(d) the cause of the conflicting and confusing reports appearing in the medical and pharmaceutical press, as well as the pressures exerted by various outside interests on the deliberations of the Drug Research Board;

(e) any change in the NAS/NRC position since the promulgation of the origi-

nal resolution on January 21, 1975.

I must emphasize that I speak only for myself and cannot represent the entire DRB (Drug Research Board), the NRC/NAS (National Research Council/National Academy of Sciencies) or any other organization, institution, group, or individual. Furthermore, I speak as an individual physician who has practiced medicine for more than 20 years, during which time I have myself written plenty

of prescriptions, and this is my personal statement.

I would like to insert here a reference to an article which just appeared in the last issue of the Annals of Internal Medicine which is not referred to in the statement. This is volume 82, No. 5, May 1975, page 601. The title is "Savings from Generic Prescriptions, A Study of 33 Pharmacies in Rochester, N.Y.," by Horvitz, Morgan and Fleckenstein. It is not an extensive study, but it is an interesting approach. And there are two statements and the discussion I would like to read. One is: "Physicians are poorly informed as to which drugs are available in generic versions," as compared with pharmacists (page 606). This to me fits exactly with the thinking that went into our resolution, and they back this up with some data in this article.

Then another statement here is that, "Physicians should at least stop to consider whether there is good reason to prescribe a specific product when more economical alternatives are available," 606). And this is in the official journal of the American College of

of Physicians. These are not wild statements.

The resolution under discussion here was approved by the DRB at its regular fall meeting October 25, 1974. Thirteen of the fourteen members present at that meeting voted in favor of the resolution. The 14th member, Dr. Richard Crout, abstained because of his position as directed of Bureau of Drugs of the FDA (Food and Drug Administration). There were a series of seven meetings which are listed here. The first was July 11, 1973, at an executive meeting between representatives of the DRB and the PMA (Pharmaceutical Manufacturers Association). It was suggested then that the DRB might review existing drug antisubstitution legislation, with a view to endorsing existing legislation and strengthening the stand against attempts to change it.

On November 30, 1973, at another executive session of DRB and PMA representatives, a draft resolution was passed which strongly

endorsed existing antisubstitution laws.

The CHAIRMAN. May I ask a question at this point? In the third paragraph on page 2 you said there were 13 of the 14 members

present. Is that the total membership?

Dr. PITTMAN. No sir. The total membership is 18. And that is listed in an attachment in the back which includes the later press release. Of the 18, 9 are in academic positions, ? are in industry only-Doctors Drill, Hodges, and Price—and 2 are identified now as academics, but actually have had close ties with industry. Dr. Kohlstaedt worked with the Lilly Co. for many years. Dr. Papper is on the board of directors of the Abbott Co., I believe. And there are three Federal