dispensed in the United States. The pharmacist's interest stems primarily from the fact that the pharmacist knows how important the medication is to the patient and the pharmacist has to look the patient or a member of his family in the eye. The pharmacist has no vested economic self-interest in the price the manufacturer charges for his drug products because the pharmaceutical service system provides that the pharmacist be reimbursed what the pharmacist pays for the drug product. On the other hand, the pharmacist does have an obvious professional objective in providing patients with effective and safe medication at reasonable prices.

No subject investigated by your subcommittee in the almost 7 years of your extensive work is, from the pharmacist and patient point of view, more important than the hearings you are now holding. More than two billion prescriptions are being dispensed annually—more than five million daily—and the patients who take these prescriptions have a right to expect their government to resolve the question of how much confidence can be placed in the medicines their pharmacists dispense.

APhA as the national professional society for all pharmacists has no ax to grind for anybody, but the patient and his pharmacist. The pharmacist does not care whether a drug product is made and marketed by a large firm or a small firm, as long as the pharmacist can be assured of the product's safety and efficacy. APhA knows that high quality prescription drugs can be and are fabricated by manufacturers of all sizes.

APhA also knows that the hallmark of quality is not derived by giving a product a euphonious brand name. And we have watched with interest the development of so-called "branded generics" by such fine firms as Lilly, Lederle, SKF and Upjohn.

Simply stated, the situation in our country today is that one agency of the Federal Government says that you can depend on the quality of the Nation's drug supply, and another agency of the same Government would like you to believe otherwise. Regardless of how this controversy is resolved, APhA is sick and tired of having the finest drug supply in the world under a constant cloud of suspicion. It was bad enough when only the pharmacist was the target of this propaganda, but now prescribers and patients are asking the pharmacist for assurance.

APhA believes the country can ill afford further delay in putting the issue to rest.

Thank you, Mr. Chairman. I will be glad to answer questions now or after Dr. Feldmann submits his testimony.

Senator NELSON. Well, when you refer to "another agency of the same government," you are referring to the Defense Department?

Dr. APPLE. Mr. Chairman, I am saying that HEW—the Food and Drug Administration—says the drug supply is good, and the Department of Defense has been casting clouds over the Nation's drug supply for the last several years with statements made by some of their spokesmen.

Senator NELSON. Well, the same thing is true, is it not, of the Pharmaceutical Manufacturers Association in respect to generics?