

Dr. FELDMANN. I think that largely, Mr. Gordon, this depends upon how one defines "a close working relationship." It is true that we have had contact with them when we have sought information; they have at times provided it to us, such as the purchase specifications, which they have made generally available to all bidders, so that this was not unusual information. But other than that, they have not provided us with much information and, certainly, none of the information that I have just described here—namely, where they have encountered problems, and what drugs they have encountered problems with, and so forth.

We have made a practice of trying to supply them with information. I note in yesterday's testimony of Commissioner Schmidt he mentioned any number of areas that FDA has provided information to the DPSC and DOD. Again, unfortunately, there has been little response, very little—it has been sort of a one-way street.

This organization mentioned earlier, this Intra-Governmental Professional Advisory Council on Drugs and Devices, has a working group on specifications and quality control of drugs. This working group is chaired by Mr. Feinberg of DPSC, and the meetings of this group have been progressing with less and less frequency. They have had only one meeting in over the last year and a half. There have been no minutes issued from these, at least from the last couple of meetings.

I do not know how else I can characterize this, Mr. Chairman, but I think that the idea of "a close working relationship," perhaps is a subjective evaluation, but I think it may be a bit exaggerated here.

Mr. Chairman, it is our position that pharmacists require factual information in order to be able to select and dispense quality drug products which will be safe and effective for the needs of the patient. Moreover, it is also our position that the pharmacist requires such information in order that he might be able to select, from duplicative drug products of comparable quality, that product which will represent the most reasonable cost to the patient.

If the Department of Defense has information which would be useful and pertinent in distinguishing between good and bad drug products or in distinguishing between good and bad drug manufacturers, it is our plea that your committee see that such information—which was developed at taxpayers' expense—be made publicly available, so that it might be used to the public's benefit. We intend also to continue our efforts to obtain such information from DOD directly. By the same token, if the suggestions of widespread availability of defective drugs—and of widespread existence of incompetent manufacturers—represent exaggerations, hyperbole, or unsupported propaganda, then your committee would certainly render an equally beneficial service by exposing the truth of the matter.

Thank you, Mr. Chairman.

Senator NELSON. You state on page 9 that you made in September a formal request for such information "was filed with the Defense Supply Agency of DOD under provisions of the regulation entitled Availability to the Public of Official Information as promul-