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approximately 40 percent of a drug patent's life is typically over by the day it reaches the market. At that point, the innovator must incur very large expenses, additional to a research and development outlay of perhaps \$11 million, in order to bring the drug to the health professions' attention and to fully explain its therapeutic properties and its toxicity. In time, if the drug offers a meaningful advantage, it may capture an appropriate market share, and begin to provide a return on the research and promotional investments that have been put into it.

It is necessary to bear in mind here that even though the new product may be a valued contribution to therapy, the likelihood that it will be a major commercial success is small. And yet the R&D costs are approximately the same, whether the product will be prescribed 20 million times a year, or 20 thousand.

In recent years particularly, new drug entities have been exceptionally costly to develop in relation to their commercial importance -- a cost which has been borne by sales of products that were not patented and others whose patents are nearing expiration.

Relatively few drugs, then, achieve enough commercial importance to repay their own cost and also to support entirely new research. To the extent that MAC would force fewer drugs to carry the financing of all research, serious problems will follow.

The thought has been expressed by some that the prices of patentprotected drugs might be raised to a level sufficient to cover research expenditures, but such a suggestion completely ignores the price competition faced by all drugs in a therapeutic category. It is