

12290 COMPETITIVE PROBLEMS IN THE DRUG INDUSTRY

I shall add further comments on several of these meetings and related discussions.

The draft resolution passed at the executive session between representatives of the DRB and the PMA on 30 November 1974 stated strong opposition to any legislation that would contravene the physician's right to choose specific drugs and recommended that, if the Assembly of Life Sciences (ALS) concurred, the sense of that resolution be transmitted to the relevant government agencies and professional groups.

The data presented at the meeting of 21 June 1974 were interesting and are probably unknown to most physicians of the United States. They show that, although a given chemical entity, such as chloral hydrate or tetracycline, may be dispensed under the brand name of a major company or by a smaller less well known company, and although these may vary widely in cost to the customer, these differences do not preclude the fact that all of these can have been made in a single laboratory unidentified to the customer. These data, which were published in the journal *California Pharmacist* in October and November 1973 and February and March 1974, were presented in part to you at your hearings of February 21, 1974 (Hearings before the Subcommittee on Monopoly of the Select Committee on Small Business, United States Senate, Ninety-Third Congress, Second Session, on Present Status of Competition in the Pharmaceutical Industry, Part 24, pages 10168 through 10172).

In particular, data such as those immediately below impressed us:

Chloral Hydrate 500 Milligram Capsules

<u>Manufacturer</u>	<u>Distributor</u>	<u>Average Wholesale Price</u> <u>per hundred</u>
R. P. Scherer	H. R. Cenci Labs	\$1.60
	ICN Pharmaceut.	1.60
	Invex Pharmacy	
	Ladco Labs	
	Life Labs	
	MSD	4.04
	Progréss	
	Rexall	
	Squibb	5.00
	Stanlabs	2.15
	Stayner	1.60
	Towne, Paulsen and Co.	1.60
	United Pharmacy	
	Alliance Labs	
	Hoack Labs	
	McKeeson Labs	1.75
	Purepak Pharmacy	1.48