EXHIBITS PROVIDED BY THE DRUG RESEARCH BOARD, NATIONAL ACADEMY OF SCIENCES

STATEMENT BY James A. Pittman, Jr., M.D., Executive Dean
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BEFORE SUBCOMMITTEE ON MONOPOLY,
SENATE SMALL BUSINESS COMMITTEE
on 16 May 1975.

Mr. Chairman and Members, I am glad to comply with your request to appear before you to discuss interprofessional relations between physicians and pharmacists with particular reference to drug antisubstitution laws. Your letter to me of April 29 requested that I discuss the following:

"(a) the development of the Drug Research Board resolution concerning drug substitution;

"(b) the respective role of the physician and pharmacist;

"(c) the need for justification by the physician when he designates a more expensive product of a specified manufacturer;

"(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 original 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 Sciences) 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.

With regard to item (a), the resolution under discussion is as follows:

RESOLUTION OF THE DRUG RESEARCH BOARD WITH REGARD TO DRUG PRODUCT ANTI-SUBSTITUTION LAWS

1. WHEREAS, The patient's welfare should be the ultimate goal of statutes and regulations concerning drug product selection, which in operational terms means the best product for the lowest cost, and

2. WHEREAS, The physician must have the ultimate responsibility and authority in drug product selection, since he has the fullest knowledge of the patient's needs and responses with attendant obligation to be held accountable for his selection of particular drug products, and

3. WHEREAS, The pharmacist may, in some situations, have greater knowledge of drug products than other health professionals, including knowledge of both quality and costs, and