available, dosage, and generic and proprietary names.